

Company Number: 06054614
Charity Number: 1127044

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED
TRUSTEES' ANNUAL REPORT & FINANCIAL STATEMENTS
31 DECEMBER 2013

Baker Tilly Tax and Accounting Limited
3rd Floor, One London Square,
Cross Lanes, Guildford,
Surrey GU1 1UN

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

TRUSTEES' ANNUAL REPORT for the year ended 31 December 2013

The trustees present their report and the financial statements of The British Association of Urological Surgeons Limited (known as "BAUS" or the "Association") for the year ended 31 December 2013.

REFERENCE AND ADMINISTRATIVE DETAILS

The trustees of the charity, who are also the directors of the company, are the Officers of the Association, who have held office since 1 January 2013 as follows:

A D Joyce	(2010-2014)	President
M J Speakman	(2012-2014)	Vice President
K J O'Flynn	(2013-2015)	Honorary Treasurer (from 18 June 2013)
	(2011-2013)	Honorary Treasurer Elect (until 18 June 2013)
S R Payne	(2011-2013)	Honorary Treasurer (resigned 18 June 2013)
K Anson	(2013-2015)	Honorary Treasurer Elect (appointed 18 June 2013)
F X Keeley	(2013-2015)	Honorary Secretary (from 18 June 2013)
	(2011-2013)	Honorary Secretary Elect (until 18 June 2013)
D Summerton	(2013-2015)	Honorary Secretary Elect (appointed 18 June 2013)
A C Thorpe	(2013-2015)	Co-opted Trustee (from 18 June 2013)
	(2011-2013)	Honorary Secretary (until 18 June 2013)
S P Bramwell	(2013-2015)	Co-opted Trustee (appointed 18 June 2013)
D J Jones	(2013-2015)	Co-opted Trustee (appointed 18 June 2013)
J B Anderson		Co-opted Trustee (deceased 27 May 2013)
R S Kirby	(2011-2013)	Co-opted Trustee & Ex-Officio Council Member (resigned 18 June 2013)
S Minhas	(2011-2013)	Co-opted Trustee & Elected Regional Representative (resigned 18 June 2013)

The principal address of the charity and the registered office of the company is the offices of The British Association of Urological Surgeons Limited at The Royal College of Surgeons of England, 35-43 Lincoln's Inn Fields, London WC2A 3PE.

The charity is registered under the charity number 1127044, and the company is incorporated with the company registration number 06054614.

The trustees have made the following professional appointments:

Banker:	National Westminster Bank plc, PO Box 2021, 10 Marylebone High Street, London W1A 1FH
Accountant:	Baker Tilly Tax and Accounting Limited, 3 rd Floor, One London Square, Cross Lanes, Guildford, Surrey GU1 1UN
Auditor:	Baker Tilly UK Audit LLP, Davidson House, Forbury Square, Reading, Berkshire RG1 3EU
Investment Managers:	Quilter Cheviot Limited, One Kingsway, Longacre, London WC2B 6AN Sarasin & Partners, Juxon House, 100 St Paul's Churchyard, London EC4M 8BU

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The following key senior members of staff are responsible for the day-to-day management of the charity:

E A Bishop
P Hagan

Chief Executive & Company Secretary
Deputy Chief Executive

STRUCTURE, GOVERNANCE AND MANAGEMENT**Status & History**

The British Association of Urological Surgeons Limited is a registered charity, and a company limited by guarantee, not having share capital. Every member undertakes to contribute an amount not exceeding £1 to the assets of the charity in the event of the charity being wound-up during the period of membership, or within one year thereafter.

BAUS originally came into existence as an unincorporated association that was founded in 1945 and existed to promote the highest standard in the practice of urology for the benefit of patients by fostering education, research and clinical excellence. BAUS is a membership based charity, and qualified medical practitioners practising in the field of urological surgery are eligible to apply for membership.

The new corporate entity was incorporated on 16 January 2007, and became a registered charity on 4 December 2008. With effect from 1 January 2010, all the trading activities, assets and liabilities of the unincorporated charity that was The British Association of Urological Surgeons (charity number 210505) were transferred to The British Association of Urological Surgeons Limited.

The Association is governed by the rules and regulations set down in its company Memorandum and Articles of Association, originally dated 16 January 2007.

Organisational Structure

The trustees and directors of BAUS have legal and fiduciary responsibility for the Association.

The trustees and directors are the Officers of the Association (the President, Vice President, Honorary Secretary, Honorary Secretary Elect, Honorary Treasurer and Honorary Treasurer Elect) and up to four co-opted trustees.

The Council of the Association plays a pivotal role in determining the strategic and professional direction of BAUS, ensuring it is responsive to the needs and views of its membership. Council members include the Officers, 16 regionally elected Council members, 11 ex-officio members (including the Chairmen of the five sub-specialty Sections) and one invited (non-voting) member.

The Officers are elected nationally by voting BAUS members and regional Council members are elected by BAUS members within the designated regions. Regional Council members serve for three years with the possibility of re-election for a further two years.

Council meets three times a year and is chaired by the President. The Chief Executive or Deputy Chief Executive are always in attendance. Council is advised by its ex-officio members and sub-committees across the full range of the Association's activities. Each sub-committee submits formal reports for consideration, discussion and, where appropriate, ratification by Council at each of its meetings. Each sub-committee has a representative at Council so that Council members can ask questions.

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In addition to the Officers of the Association, listed above, the following members have served on the Council since 1 January 2013:

Elected Regional Representatives

A Adamson	(2013-2016)	(from 18 June 2013)
P Bose	(2013-2016)	(from 18 June 2013)
T Browning	(2013-2016)	(from 18 June 2013)
S P Bramwell	(2009-2013)	(until 18 June 2013)
P Dasgupta	(2008-2013)	(until 18 June 2013)
D Greene	(2012-2015)	
D Hanbury	(2013-2016)	(from 18 June 2013)
D J Jones	(2009-2014)	
P Keane	(2010-2013)	(until 18 June 2013)
J Kelleher	(2008-2013)	(until 18 June 2013)
H Kynaston	(2008-2013)	(until 18 June 2013)
S Liu	(2008-2013)	(until 18 June 2013)
G Mann	(2013-2016)	(from 18 June 2013)
J McKnight	(2013-2014)	(from 27 November 2013)
R Meddings	(2012-2014)	
S Minhas	(2011-2014)	
M Mokete	(2013-2016)	(from 18 June 2013)
	(2012-2013)	Co-opted (until 18 June 2013)
J Parry	(2008-2013)	(until 18 June 2013)
A Rane	(2010-2015)	(re-elected 18 June 2013)
S Subramonian	(2013-2014)	Co-opted (from 18 June 2013)
D Summerton	(2008-2013)	(until 18 June 2013)
B Thomas	(2013-2016)	(from 18 June 2013)
G H Urwin	(2009-2013)	(until 18 June 2013)
K Walsh	(2011-2014)	
N Watkin	(2013-2016)	(from 18 June 2013)

Ex-Officio Council Members

R Pickard	(2012-2014)	Chairman, Section of Academic Urology
D Summerton	(2012-2014)	Chairman, Section of Andrology & Genito-Urethral Surgery
K Anson	(2012-2013)	Chairman, Section of Endourology
R Morley	(2013-2015)	Chairman, Section of Female, Neurological & Urodynamic Urology (from January 2013)
T O'Brien	(2011-2014)	Chairman, Section of Oncology (re-appointed January 2013)
C Blick	(2013-)	Trainee Member Representative (from 18 June 2013)
R Kirby	(2007-)	The Urology Foundation
D Quinlan	(2010-)	Chairman, Executive Committee BJU International
S Khan	(2013-2016)	Director, BAUS Office of Education (from 18 June 2013)
T Greenwell	(2010-2013)	Director, BAUS Office of Education (until 18 June 2013)
B Grey	(2012-)	Trainee Member Representative (until 18 June 2013)
K J O'Flynn	(2010-2013)	Chairman of the Specialist Advisory Committee in Urology (until 18 June 2013)

Invited Member (Non-Voting)

P Aslet	(2012-2014)	British Association of Urological Nurses Representative
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Sub-Committees*St. Peter's, St. Paul's and BAUS Gold Medals Committee*

The St Peter's, St Paul's and BAUS Gold Medals are awarded to individuals who have made outstanding contributions to the advancement of the Association and to urology in general. The committee meets annually, under the chairmanship of the President of the Association, to consider nominations and to make recommendations for the awards to BAUS Council.

The UROLINK Committee

The UROLINK Committee meets twice a year, and is responsible for the organisation, financial administration and running of UROLINK. The aims of UROLINK are:

- to promote the provision of appropriate urological expertise and education worldwide;
- to encourage the development of training opportunities and provide advice to overseas trainees;
- to advise Council on issues relating to the developing world;
- to help co-ordinate the development of links with national and international urological associations; and
- to maintain the high standing of British urology within the world arena as well as providing professional links of benefit to the developed and developing world.

At present, there are 11 committee members who represent a broad range of interests in the developing world, but principally in Africa. Other faculty members or representatives of other groups, associations or from industry may be asked to attend committee meetings to help achieve the aims of UROLINK.

Data & Audit Committee

The Data & Audit Committee was established in 2007 to oversee the Data and Audit Project which is a web-based application for data collection, retrieval and analysis of all BAUS audits across urology and its sub-specialties. The application was developed by Nuvola and allows on-line immediate data entry and access to data for analysis, annual appraisals and recertification. The Data and Audit Committee is chaired by one of the elected members of Council and its members include the Vice President, audit leads for each of the Sub-Specialty Sections and the BAUS Audits and Cancer Registry Manager.

Education Committee

The establishment of the Education Committee was agreed by BAUS Council at its meeting in September 2011. The Association wished to develop a clear and comprehensive strategy for the identification and support of the educational requirements of clinicians in the practice of urology, medical students with an interest in developing a career in urology and other healthcare professionals involved in the treatment of urological patients in order to support their continuing professional development needs from "cradle to grave". It was important to draw together the various elements of educational provision under the umbrella of the Education Committee as it was essential BAUS had a clear strategy in relation to the provision and quality assurance of education in urology. The Committee is chaired by one of the Trustees and includes representatives of the sub-specialty sections.

Office of Education

The Office of Education was established by BAUS in January 1997 in response to increasing demand by trainees and urologists to have structured educational material delivered to them on a regular basis. It exists to provide high quality educational activities to trainees, established urologists and all professionals involved in the specialty of Urology in the UK. It is the Specialist Advisory Committee in Urology, in association with the General Medical Council that sets the necessary standards to become a qualified urologist in the UK and the Intercollegiate Board in Urology that tests the standards of knowledge acquisition through the FRCS(Urol) examination. The aim of the Office of Education is to ensure that adequate teaching is delivered to maintain these standards.

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The Director of the Office of Education is a practising urologist appointed for a three year term. The position is renewable for a further two years to a total of five years. The Director's employing trust is reimbursed by BAUS for two sessions per week, so the Director has sufficient protected time to undertake the role. The Director sits on the Education Committee and on Council as an ex-officio member.

Sub-Specialty Sections

BAUS has five sub-specialty sections:

- BAUS Section of Oncology formed in 1998
- BAUS Section of Endourology formed in 2002
- BAUS Section of Female, Neurological and Urodynamic Urology formed in 2002
- BAUS Section of Andrology and Genito-Urethral Surgery formed in 2003
- BAUS Section of Academic Urology formed in 2007

The Sections aim to improve standards and quality of practice, within their sub-specialties, by promoting training, research and development. Members of the Association can join up to three Sections which are relevant to their particular areas of practice. Each Section is administered by its own Executive Committee which is elected from within the Sections' membership. Each of the Sections organises conferences and training courses throughout the year.

The surgeons who make up the Executive Committees of each of the Sections give their time voluntarily to these activities. The Section chairmen are ex-officio members of BAUS Council.

The Secretariat of BAUS

The day-to-day management of BAUS is entrusted to the Chief Executive, E A Bishop. The Association currently employs one part time and five full time members of staff.

Method of Recruitment, Appointment, Election, Induction & Training of Trustees

The trustees of the charity are the Officers and up to four co-opted trustees.

Recruitment

Details of vacancies for Officer posts are circulated to voting members of the Association. Candidates, who must be voting members in good standing, are proposed and seconded by appropriate sponsors, also voting members in good standing, and nomination forms are submitted to the Honorary Secretary by a given date. Candidates are required to provide a written statement in support of their application, the details of which are circulated to the members who are the electorate. The election process is conducted in accordance with the Rules of the Association.

Appointment & Election

The following procedural details apply to the Officers:

The Officers of the Council comprise the President, Vice-President, Honorary Treasurer, Honorary Treasurer Elect, Honorary Secretary and the Honorary Secretary Elect, all of whom are elected at the Annual General Meeting.

The President holds office for two years from the time of the Annual General Meeting. The Vice-President holds office for two years thereafter becoming President.

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The Honorary Secretary holds office for two years from the time of the Annual General Meeting. The Honorary Secretary Elect holds office for two years thereafter becoming Secretary.

The Honorary Treasurer holds office for two years from the time of the Annual General Meeting. The Honorary Treasurer Elect holds office for two years thereafter becoming Treasurer.

All Officers are elected by the voting members of BAUS.

Induction & Training

To be eligible for election as a trustee an individual must be a voting member of the Association, and therefore all of those elected will have a degree of familiarity with the workings of the Association which are set out in full on the BAUS website. However, mindful of the importance of trustee induction and training, the Association has developed an induction pack for new trustees and this is available for all trustees.

The induction pack includes 'The Essential Trustee – what you need to know' published by the Charity Commission, the trustees' annual report and financial statements for the previous financial year, minutes of Trustee and Council meetings for the 12 month period before the newly elected trustees formally begin their period of office and general information on the dates and times of trustees meetings.

Additional training is provided by the charity for trustees on an on-going basis as the need arises.

Risk & Corporate Governance Matters

The trustees of the Association have been tasked with risk management and corporate governance matters, with the Honorary Treasurer as the lead. The trustees and the Council generally take a low risk approach to the management of the Association, and they seek to minimise all risk exposures through good governance by maintaining adequate and appropriate systems and procedures throughout the operations of the Association.

The key risk for the Association relates to attendance at the Annual Scientific Meeting and the associated Trade/Medical Exhibition, which is normally expected to generate around 50% of the Association's annual income as well as being the principal forum each year for the dissemination of information. Significant effort has gone into developing the meeting to ensure the programme is attractive and relevant to BAUS members and others practising in the field of urology.

The Association maintains a comprehensive risks register which is reviewed regularly by the trustees.

Trustees' Responsibilities in the Preparation of Financial Statements

The trustees (who are also the directors of The British Association of Urological Surgeons Limited for the purposes of company law) are responsible for preparing the trustees' annual report and the financial statements in accordance with applicable law and regulations.

Company law requires the trustees to prepare financial statements for each financial year. Under that law, the trustees have prepared the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law).

Under company law, the trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including income and expenditure, of the charitable company for that period.

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In preparing those financial statements, the trustees are required to:

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

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

The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from the legislation in other jurisdictions.

Auditor

Baker Tilly UK Audit LLP has indicated its willingness to continue in office.

Statement as to Disclosure of Information to the Auditor

The trustees at the date of approval of this trustees' annual report confirm that so far as each of them is aware, there is no relevant audit information of which the charity's auditor is unaware, and the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

OBJECTIVES AND ACTIVITIES**Charitable Objectives**

The charitable objective for which the charity was established is:

To promote the highest standard in the practice of urology for the benefit of patients by fostering education, research and clinical excellence.

Charitable Activities

Urology deals with specific diseases and disorders of the male genitourinary and female urinary tract and urologists are combined medical and surgical specialists who treat men, women and children with kidney, bladder, prostate and urinary problems. Urologists also care for men's sexual and reproductive health.

In order to meet its charitable objective, the trustees have set an overall goal for the Association to do everything within its powers to support education, research and clinical excellence in the specialty of urology for the benefit of patients. In pursuance of this overall goal, the principal activity of the charity is the dissemination of information as it relates to the specialty.

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In practice, the Association promotes and arranges scientific meetings covering every aspect of the practice of urology. These include an Annual Scientific Meeting and various other meetings organised by the sub-speciality sections. The Association supports the education of urologists through the activities of the Office of Education.

The Association provides advice and representation to a number of other bodies concerned with the practice of surgery, and urology in particular. These include the surgical Royal Colleges, the Federation of Surgical Specialist Associations, the Specialist Advisory Committee in Urology, the Intercollegiate Board in Urology, the Department of Health, the National Institute for Health and Care Excellence, the Healthcare Quality Improvement Partnership and Urological Associations in the developed and developing world.

The Association provides advice and support to its members and produces guidelines of good practice in urology.

Indicators, Milestones & Benchmarks

In accordance with the primary objective of BAUS, to date the key measures of performance for the Association have been:

- the level of engagement with the membership as demonstrated by membership numbers and participation in elections;
- participation in the meetings and educational programmes organised by the Association and delegate feedback;
- income generated by these meetings; and
- website usage.

The Officers and Council review the Annual Scientific Meeting, which generates more than half the Association's annual income, including attendance rates by day and by category of registration and invite feedback from delegates and exhibitors. At the Annual Scientific Meeting, the President, the Honorary Secretary and the Chief Executive meet with representatives from exhibiting companies to review the exhibition and to identify ways in which it can be improved upon for the following year.

Public Benefit

The trustees have taken The Charity Commission's general guidance on public benefit (contained within the guidance publication "Charities and Public Benefit") into consideration in preparing their statements on public benefit contained within this trustees' annual report.

Benefits & Beneficiaries

In accordance with its charitable objectives, the Association strives to support education, research and clinical excellence in the specialty of urology. In doing so, the Association seeks to improve the quality of medical care for the benefit of patients. The charity's ultimate beneficiaries are therefore patients, and benefits to patients are provided through advancing knowledge of, practice in and standards for the specialty.

Trustees' Assessment of Public Benefit

The main charitable objective of the Association is to promote a high standard in the practice of urology for the benefit of patients. In pursuance of this overall goal the principal activity of the Association is the dissemination of information as it relates to the specialty. In practice the Association promotes and arranges scientific meetings covering every aspect of urology. Charitable funds are also used to support delegates attending other meetings in the field of urology. The Association works closely with the surgical Royal Colleges with regard to setting the standards for urologists in respect of the requirements for revalidation. The trustees monitor other measures such as the number of members and non-members who have indicated attendance at the Association's meetings have helped them keep up to date in their practice and consequently supported them in maintaining and improving the standard of care for their patients.

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Grant Making Policy

BAUS is not primarily a grant making charity, however specific requests for funding and assistance are considered on a case-by-case basis and in the light of the Association's charitable objectives and the availability of appropriate funds. In the first instance, the Officers of the Association would consider any request and prepare a report with recommendations for the Council. No grant would be awarded or monies committed without the approval of the trustees and Council.

Representation on Other Bodies

The Association provides advice and representation to a number of other bodies concerned with the practice of surgery, and urology in particular. BAUS is represented by trustees, Council Members and Association Members as follows:

Council of the Royal College of Surgeons of England
M J Speakman

Invited Review Mechanism Standing Committee of the Royal College of Surgeons of England
D Jones

Specialty Advisory Board of the Royal College of Surgeons of Edinburgh
A C Thorpe

Surgical Forum and Federation of Surgical Specialist Associations
M J Speakman

BJU International Executive Committee
R MacDonagh

Intercollegiate Board in Urology
S McClinton

Specialist Advisory Committee in Urology
A Bdesha, P Dasgupta, A Dickinson, T Greenwell, A D Joyce, M S Khan, J Noble, M Palmer, I Pearce, R Plail, D Shackley, D Thomas

The Urology Foundation
A D Joyce

UEMS / EBU
J Nawrocki, M Aitchison

Children's Surgical Forum
P A Jones

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ACHIEVEMENTS AND PERFORMANCE

Activities & Events

During 2013, the Association organised the following meetings and other similar events:

Annual Scientific Meeting at Manchester Central.

Section of Oncology

Annual Meeting, incorporating the annual meeting of the British Association of Uro-Pathologists, held at the The Sage, Gateshead in November with 322 participants (275 in 2012).

Section of Endourology

- Annual Meeting was held at RIBA in London in April with 163 participants (178 in 2012).
- One practical skills course (dry lab) was held at the Cusheri Centre, Dundee in April with 17 participants.
- Annual Operative Endourology Course (a residential course for up to four senior trainees) was held at Pinderfields Hospital, Wakefield - 4 participants.

Section of Female, Neurological and Urodynamic Urology

The Section Annual Meeting was held as part of the BAUS Annual Meeting in Manchester in June.

Section of Andrology and Genito-Urethral Surgery

The Section Annual Meeting was held as part of the BAUS Annual Meeting in Manchester in June.

Section of Academic Urology

- A basic science meeting was held, as part of the Society of Academic and Research Surgeons (SARS) Annual meeting, at the Royal Society of Medicine in London on 10 January 2013.
- Annual Meeting was held as part of the BAUS Annual Meeting in Manchester in June.

BAUS Data and Audit Project & Publication of Consultant Outcomes Data

The BAUS Data and Audit Project is a web-based application (developed by Nuvola) for data collection, retrieval and analysis of all BAUS audits across all sub-specialties. This represents a major investment by the Association to facilitate national audit in the interests of improving good patient care, good governance and as a facilitator for revalidation (for example it allows members to retrieve data as part of their annual appraisal process).

In December 2012, the Government outlined plans to publish surgeon-level outcomes data, taken from national clinical audits, in ten specialty areas which included urology.

Although BAUS runs a number of audits, there are no nationally-funded urology audits. However, the Association supports the publication of surgical outcomes; believing the release of accurate data on outcomes will drive forward the standards of surgery, help patients to make informed decisions about their care and support the requirements of professional revalidation. The Association agreed to support this initiative and took the decision to publish data about removal of the kidney (*nephrectomy*) in the first instance. This audit was chosen because, although there is no single operation which all urologists undertake, nephrectomies are routinely performed by about 40% of the 700 consultant urologists practicing in England.

Surgeons were notified that the nephrectomy audit had been selected on 28 February 2013 and were required to submit all their data by 17 May 2013. In total data on 5,449 procedures were collected from 283 consultants at 119 centres, including 125 private patients from 34 consultants.

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Following validation and risk adjustment the consultant outcomes data for nephrectomy was published on the BAUS website on 5 July 2013 together with supporting patient information. Patients, carers and members of the public can search the information by region, trust and consultant.

Following further analysis of the data a number of abstracts have been submitted to national and international meetings and further papers will be submitted for publication in peer reviewed journals.

In parallel with the consultant outcomes project, the Association continued to run the following national audits and registries:

- Complex operations – in addition to nephrectomy mentioned above, prostatectomy and cystectomy
- PCNL registry
- Urethroplasty
- Ureteroscopic ureteric stone surgery

A national audit for RPLND (Retro-peritoneal Lymph Node Dissection) was launched in March 2012 to run for one year. The aim was to capture every RPLND performed for germ cell tumour in a one-year period. The initial data collection period ended in March 2013 and about 190 cases had been entered which it was believed did represent most of the procedures undertaken in the 12 month period. This first cohort will now be studied in depth and the audit will consider whether to continue to register new cases.

The Section of Female, Neurological and Urodynamic Urology launched an audit of mid-urethral tapes for the treatment of stress urinary incontinence (SUI) in women in June 2012. The audit was modified and expanded to cover all surgery for stress urinary incontinence, primary and salvage in September 2013.

Other Association activities

The President and Vice President attended a number of regional meetings during the course of the year at which Members had the opportunity to ask questions about any issue relating to the Association.

An updated report on the urological workforce was published in September 2013. Mr Paul Jones took over from Mr Neil Burgess as the Workforce Lead for the Association and the Specialist Advisory Committee in Urology.

BAUS, together with the British Association of Urological Nurses, published guidelines and protocols for the assessment of Specialist Nurses undertaking flexible cystoscopy.

Working with the Royal College of Surgeons of England, the Association produced three commissioning guides to assist clinical commissioning groups (CCGs) to make decisions about appropriate healthcare for specific clinical circumstances. The urology guides covered asymptomatic scrotal swellings, foreskin conditions and lower urinary tract symptoms. The high value care pathways contained within each commissioning guide aims to provide patients, the public, health and social care professionals, commissioners and service providers with a clear description of what constitutes a high quality service.

The current BAUS website (www.baus.org.uk) was launched at the Association's annual meeting in June 2010. It is intended the website should be the home of UK urology and the site contains information and resources for use by members, non-member professionals involved in the specialty of urology, patients and the public. A surgical web editor, Mr Nigel Bullock, was appointed early in 2010 and he has worked closely with BAUS staff to populate the site. A large amount of patient information has been added including 155 procedure specific patient information sheets and further information for patients and links to other useful sources.

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During 2013, BAUS continued to make increasing use of electronic communication to inform and update the membership. Regular email briefings from the President were circulated to all Members in addition to email updates to Section Members and Regional Members.

In January 2013, the Journal of Clinical Urology was launched taking over from the British Journal of Medical & Surgical Urology as an official bi-monthly publication of BAUS.

Impact of Activities & Events

In 2013, BAUS maintained its role as the key provider of education and professional development for all doctors working in the field of urological surgery.

Association membership in 2013 was 1,800 (1,786 in 2012). At the present time, 95% (866 out of 914) of the consultant urologists in the UK are BAUS members.

Nationally, there are sixteen Regions including Ireland, Northern Ireland, Scotland East and West and Wales. In 2013 there were vacancies in eleven regions. In one region, South East Coast, the existing representative stood for re-election and was unopposed, in four regions only one nomination was received for each of the vacant posts and therefore the candidates were duly appointed. In five regions elections were held with participation rates ranging from 37%-58%. In the West Midlands there were no nominations received and one of the consultants was co-opted as regional representative for 12 months.

Four candidates stood for election as Honorary Secretary Elect and Mr Duncan Summerton was duly elected, 300 ballot forms were received out of 1,192 sent to members eligible to vote (25% return). There was only one nomination for the role of Honorary Treasurer Elect from Mr Ken Anson.

The 2013 Annual Meeting of the British Association of Urological Surgeons was held at Manchester Central in June attracting 1,149 delegates over the four days (1,110 in 2012) and 70 exhibitors.

In 2013, 561 abstracts were submitted for consideration for inclusion in the Annual Scientific Meeting (641 in 2012), of which 141 papers were accepted (25%). Once again, the meeting attracted delegates from all units in the country as well as a number of overseas delegates. Participant feedback on the 2013 meeting remained positive with 87% of respondents indicating they planned to attend the 2014 meeting in Liverpool. In 2013 the Annual Meetings for the Sections of Academic Urology, Andrology and Genito-Urethral Surgery and Female, Neurological and Urodynamic Urology were once again held at the start of the Annual Scientific Meeting.

The following positive comments from delegates were made:

"BAUS is relevant to UK practice which is not always the case at the AUA and EAU."

"Brilliant meeting /lots of take home messages and improve practice tips."

"You feel you do standard practice by attending BAUS."

"Made me realise that even world experts don't know the answers to the questions that I don't know the answers to."

"Good platform for interaction and discussion among colleagues and peers"

"The most useful aspect is talking informally to colleagues and having more detailed sub-specialist discussions with the international faculty. The inclusion of so many high profile international experts was the highlight of this year's BAUS for me."

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

TRUSTEES' ANNUAL REPORT for the year ended 31 December 2013

Twenty-three courses (21 in 2012) were run by the Office of Education at the Annual Scientific Meeting with the potential to accommodate 633 delegates. In total, 564 delegates attended (89%) and this compares to 545 places on courses in 2012 with a total uptake of 514 (94%). The provision of courses for the Annual Meeting in 2013 was carefully reviewed by the Programme Committee

The FRCS revision course held in Oxford in April 2013 had 42 participants as opposed to 36 in 2012, and the course in Manchester in September had 32 participants as opposed to 42 participants in 2012.

The introduction to urology course, which was held in Manchester in February, attracted 50 trainees (48 in 2012). The Association will continue to monitor attendance at all courses.

It is essential for BAUS to maintain the support of pharmaceutical and urological equipment companies. The Association continued to make improvements to the Medical and Trade Exhibition at the Annual Scientific Meeting. 2013 saw 70 exhibiting companies (79 in 2012, 83 in 2011). Thirteen companies had not been represented at the event in 2012. There was a slight increase in net space sold (1,578 square metres as opposed to 1,534 sq m in 2012) but overall the trend in the last six years has been for companies to take smaller stands. This reflects the general economic situation, companies are reducing their advertising budgets and some are taking smaller stands. All 6 satellite sessions were sold. BAUS continues to monitor the overall trends and adjust plans accordingly. In addition to meeting with all companies at the meeting in Manchester the Association officers and staff held two meetings with industry partners in the course of the year to discuss matters of mutual interest.

UROLINK continued to run a clinical workshop programme. In October 2013, Mr Shekhar Biyani returned to Hawassa in Ethiopia for his fourth visit and was joined by Mr Chandrasekharan Badrakumar who stayed for several weeks to provide training in TURP. In November 2013 several members of the Urolink faculty attended the 10th Lester Eshleman Urology Workshop at KCMC, Moshi, Tanzania. In August 2012 Mr Nick Campain was appointed as the Urolink/BJUI fellows, this represented a collaborative, educational partnership between BAUS-Urolink, BJU International and the University of Exeter to fund an Educational Fellow, whose remit would be to deliver improvement in urological education in resource-poor settings,

Public Benefit

During 2013, the trustees gathered the following evidence that demonstrates to their satisfaction that the Association continues to benefit the public through its activities targeted to achieve its charitable objectives:

- The number of members and non-members attending meetings and courses organised by the Association, its sub specialty sections and the Office of Education; and
- Positive feedback from participants on the value of attendance at the Annual Scientific Meeting. 93.4% of the 380 respondents to the post conference questionnaire responded positively to the question "do you feel attendance at BAUS helps you keep up to date in your practice and maintain and improve the standard of care for your patients?"

FINANCIAL REVIEW

Financial Results of Activities & Events

In general, the Association's finances are stable and the trustees are satisfied with the charity's overall financial health.

The direct surplus from the annual meeting at £400,736 is higher than 2012 (2012: £379,910) and represents the best surplus made from a meeting in Manchester in recent years. Manchester is a relatively expensive venue for BAUS but every effort was made to maximise income and carefully control other costs.

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED**TRUSTEES' ANNUAL REPORT
for the year ended 31 December 2013**

Overall unrestricted incoming resources were £139,048 more than in 2012 and expenditure was well controlled.

Reserves Policy

The "free reserves" of BAUS at 31 December 2013 amounted to £2,385,193 (31 December 2012: £1,846,593).

A substantial amount of BAUS income comes from the Annual Scientific Meeting and to a lesser extent the Section meetings and other educational courses. The success of these activities is dependent on delegate/participant numbers and trade exhibitors, and as a result, BAUS is exposed to a significant level of financial risk in organising these events. In recent years, BAUS has been fortunate in continuing to attract delegates and exhibitors, but the trustees regard it as prudent to retain sufficient reserves to cover the costs of an Annual Scientific Meeting, as contractual commitments exist, and in addition to cover about six months of operational expenditure. On this basis, reserves of at least £1,000,000 should be maintained.

During 2014, the Trustees anticipate drawing on the reserves to fund the development of a new data and audit platform and the development of a new BAUS website.

At the current time, BAUS reimburses the Director of the Office of Education's employing trust for two sessions per week, so the Director has sufficient protected time to undertake the role. There is no reimbursement for any other role however some of the roles within BAUS are quite demanding and it is anticipated that in the future further reimbursement to some employing trusts will be necessary.

Investments Policy

The trustees are empowered to invest any money that the Association does not immediately need in such a manner as they may determine.

At 31 December 2013, the trustees held £1,831,264 of the Association's free reserves in two investment portfolios managed by Quilter Cheviot Limited and Sarasin & Partners. Of this £1,828,492 (31 December 2012: £1,600,900) was invested and £2,772 (31 December 2012: £24,291) was held as cash by the investment managers for future investment. The balance of free reserves, £553,929 (31 December 2012: £221,402), was held as cash in interest bearing bank accounts.

The trustees take professional advice from and are responsible for managing the relationship with the Association's investment managers. The Association's current investment strategy is to obtain a balance of capital growth and income at a low to medium level of investment risk exposure. The trustees have delegated certain discretionary powers of investment to the investment managers but approve changes in the overall investment strategy.

Performance of the Quilter Cheviot fund is assessed against the APCIMS Balanced index and of the Sarasin fund against the bespoke benchmark used by the Alpha Common Investment Fund for Endowments and over the longer term, compared to the range of returns of the WM Charity Survey.

During the year, investment values rose by 14.2% (2012: 5.4%) and generated investment income at an average rate of 3.5% (2012: 3.4%). During the year, the Association's cash balances generated income at an average rate of 0.1% (2012: 0.3%).

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED**TRUSTEES' ANNUAL REPORT
for the year ended 31 December 2013**

PLANS FOR FUTURE PERIODS**Future Strategy**

The Association will continue to work to maintain and improve standards in the practice of urology.

Future Activities & Events

In 2014, it is anticipated that the Association will:

- Continue to input to the on-going discussions about the arrangements for specialist commissioning;
- Publish a report on "Planning the Urology Service of the Future";
- Continue to build strategic alliances with other urological organisations through the development of Urology UK;
- Publish guidelines on transrectal ultrasound and prostatic biopsy and a curriculum for training in robotic surgery;
- Continue to work with urologists to improve data collection with a view to expanding the publication of consultants' outcomes, giving surgeons feedback that can be used in their appraisals and analysing these large national datasets and reporting on the outcomes at national and international meetings and in peer reviewed journals in order to drive standards and improve quality of care;
- Invite tenders and commission projects for a new data and audit platform and a new website; and
- Review the structures for the delivery of BAUS' education strategy.

Impact of Future Activities & Events

The structure of the NHS and the medical workforce continue to change significantly, particularly with regard to the commissioning and delivery of services. Urology represents the fifth most expensive disease area for the UK NHS. The population of the UK aged 65 and over was 10.4 million in 2011 and is expected to rise significantly in the next few decades. The demand for urological services will increase. In 2014, BAUS will continue to engage constructively with the changing NHS in order to provide the appropriate professional and educational support to urologists to ensure they are able to continue to deliver the highest standard of care to their patients.

Public Benefit

In the future, the trustees intend to ensure the Association continues to benefit the public through its charitable objectives by fostering education, research and clinical excellence through the dissemination of information in the specialty. This will be achieved through the meetings, workshops and courses run by the Association, encouraging and facilitating members' participation in audit and disseminating outcomes and seeking feedback from members and other professionals delivering urological care. The BAUS website also allows public access so that information about urological conditions, and their treatment, can be accessed from a reliable source.

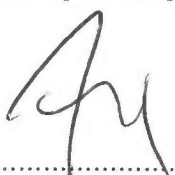
THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

**TRUSTEES' ANNUAL REPORT
for the year ended 31 December 2013**

FUNDS HELD AS CUSTODIAN

Although the charity maintains restricted funds to deal with incoming resources that are earmarked for a particular purpose by donors, sponsors, and other funders, BAUS does not currently hold, and the trustees do not anticipate that it will in future hold, any funds as custodian for any third party.

This report was approved by the trustees on 9 May 2014, and was signed for and on behalf of the board by



..... Honorary Secretary
F X Keeley



..... 2014

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

We have audited the financial statements of The British Association of Urological Surgeons Limited for the year ended 31 December 2013 on pages 19 to 30. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members 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 members 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 Statement of Trustees' responsibilities set out on pages 6 and 7, the trustees (who are also the directors of the 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.

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 AUDIT OF THE FINANCIAL STATEMENTS

A description of the scope of an audit of financial statements is provided on the Financial Reporting Council's website at [http://www.frc.org.uk/Our-Work/Codes-Standards/Audit-and-assurance/Standards-and-guidance/Standards-and-guidance-for-auditors/Scope-of-audit/UK-Private-Sector-Entity-\(issued-1-December-2010\).aspx](http://www.frc.org.uk/Our-Work/Codes-Standards/Audit-and-assurance/Standards-and-guidance/Standards-and-guidance-for-auditors/Scope-of-audit/UK-Private-Sector-Entity-(issued-1-December-2010).aspx)

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 December 2013 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the Companies Act 2006.

OPINION ON OTHER MATTER PRESCRIBED BY THE COMPANIES ACT 2006

In our opinion, the information given in the Trustees' Annual Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF THE BRITISH ASSOCIATION OF
UROLOGICAL SURGEONS LIMITED (Continued)**

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- the charitable company has not kept adequate accounting records, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to take advantage of the small companies exemption from the requirement to prepare a Strategic Report.



Kerry Gallagher, Senior Statutory Auditor
For and on behalf of BAKER TILLY UK AUDIT LLP, Statutory Auditor
Davidson House,
Forbury Square,
Reading,
Berkshire RG1 3EU

28 May..... 2014

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

STATEMENT OF FINANCIAL ACTIVITIES
(including Income & Expenditure Account)
for the year ended 31 December 2013

	Notes	Unrestricted funds £	Restricted funds £	Total 2013 £	Total 2012 £
INCOMING RESOURCES					
Incoming resources from generated funds					
Investment income	1	58,943	-	58,943	55,748
Incoming resources from charitable activities					
Dissemination of information	2	1,689,871	25,000	1,714,871	1,564,088
TOTAL INCOMING RESOURCES		1,748,814	25,000	1,773,814	1,619,836
RESOURCES EXPENDED					
Costs of generating funds					
Investment management costs		5,019	-	5,019	3,282
Charitable activities					
Dissemination of information	3	1,361,849	4,712	1,366,561	1,398,262
Governance costs	5	57,447	-	57,447	53,878
TOTAL RESOURCES EXPENDED		1,424,315	4,712	1,429,027	1,455,422
NET INCOMING RESOURCES & NET INCOME FOR THE YEAR		324,499	20,288	344,787	164,414
OTHER RECOGNISED GAINS & LOSSES					
Gains on investment assets	8	211,132	-	211,132	84,762
NET MOVEMENT IN FUNDS		535,631	20,288	555,919	249,176
RECONCILIATION OF FUNDS					
Fund balances brought forward at 1 January 2013		1,856,397	12,686	1,869,083	1,619,907
FUND BALANCES CARRIED FORWARD AT 31 DECEMBER 2013		2,392,028	32,974	2,425,002	1,869,083

The net movement in funds for the year arises from the charitable company's continuing operations.

No separate statement of total recognised gains and losses has been presented as all such gains and losses have been dealt with in the statement of financial activities.

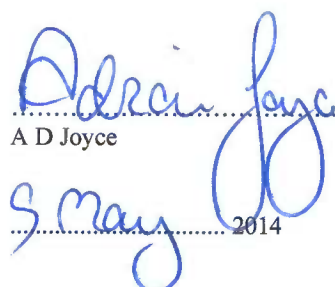
THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

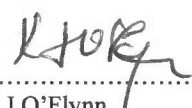
BALANCE SHEET
as at 31 December 2013

Company Number: 06054614

	Notes	2013 £	2012 £
FIXED ASSETS			
Tangible assets	7	6,835	9,804
Investments	8	1,828,492	1,600,900
		<u>1,835,327</u>	<u>1,610,704</u>
CURRENT ASSETS			
Stocks		6,411	2,141
Debtors	9	493,046	499,760
Cash at bank and in hand		692,822	410,820
		<u>1,192,279</u>	<u>912,721</u>
LIABILITIES			
Creditors: Amounts falling due within one year	10	(602,604)	(654,342)
NET CURRENT ASSETS			
		<u>589,675</u>	<u>258,379</u>
TOTAL ASSETS LESS CURRENT LIABILITIES & NET ASSETS			
		<u>2,425,002</u>	<u>1,869,083</u>
THE FUNDS OF THE CHARITY			
Restricted income funds			
UROLINK Fund	11	32,974	12,686
Unrestricted income funds			
General Fund	11	2,392,028	1,856,397
TOTAL CHARITY FUNDS			
	12	<u>2,425,002</u>	<u>1,869,083</u>

The financial statements on pages 19 to 30 were approved by the trustees and authorised for issue on 9 May 2014, and are signed on their behalf by

 President
A D Joyce
9 May 2014

 Honorary Treasurer
K J O'Flynn
9/5/14 2014

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

Financial statements for the year ended 31 December 2013

ACCOUNTING POLICIES

BASIS OF ACCOUNTING

The financial statements have been prepared to comply with current statutory requirements (principally being the Companies Act 2006, the Charities Act 2011, and the Charity (Accounts and Reports) Regulations 2008), under the historical cost convention, except as modified for the annual revaluation of fixed asset investments, and in accordance with United Kingdom Generally Accepted Accounting Practice. The recommendations in *Accounting and Reporting by Charities: Statements of Recommended Practice (revised 2005)* issued by the Charity Commission in March 2005 have been followed. The accounting policies have been applied consistently for prior years.

INCOMING RESOURCES

General donations and other similar types of voluntary income are brought into account when received, except that donated income is included gross of any attributable tax recoverable, where relevant. Donations given for specific purposes are treated as restricted income.

Investment income is accounted on a receivable basis once the dividend has been declared or the interest earned.

Credit is taken in the accounts for the proportion of subscriptions, which are receivable in the financial period. All other types of income are also accounted for on an accruals basis.

RESOURCES EXPENDED

Resources expended are allocated to the charity's principal activity where the costs can be identified as being directly related to that activity. All costs that cannot be identified as relating directly to the charity's principal activity are categorised as either support costs or governance costs. Any costs that cannot be specifically categorised are allocated in proportions based upon a suitable ratio applicable to the nature of the cost involved.

Grants payable are recognised in the period in which the approved offer is conveyed to the recipient except in those cases where the offer is conditional, such grants being recognised only when the conditions attaching to the award are fulfilled. Grants offered subject to conditions, which have not been met at the balance sheet date, are noted as a potential commitment, but are not treated as a liability.

TANGIBLE FIXED ASSETS

All tangible assets purchased that have a cost of more than £500 and an expected useful economic life that exceeds one year are capitalised and classified as fixed assets. Tangible fixed assets are stated at historical cost less depreciation. Depreciation is provided on all tangible fixed assets, except for the Silver Rose Bowl, at rates calculated to write each asset down to its estimated residual value evenly over its expected useful life, as follows:

Improvements to leasehold premises	over the life of the lease
Fixtures & fittings	over 5 years
Office equipment	over 5 years

INVESTMENTS

The charity's investments are included in the balance sheet at their market value. The gains or losses arising upon their annual revaluation are included in the statement of financial activities.

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED**Financial statements for the year ended 31 December 2013****ACCOUNTING POLICIES**

STOCKS

Stocks are valued at the lower of cost or net realisable value.

LEASED ASSETS AND OBLIGATIONS

Where assets are financed by leasing agreements that give rights approximating to ownership ("finance leases"), the assets are treated as if they had been purchased outright. The amount capitalised is the present value of the minimum lease payments payable during the lease term. The corresponding leasing commitments are shown as obligations to the lessor.

Lease payments are treated as consisting of capital and interest elements, and the interest is charged to the statement of financial activities in proportion to the remaining balance outstanding.

All other leases are "operating leases" and the annual rentals are charged to the statement of financial activities on a straight line basis over the lease term.

PENSION CONTRIBUTIONS

The charity participates in a multi-employer defined benefit pension scheme known as the Superannuation Arrangements of the University of London ("SAUL"). The scheme is contracted out of the State Earnings-Related Pension Scheme, and is a centralised scheme for certain employees with the assets held in separate trustee-administered funds. The charity is unable to identify its share of the underlying assets and liabilities of the scheme.

The amount charged to the statement of financial activities in respect of pension costs is the total contributions payable for the year.

FUND ACCOUNTING

The general fund comprises the accumulated surpluses of unrestricted incoming resources over resources expended, which are available for use in furtherance of the general objective of the charity.

Designated funds are a particular form of unrestricted funds consisting of amounts, which have been allocated or designated for specific purposes by the trustees. The use of designated funds remains at the discretion of the trustees.

Restricted funds are funds subject to specific conditions imposed by donors. The purpose and use of the restricted funds are set out in the notes to the accounts. Amounts unspent at the year end are carried forward in the balance sheet.

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

NOTES TO THE FINANCIAL STATEMENTS
for the year ended 31 December 2013

	Unrestricted funds £	Restricted funds £	Total 2013 £	Total 2012 £
1. INVESTMENT INCOME				
Bank interest receivable on short term cash deposits	815	-	815	1,280
Income from investments listed on a recognised stock exchange:				
UK investments	29,762	-	29,762	27,734
Overseas investments	28,366	-	28,366	26,734
	<u>58,943</u>	<u>-</u>	<u>58,943</u>	<u>55,748</u>
2. INCOME FROM DISSEMINATION OF INFORMATION				
Subscriptions	418,500	-	418,500	384,610
Annual Scientific Meeting	905,203	-	905,203	875,380
Income from the Journal of Clinical Urology (formerly British Journal of Medical and Scientific Urology)	88,589	-	88,589	63,168
Office of Education	85,719	-	85,719	85,563
Section of Oncology	91,956	-	91,956	61,268
Section of Endourology	53,707	-	53,707	54,135
Section of Female, Neurological and Urodynamic Urology	25,000	-	25,000	25,000
Section of Andrology	-	-	-	2,208
Urolink income	1,152	25,000	26,152	11,088
Data and audit income	15,701	-	15,701	-
Other income	4,344	-	4,344	1,668
	<u>1,689,871</u>	<u>25,000</u>	<u>1,714,871</u>	<u>1,564,088</u>

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

NOTES TO THE FINANCIAL STATEMENTS
for the year ended 31 December 2013

	Unrestricted funds £	Restricted funds £	Total 2013 £	Total 2012 £
3. COSTS OF DISSEMINATION OF INFORMATION				
Direct costs:				
Annual Scientific Meeting	504,467	-	504,467	495,470
Costs of the Journal of Clinical Urology (formerly the British Journal of Medical and Surgical Urology)	55,249	-	55,249	56,877
Office of Education	109,684	-	109,684	104,482
Section of Oncology	60,282	-	60,282	35,678
Section of Endourology	31,969	-	31,969	36,479
Section of Female, Neurological and Urodynamic Urology	5,878	-	5,878	5,876
Section of Andrology and Genito-Urethral Surgery	399	-	399	295
Section of Academic Urology	2,522	-	2,522	3,022
Data and audit costs	59,197	-	59,197	39,824
Costs of the British Journal of Urology	85,420	-	85,420	105,600
Grants, donations, & awards (see note 4)	1,028	-	1,028	5,935
Urolink expenses	1,012	4,712	5,724	12,578
Subscriptions	9,120	-	9,120	8,119
Website costs	2,925	-	2,925	4,397
	929,152	4,712	933,864	914,632
Support costs (see note 5)	432,697	-	432,697	483,630
	<u>1,361,849</u>	<u>4,712</u>	<u>1,366,561</u>	<u>1,398,262</u>
			2013 £	2012 £
4. GRANTS, DONATIONS & AWARDS				
Donation to the Institute of Urology Urological Research Fund: Scientific Basis of Urology			-	5,000
Medals awarded to 4 (2012: five) individuals			1,028	935
			<u>1,028</u>	<u>5,935</u>

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

NOTES TO THE FINANCIAL STATEMENTS
for the year ended 31 December 2013

	Support costs £	Governance costs £	Total 2013 £	Total 2012 £
5. SUPPORT & GOVERNANCE COSTS				
Staff costs (see note 6)	275,922	-	275,922	298,361
Staff recruitment, training, travel and welfare	2,637	-	2,637	9,272
Council and committee expenses	-	33,558	33,558	31,050
President's expenses	-	17,046	17,046	16,457
Accommodation costs	74,710	-	74,710	73,255
Repairs, maintenance, and computer				
Software expense	13,923	-	13,923	18,374
Telephone	2,720	-	2,720	2,445
Postage, mailings, printing and stationery	11,512	-	11,512	17,073
Legal and professional fees	23,129	-	23,129	35,323
Auditor's remuneration:	-	-	-	-
Audit fees	-	6,843	6,843	6,371
Accountancy and advisory	1,809	-	1,809	2,258
Bank and credit card charges	15,962	-	15,962	15,960
Bad and doubtful debts	-	-	-	2,380
Sundry office expenses	6,580	-	6,580	5,301
Depreciation:				
Owned assets	3,793	-	3,793	3,628
	<u>432,697</u>	<u>57,447</u>	<u>490,144</u>	<u>537,508</u>

Included within auditors' remuneration are amounts payable to Baker Tilly UK Audit LLP in respect of audit services of £6,843 (2012: £6,371) and amounts payable to Baker Tilly Tax and Accounting Limited in respect of accountancy and advisory services of £1,809 (2012: £2,258).

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

NOTES TO THE FINANCIAL STATEMENTS
for the year ended 31 December 2013

	2013	2012
6. STAFF COSTS		
	No.	No.
The average monthly number of persons employed by the charity (excluding Council members) during the year was, as follows:		
Office and administration	6	6
	£	£
Staff costs for the above persons:		
Wages and salaries	225,220	248,208
Social security costs	21,424	21,213
Other pension costs	29,278	28,940
	275,922	298,361

No trustee received any remuneration for services to the charity as a member of Council during the current or previous year. During the year, eight (2012: seven) trustees were reimbursed for travel and meetings expenses incurred totalling £22,793 (2012: £21,470).

During the year one (2012: one) employee's total emoluments fell between £60,001 and £70,000, and the pension contributions payable for this employees amounted to £8,845 (2012: £8,463).

7. TANGIBLE FIXED ASSETS

	Improvements to leasehold premises £	Silver Rose Bowl £	Fixtures & fittings £	Office equipment £	TOTAL £
Cost:					
1 January 2013	450,214	600	41,201	51,230	543,245
Additions	-	-	-	824	824
31 December 2013	405,214	600	41,201	52,054	544,069
Depreciation:					
1 January 2013	450,214	-	39,471	43,756	533,441
Charge for year	-	-	866	2,927	3,793
31 December 2013	450,214	-	40,337	46,683	537,234
Net book value:					
31 December 2013	-	600	864	5,371	6,835
31 December 2012	-	600	1,730	7,474	9,804

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

NOTES TO THE FINANCIAL STATEMENTS
for the year ended 31 December 2013

	2013 £	2012 £
8. INVESTMENTS		
Investment listed on a recognised stock exchange at market value:		
1 January 2013	1,600,900	1,283,655
Additions at cost	111,667	360,125
Disposal proceeds	(95,207)	(127,642)
Realised (losses)/gains	(10,295)	4,465
Unrealised gains	221,427	80,297
31 December 2013	<u>1,828,492</u>	<u>1,600,900</u>
At the balance sheet date, the market value of the portfolio comprised:		
UK investments	936,816	790,342
Overseas investments	891,676	810,558
	<u>1,828,492</u>	<u>1,600,900</u>
Fixed income securities	183,776	207,100
Equities	1,459,692	1,272,019
Other assets	185,024	121,781
	<u>1,828,492</u>	<u>1,600,900</u>
At the balance sheet date, the historical cost of the investments was £1,394,305 (2012: £1,396,251).		
	2013 £	2012 £
Individual holdings representing more than 5% of the market value of the portfolio at the balance sheet date are as follows:		
Sarasin Alpha CIF For Endowments	<u>1,030,757</u>	<u>909,477</u>

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

NOTES TO THE FINANCIAL STATEMENTS
for the year ended 31 December 2013

	2013 £	2012 £			
9. DEBTORS					
Amounts falling due within one year:					
Trade debtors	401,486	338,360			
Other debtors	4,202	1,512			
Prepayments and accrued income	87,358	159,888			
	<u>493,046</u>	<u>499,760</u>			
	<u><u><u>493,046</u></u></u>	<u><u><u>499,760</u></u></u>			
10. CREDITORS					
Amounts falling due within one year:					
Trade creditors	35,563	25,272			
Other taxes and social security costs	88,427	91,921			
Other pension costs payable	3,827	-			
Accruals	26,820	42,983			
Annual Meeting income received in advance	423,986	403,024			
Journal income received in advance	-	50,000			
Office of Education income received in advance	23,651	39,372			
Subscription income in advance	330	1,770			
	<u>602,604</u>	<u>654,342</u>			
	<u><u><u>602,604</u></u></u>	<u><u><u>654,342</u></u></u>			
11. THE FUNDS OF THE CHARITY					
	1 January 2013 £	Incoming resources £	Outgoing resources £	Gains on investments £	31 December 2013 £
Restricted income funds:					
UROLINK Fund	12,686	25,000	(4,712)	-	32,974
Unrestricted income funds:					
General Fund	1,856,397	1,748,814	(1,424,315)	211,132	2,392,028
	<u>1,869,083</u>	<u>1,773,814</u>	<u>(1,429,027)</u>	<u>211,132</u>	<u>2,425,002</u>
	<u><u><u>1,869,083</u></u></u>	<u><u><u>1,773,814</u></u></u>	<u><u><u>(1,429,027)</u></u></u>	<u><u><u>211,132</u></u></u>	<u><u><u>2,425,002</u></u></u>

The UROLINK Fund was set up in 2008 by the unincorporated Association with a donation received from BJU International. The money is being utilised to support UROLINK activities.

Included within the General Fund are net unrealised gains arising on the revaluation of investments totalling £434,187 (2012: £204,649).

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

NOTES TO THE FINANCIAL STATEMENTS
for the year ended 31 December 2013

12. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Fixed assets £	Net current assets £	Total £
Restricted income funds:			
Urolink Fund	-	32,974	32,974
Unrestricted income funds:			
General Fund	1,835,327	556,701	2,392,028
NET ASSETS	<u>1,835,327</u>	<u>589,675</u>	<u>2,425,002</u>
		2013 £	2012 £

13. COMMITMENTS UNDER OPERATING LEASES

At 31 December 2013, the charitable company was committed to make the following payments during the next year under non-cancellable operating leases as follows:

In respect of land & building leases

expiring within 1 year	-	65,317
expiring within 2-5 years	<u>74,106</u>	<u>-</u>

14. PENSION COMMITMENTS

The charitable company participates in a centralised defined benefit scheme known as the Superannuation Arrangements of the University of London ("SAUL") for all qualified employees with the assets held in separate trustee-administered funds. It is not possible to identify the charitable company's share of the underlying assets and liabilities of SAUL. Therefore contributions are accounted for as if SAUL were a defined contribution scheme and pension costs are based on the amounts actually paid (cash amounts) in accordance with paragraphs 8-12 of FRS17. The amount charged to the statement of financial activities in respect of pension costs (as shown in note 6) is the total contributions payable for the year. Any contributions payable at the balance sheet date are treated as creditors (as shown in note 10).

SAUL is subject to triennial valuation by professionally qualified and independent actuaries. The last available valuation was carried out as at 31 March 2011 using the projected unit credit method in which the actuarial liability makes allowance for projected earnings. The main assumptions used to assess the technical provisions were:

Pre-retirement discount rate	6.80% per annum
Post-retirement discount rate	4.70% per annum
General salary increases – to March 2014	3.75% per annum
General salary increases – after March 2014	4.50% per annum
Price inflation – RPI	3.50% per annum
Price inflation – CPI	2.80% per annum
Pension increases in payment	2.80% per annum

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED**NOTES TO THE FINANCIAL STATEMENTS
for the year ended 31 December 2013**

14. PENSION COMMITMENTS (Continued)

The actuarial valuation applies to SAUL as a whole and does not identify surpluses or deficits applicable to individual employers. As a whole, the market value of SAUL's assets was £1,506 million representing 95% of the liability for benefits after allowing for expected future increases in salaries.

Based on the strength of the employer covenant and the trustee's long-term investment strategy, the trustee and the employers agreed to maintain employer and member contributions at 13% of Salaries and 6% of salaries respectively following the valuation. The above rates will be reviewed when the results of the next formal valuation (as at 31 March 2014) are known.

A comparison of SAUL's assets and liabilities calculated using assumptions consistent with FRS17 revealed SAUL to be in deficit at the last formal valuation date (31 March 2011). As part of this valuation, the Trustee and Employer have agreed that no additional contributions will be required to eliminate the current shortfall.

The more material changes (the introduction of a Career Average Revalued Earnings, or "CARE", benefit structure) to SAUL's benefit structure will apply from 1 July 2012. As a consequence, the cost of benefit accrual is expected to fall as existing final salary members are replaced by new members joining the CARE structure. This will allow an increasing proportion of the expected asset return to be used to eliminate the funding shortfall. Based on conditions as at 31 March 2011, the shortfall is expected to be eliminated by 31 March 2021, which is 10 years from the valuation date.

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS LIMITED

ACCOUNTANT'S REPORT
for the year ended 31 December 2013ACCOUNTANT'S REPORT TO THE BOARD OF TRUSTEES OF THE BRITISH ASSOCIATION OF
UROLOGICAL SURGEONS LIMITED ON THE UNAUDITED FINANCIAL STATEMENTS FOR
THE YEAR ENDED 31 DECEMBER 2013

In order to assist you to fulfil your duties under the Companies Act 2006 and the Charities Act 2011 ("the Acts") and regulations thereunder, we prepared for your approval the financial statements of The British Association of Urological Surgeons Limited which comprise the Statement of Financial Activities, the Balance Sheet and the related notes as set out on pages 19 to 30 from the charitable company's accounting records and from information and explanations you have given us.

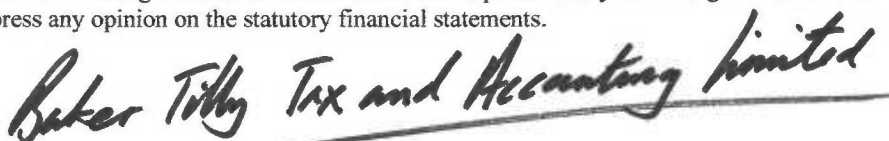
As a practising member firm of the Institute of Chartered Accountants in England and Wales (ICAEW), we are subject to its ethical and other professional requirements which are detailed at <http://www.icaew.com/en/members/regulations-standards-and-guidance>.

This report is made solely to the board of trustees of The British Association of Urological Surgeons Limited as a body, in accordance with the terms of our engagement letter dated 20 September 2013. Our work has been undertaken solely to prepare for your approval the financial statements of The British Association of Urological Surgeons Limited and state those matters that we have agreed to state to them in accordance with AAF 2/10 as detailed at icaew.com/compilation. This report should not therefore be regarded as suitable to be used or relied on by any other party wishing to acquire any rights against Baker Tilly Tax and Accounting Limited for any purpose or in any context. Any party other than the trustees which obtains access to this report or a copy and chooses to rely on this report (or any part of it) will do so at its own risk. To the fullest extent permitted by law, Baker Tilly Tax and Accounting Limited will accept no responsibility or liability in respect of this report to any other party and shall not be liable for any loss, damage or expense of whatsoever nature which is caused by any person's reliance on representations in this report.

This report is released to the trustees on the basis that it shall not be copied, referred to or disclosed, in whole or in part (save as otherwise permitted by agreed written terms), without our prior written consent.

It is your duty to ensure that The British Association of Urological Surgeons Limited has kept adequate accounting records and to prepare statutory financial statements that give a true and fair view of the assets, liabilities, financial position and net movement in funds of The British Association of Urological Surgeons Limited under the Acts and regulations thereunder.

We have not been instructed to carry out an audit or a review of the financial statements of The British Association of Urological Surgeons Limited. For this reason, we have not verified the accuracy or completeness of the accounting records or information and explanations you have given to us and we do not, therefore, express any opinion on the statutory financial statements.



BAKER TILLY TAX AND ACCOUNTING LIMITED

Chartered Accountants
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 2 June 2014