

**The British Association of
Urological Surgeons
Limited**

**Annual Report and Financial
Statements**

31 December 2019

Charity Registration Number 1127044

Company Limited by Guarantee

Registration Number 06054614 (England & Wales)

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Reference and administrative details of the Society, its trustees and advisers

President	D Summerton
Vice President	T O'Brien
Honorary Treasurer	I Pearce (until 25 June 2019) O Wiseman (from 25 June 2019)
Honorary Treasurer Elect	O Wiseman (until 25 June 2019) N Watkin (from 25 June 2019)
Honorary Secretary	P Jones (until 25 June 2019) A Muneer (from 25 June 2019)
Honorary Secretary Elect	A Muneer (until 25 June 2019) I Pearce (from 25 June 2019)
Co-opted Trustees	N Watkin (until 25 June 2019) S Agrawal D Thomas M Brown (from 13 September 2019)
Registered/Principal office	The Royal College of Surgeons England 35- 43 Lincolns Inn Fields London WC2A 3PE
Charity registration number	1127044
Company registration number	06054614
Auditor	Buzzacott LLP 130 Wood Street London EC2V 6DL
Bankers	National Westminster Bank Plc Corporate Central Banking 5 -10 Great Tower Street London EC3P 3HX

Reference and administrative details of the Society, its trustees and advisers

Investment managers

Quilter Cheviot Ltd (until August 2019)
One Kingsway
Longacre
London
WC2B 6AN

Sarasin and Partners (until August 2019)
Juxton House
100 St Paul's Churchyard
London
EC4M 8BU

CCLA Investment Management Limited
(from August 2019)
Senator House
85 Queen Street
London
EC4V 4ET

The Trustees, who are also the directors of the charitable company for the purposes of company law, are pleased to present their annual report with the financial statements of The British Association of Urological Surgeons Limited (BAUS or The Association) for the year ended 31 December 2019.

This report has been prepared in accordance with Part 8 of the Charities Act 2011 and constitutes a directors' report for the purposes of company legislation.

The financial statements have been prepared in accordance with the accounting policies set out therein and comply with the charitable company's Memorandum and Articles of Association, applicable laws, Companies Act 2006 and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) second edition, effective from accounting periods commencing 1 January 2019 or later.

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.

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

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

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-specialty sections. The Association supports the education of urologists through activities co-ordinated through the Education Committee. The charity also produces patient information leaflets relating to urological conditions and operations and publishes unit and individual surgeon outcomes for a number of surgical procedures. Both activities are intended to provide patients with accurate information about their condition and treatment options and outcomes.

Objectives and activities (continued)

Charitable objectives (continued)

The Association's primary objectives in 2019 were to:

- ◆ Review and amend the governance structures so that non-medically qualified members of the urological team could become BAUS members.
- ◆ Further strengthen the Association's commitment to training and urological trainees by embedding the newly formed trainees' Section in BAUS.
- ◆ To develop the data and audit strategy, via the Audit Steering Group (ASG), based on clinical outcomes and provide clinical leadership for the ongoing work with GIRFT and NCIP with the aim of driving improvements in patient care. The ASG will explore options for collaboration with relevant bodies in the devolved nations.
- ◆ Engage with GIRFT on the implementation of its recommendations, particularly with reference to the development of the Urology Area Networks and publish guidance on the delivery of emergency urological care.
- ◆ Engage in the Independent Medicines and Medical Devices Safety Review (the Cumberlege review) and consider how BAUS can support the implementation of processes to improve patient safety and the safe introduction of medical devices.
- ◆ Initiate a wide-ranging review of its current income generation model to ensure the Association has long-term financial sustainability and ensure the human and financial resources of BAUS support the delivery of its strategic objectives. It is anticipated this review will inform the financial planning for the next iteration of the Association's strategic plan.

Public benefit

The Trustees have taken the Charity Commission's general guidance on public benefit into consideration in preparing their statements on public benefit contained within this Trustees' Report.

Benefits and beneficiaries

As stated above, in accordance with its charitable objectives, the Association strives to support education, research and clinical excellence in the specialty of urology. In so doing it 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 setting standards for the specialty.

Objectives and activities (continued)

Public benefit (continued)

Benefits and beneficiaries (continued)

Urologists treat a broad spectrum of conditions across all age groups but, particularly with an ageing population, demand for care has been steadily increasing with over 750,000 episodes of care a year. Urologists and their teams treat three of the ten commonest cancers, prostate, kidney and bladder, as well as a wide range of benign conditions such as lower urinary tract symptoms (which affects 35-40% of men over 55 years of age), urinary tract stones and incontinence. It is important that BAUS continues to provide the appropriate professional and educational support to urologists to ensure they are able to deliver the highest standard of care to their patients in what continues to be a very challenging environment.

Achievements and performance

In 2019, 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 2019 was 2,042 (1,948 in 2018). At the present time, 88% (953 out of 1,073) of the substantive consultant urologists in the British Isles are BAUS members.

The BAUS website is the Association's primary channel for communicating with patients and the wider public and was visited by over half a million users in 2019 with over a million page views in the patient's area.

Events and activities

Annual Scientific Meeting

The Association's Annual Scientific Meeting was held on 24-26 June 2019 at the SEC in Glasgow. The 2019 meeting attracted 901 delegates, a slight reduction on the number attending in 2018, 1,051. About 60% of those attending were consultants or associate urological specialists and of these 75% were BAUS members. About 300 of the attendees were trainees, two-thirds of whom were BAUS members. Delegates were drawn from urology departments throughout the British Isles as well as from overseas.

BAUS 2019 offered a meeting packed with subjects reflecting the diversity and progression of UK and Global Urology during 2019 delivered by an outstanding faculty of national and international experts. This was the third successive year that the programme had been reduced to three days which has consistently received over 85% positive delegate feedback. The programme was designed to have a wide appeal that was pertinent to the management and delivery of general urology throughout the UK and included a thought provoking session on decision making in the context of significant medical comorbidity and an update from Simon Harrison, one year on from the publication of the GIRFT report. There was a strong trainee presence with excellent sessions organised by the newly formed BAUS Section of Trainees (BSOT). The incoming Vice President introduced a new course designed for Clinical Leads offering practical training and support and aiming to build a

Achievements and performance (Continued)

Events and activities (Continued)

Annual Scientific Meeting (Continued)

Clinical Leads network. Dr Neil Spenceley, Consultant Paediatric Intensivist, delivered an outstanding BAUS Guest Lecture on Poor Behaviours in Healthcare. The broadcaster Bill Turnbull delivered the JCU Guest Lecture and shared his thoughts on what patients want to hear when they have a cancer diagnosis. Most of the sessions, including those referred to above, are available to view in the media gallery on the BAUS website.

There was positive feedback on the meeting App which helped to facilitate audience participation with many sessions using live polling, 2,217 live polling responses recorded, and 204 questions from the audience via the App, as well as questions from the floor during sessions. There were 2,423 Tweets about the meeting involving 609 active participants (2,632 with 604 participants in 2018).

In 2019, 581 abstracts were submitted for consideration for inclusion in the Annual Scientific Meeting (524 in 2018), of which 142 were accepted (24%).

Seven teaching courses and one skills course on MRI and targeted biopsy were run with the potential to accommodate 280 delegates. In total 265 (219 in 2018) delegates attended courses, 95% occupancy of course places compared to 86% in 2018 and 61% in 2017.

All delegates were sent an online review form after the meeting and 372 or 41% of the delegates (504/48% in 2018) returned comments. Delegates appreciated the UK focus of the meeting but also welcomed consideration of global issues. Comments on the meeting included the following:

"It can be an excellent opportunity to examine how urological care is actually delivered. The question about what to do is covered by a focus on guidelines and key clinical trials - with some posters and presentations looking at specific issues. However, an emphasis on quality improvement is welcome. The sessions and lectures on safety culture, assessing complex/older patients, patient choice, compassion, innovation etc. provided valuable insights that are very relevant to modern practice."

"It was a very good meeting with a good mix of scientific sessions and collateral sessions which are very useful for day to day practice."

"Excellent. Really informative and helpful to clinical practice."

"Good opportunity to speak to people and to find out about urology updates in UK."

"I liked the clinically relevant sessions on functional urology as this is an area often neglected in Conferences."

"The update and highlights sessions are a particularly good way of updating on the whole of urology and great for everyday practice."

"It was good to meet up with colleagues and get a sense of how urology is getting on around the country."

Achievements and performance (Continued)

Events and activities (Continued)

Annual Scientific Meeting (Continued)

85% of respondents indicated that they planned to attend the 2020 meeting in Birmingham, a number of those unable to attend indicated this was because they would be providing cover in their units so colleagues could attend. 96% of respondents reported that attendance at the meeting helped them to keep up to date in their practice and maintain and improve care to their patients. The delegate feedback is carefully considered by the Education Committee when planning future meetings.

Pharmaceutical and medical equipment companies attend the Medical and Trade Exhibition which runs in parallel with the Annual Scientific Meeting. In 2019 there were 75 exhibiting companies (73 in 2018). Space sold was down on 2018, 972 square metres as opposed to 1,102 in 2018, but comparable to the 975 square metres sold in 2017, when the meeting was also in Glasgow.

Other meetings and courses

The Core Urology course is run annually and is targeted at surgical trainees who have just started, or are thinking about pursuing, higher specialist training in urology. The course was held at College Court in Leicester in January 2019 and attracted 60 delegates (64 in 2018).

The FRCS Urology examination is run by the Surgical Royal Colleges and success is a mandatory requirement for completion of specialist training which ultimately leads to entry on the GMC's Specialist Register. The examination is held twice each year and the BAUS FRCS (Urol) Revision Courses are held 4-6 weeks before each sitting. The Revision Course held in Leicester from 25-29 March had 46 participants (58 in 2018). The course held in Manchester from 16-20 September had 48 participants (40 in 2018). In practice the majority of trainees taking the FRCS (Urol) examination choose to attend the BAUS Revision Course.

In May the BAUS Andrology & Genito-Urethral Surgery section led the organisation of a two-day joint meeting with the Section of Female, Neurological & Urodynamic Urology and the British Association of Genito-Urethral & Reconstructive Surgery (BAGURS). The meeting was held in Winchester, sponsored by Boston Scientific, there were 45 delegates, made up of most surgeons from the units that undertake genito-urethral and reconstructive surgery. It was agreed this type of meeting should be held in alternate years, with the next meeting planned for 2021.

In September the Section of Endourology annual meeting was held over two days in Sheffield attended by 164 delegates (130 in 2018). 89 delegates (54%) gave feedback on the meeting, comments on why they chose to attend this meeting included:

"I have always wanted to attend this meeting for interesting educational content and meeting colleagues in the same subspecialty."

"Nice, cosy, small, like minded, very practical, good interaction."

Achievements and performance (Continued)

Events and activities (Continued)

Other meetings and courses (Continued)

"Always proves to be an excellent BAUS section meeting."

In November the Section of Endourology ran their annual residential operative course at Queen Elizabeth Hospital, Birmingham. This intensive three-day course is limited to four delegates and is for senior trainees in their final year, post FRCS (Urol), who are aiming to be appointed to a Consultant post with a subspecialty interest in endourology. Each individual completing the course can apply for a £1,500 travelling scholarship to support a visit to an endourological centre of excellence.

In November the Section of Oncology annual meeting was held over two days in Brighton attended by 237 delegates (224 in 2018). The focus of the meeting was on renal cancer and rare tumours with a closing session on resilience in surgery, incorporating treatment regret amongst clinicians, supporting surgeons dealing with complications and human factors in surgery, feedback on this mentioned an "excellent" session which was "very moving and thought provoking".

Two outstanding guest speakers, Dr Sam Bhayani from Washington University, St Louis, Missouri and Dr E Abel Jason from University of Wisconsin, contributed throughout the meeting and both were rated as excellent or good by almost all the delegates:

"US speakers were exceptional."

"Helpful to understand what experts do."

"Fantastically engaging and human speakers."

85% of respondents indicated they planned to attend the Section's 2020 meeting and comments included the following:

"It's always informative and results with a change of practice of some description."

"Short, full of educational value, great speakers, value for money!"

Also in November, in Leeds, BAUS piloted a new Consultant Boot Camp. This pilot course was designed for new consultants and those in their first few years of practice. The concept was based on the success of the bootcamp for all newly appointed specialty trainees (ST3s) which has run since 2015 and is mandatory for all newly appointed urology registrars. The Course Directors for the ST3 bootcamp, Mr Sunjay Jain and Mr Shekhar Biyani, ran this pilot. The course was designed to be highly interactive, with high faculty to participant ratio, (15 to 12) and covered technical and non-technical skills. A full course report will be considered by the Education Committee and will inform future development of this course.

Achievements and performance (continued)

BAUS Audit Steering Group

As previously reported, in 2018 BAUS set up a new Audit Steering Group (ASG) to lead the development and transition to new models of delivering audit which will ensure that the data collected can identify best practice, drive changes in practice and improve patient outcomes. It had been agreed that the general principles moving forward are:

- ◆ Focused data collection;
- ◆ Eliminating duplication of data entry and burden of data collection on surgeons by using existing datasets wherever possible; and
- ◆ Development of projects / snapshot audits that are high impact and focus on answering specific clinical questions.

Since 2013 BAUS has published individual surgeon and unit data in line with the Department of Health (England) Clinical Outcomes Publication (COP) programme. During 2019 it was confirmed that DH would no longer publish this data. In terms of the existing BAUS registries data collection continued during 2019, this data will be published on the BAUS website during 2020 but no further registry data will be collected.

Throughout 2019 the ASG worked closely with the National Clinical Improvement Programme (NCIP) to develop a digital tool that consultants in England will use to review their personal patient outcomes data alongside comparable national and unit level data. Existing BAUS data was used to help the NCIP team develop and test this new tool and urology is one of the vanguard specialties now piloting the NCIP portal. This tool provides a single point of access to existing information from Hospital Episode Statistics (HES) and will eliminate the need for urologists to collect data that already exists and support appraisal and revalidation.

In parallel with the work to transition the BAUS registries and support NCIP the ASG set in place a framework for developing snapshot audits that are more patient focused, answer specific clinical questions and are based on standards of care. In October it was confirmed that the first of these new style audits would look at the assessment and management of men undergoing surgery for Bladder Outlet Obstruction during November 2019. This is a retrospective audit with data collection in March 2020. Other potential projects are being worked up.

As outlined above the ongoing registry data collection and publication continued during 2019.

Nephrectomy

BAUS has been publishing data on nephrectomies (removal of a kidney) since 2013 and, in July 2019, combined 2016-2018 data were published. Return rates, checked against Hospital Episode Statistics (HES) data for England, were 82% (89% in 2018).

Achievements and performance (continued)

BAUS Data and Audit Project & Publication of Consultant Outcomes Data (continued)

Stress Urinary Incontinence

In May, data for 2016-2018 on female stress urinary incontinence (SUI) surgery were published. Data were collected on 2,773 procedures, recorded from 103 consultants at 88 centres. Comparison with HES indicates that participation rates in England remained at 72%. HES data shows a decline in the number of procedures being undertaken (for urologists 1,472 in 2015, 1,059 in 2016, 993 in 2017 and 721 in 2018) which is undoubtedly related to the controversies surrounding the surgical treatment of stress urinary incontinence particularly with reference to mid-urethral mesh sling procedures. BAUS has engaged fully in discussions about the establishment of a national registry for all SUI procedures and in the interim recognises the importance of maintaining the existing BAUS registry.

PCNL

Also in May, data for 2016-2018 on Percutaneous Nephrolithotomy (PCNL) (surgery for removal of stones in the kidney or ureter) were published. 6,877 procedures were recorded from 208 consultants at 129 centres. HES actually recorded fewer procedures than BAUS collected. Coding problems have been a consistent feature for this procedure and BAUS has worked with the GIRFT coding project and NCIP to try to improve this. It is estimated that data were collected on more than 90% of the procedures undertaken.

Prostatectomy

In July 2016-2018 data on radical prostatectomy (removal of the whole prostate gland for cancer of the prostate) were published. 26,108 cases (23,564 in 2018) were submitted in total, of which 24,924 were from England. Comparison with HES indicates that participation rates in England were 92% (89% in 2018). 84% were robot assisted, 8% laparoscopic and 8% open.

Data on all the above audits were made available to the NHS for display on the NHS Choices website with links back to the more detailed source information on the BAUS website.

Cystectomy

In July, BAUS published cystectomy (removal of the bladder for cancer) data for 2016-2018. 5,852 cases (5,922 in 2018) were submitted in total, of which 5,407 were from England; these 5,852 cases came from 159 consultants at 75 sites. Comparison with HES indicates that participation rates in England were 95% (94% in 2018). The percentage of robotic procedures has increased from 15% in 2014 to in 2018.

Urethroplasty

In October 2016-2018 data were published on urethroplasty (surgery to repair urethral strictures). Urethroplasty is only undertaken by a small group of surgeons with a sub-specialist interest in reconstructive surgery. 2,026 cases (2,280 in 2018) were submitted in total, of which 2,016 were from England; these 2,026 cases came from 40 consultants at 35 sites. Comparison with HES indicates that participation rates in England were about 72% (79% in 2018).

Achievements and performance (continued)

BAUS Data and Audit Project & Publication of Consultant Outcomes Data (continued)

Urethroplasty (continued)

All the clinical outcomes data were published on the BAUS website together with supporting patient information. Patients, carers and members of the public can search for information by region, hospital trust and consultant.

BAUS Website

The award winning BAUS site was launched in June 2015 and the Association has continued to work closely with its website developer, Lightmedia Communications Limited, and the Surgical Web Editor (N Bullock) to maintain and enhance the site.

The site gives prominence to the patients' area, which includes a "Find a Surgeon" section which allows the public to search for and view member profiles. These, in turn, link to the surgeon's outcome data. Usage of the "Find a Surgeon" section has decreased by 19% from 258,473 page views in 2018 to 210,490 in 2019.

In 2019 549,090 (536,391 in 2018) users visited the site of which 86.9% were new visitors. In 2019 67% of users were UK based compared to 72% 2018. In 2019 58% of users accessed the site with a mobile or tablet device compared to 59% in 2018.

The most popular area of the site is the patients' area, with 56% of the page views in 2019 (1,052,512) in 2019 vs 1,077,499 in 2018). 8 of the top 10 landing pages on the site are in the patient's area. The surgical outcomes area of the site had 210,749 page views, up from 205,979 in 2018. Page views in the professionals' area decreased from 272,645 in 2018 to 234,881 in 2019.

Page views for the patient information leaflet area increased from 148,700 in 2018 to 158,323 with leaflets on prostate, circumcision, stones and bladder procedures being most frequently viewed.

Other activities

Workforce

Usually BAUS, in conjunction with the Specialist Advisory Committee in Urology (SAC), produces an annual report on workforce and service provision. There was no report published in 2019 but BAUS staff added an additional workforce module to the recently implemented CRM/membership system and, working with regional representatives, updated all records on the consultant workforce. Information has been supplied to the SAC and it is hoped a report will be published in 2020.

Achievements and performance (continued)

Other activities (continued)

Workforce (continued)

Key amongst BAUS's strategic aims is to raise recognition of urological problems amongst medical students, encourage junior doctors to consider a career in urology and to inspire the next generation of urologists to engage with the Association. To this end BAUS ran an essay competition for medical students and an audit competition for Foundation Year and Core Trainees (FY & CTs). In 2019 76 submissions were received for the essay competition (43 in 2018). 11 submissions were received for the audit competition (22 in 2018), the national winners were invited to attend the Annual Scientific Meeting to receive their prizes and all candidates for the audit competition were invited to present their audit at the Annual Meeting in a session devoted to FY & CTs at the meeting.

Standards of Care

The Association provides advice and support to its members and other healthcare professionals and produces guidelines of good practice in urology. In May 2019 BAUS, in consultation with the Getting it Right First Time programme, published a document giving guiding principles for clinicians on the provision of out of hours and emergency urological cover.

In February the Section of Oncology responded to the decision by NICE not to update the 2015 Bladder Cancer Guidelines, the Section advocated that an update was necessary, unfortunately the NICE decision was unchanged. The Section of Oncology also submitted comments for the update of the NICE Guidelines on Prostate Cancer. In July the Section of Endourology responded to a consultation with suggestions for key areas for the NICE Quality Standards on renal stones. The Section of Female, Neurological & Urodyanamic Urology (FNUU) responded to a consultation on the NICE Guideline on Multiple Sclerosis in Adults. The FNUU Section also made submissions about a NICE decision not to support the use of oral Pentosan Polysulfate Sodium (PPS) for treatment of Bladder Pain Syndrome (BPS), a chronic and extremely debilitating condition which is very difficult to treat. NICE subsequently approved the use of PPS. BAUS made a submission to NICE on the importance of updating the 2015 Guideline on the management of Lower Urinary Tract Symptoms in men. NICE had initially proposed that this guideline did not need updating but confirmed in November that it will be updated focusing on surgical treatments for voiding symptoms. The Association also contributed to numerous NICE technology appraisals and evaluations of interventional procedures.

During 2019, BAUS continued to make use of electronic communication to inform and update the membership. Regular E-Updates were circulated to members in addition to email updates to Section Members and Regional Members. BAUS also continued to make use of Twitter principally as a signpost to information on the website.

Achievements and performance (continued)

Standards of Care (continued)

In addition 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. The President attended the following international meetings: Urological Society of India, Urological Society of Australia and New Zealand, the American Urological Association, the European Association of Urology and the Sri Lankan Urological Association, strengthening links with other national and international associations.

Financial review

Financial results of activities and events

In general, the Association's finances are stable although the Trustees are mindful of the need to diversify sources of income and balance income and expenditure in the long run. In 2019 there was an operating deficit of £175,718 (2018 -£48,272, 2017 -£127,260), against a budgeted deficit of £206,886.

The direct surplus from the 2019 Annual Scientific Meeting was £77,790 (£226,012- 2018 and £181,990 - 2017). The 2019 figure follows a general trend over the last ten years for gradually reducing surpluses from the Annual Scientific Meeting. Expenditure on the meeting was below budget and, although income from registrations was slightly down, the most significant factor in the relatively low surplus from this meeting was a decline in the sponsorship for satellite sessions which generated only £25,000 in comparison with £120,900 in 2018 and £103,000 in 2017. The sponsorship packages offered will be carefully reviewed for 2020, however in the course of the wide ranging income review, undertaken in 2019, it was noted that across the medical sector there had been a reduction in marketing spend per product in pharmaceuticals which is not expected to recover and other key industry partners had reported reduced or flat marketing budgets.

An increase in the Association's subscription rates had been approved at the AGM in June 2018 and took effect from 1 January 2019, full member rate increased from £350 to £400, trainee rate went from £160 to £180. In 2019 subscriptions generated £519,426 (2018 £454,524).

Reserves policy and financial position

The "free reserves" of BAUS at 31 December 2019, calculated as the total general funds of the Association less the value of tangible fixed assets, amounted to £2,466,730 (2018 - £2,463,426).

Financial review (continued)

Reserves policy and financial position (continued)

The majority of BAUS's incomes comes from the Annual Scientific Meeting, membership subscriptions 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. Contracts with venues have to be agreed several years in advance. The Trustees regard it as prudent to retain sufficient reserves to cover the costs of an Annual Scientific Meeting, plus any future contractual commitments, and in addition to cover about six months of operational expenditure. On this basis, free reserves of at least £1,450,000 should be maintained.

The Trustees acknowledge the Association is holding additional reserves and there are a number of reasons for this as outlined below.

BAUS currently leases offices within the Royal College of Surgeons of England. The College is redeveloping its site, although it has been confirmed that BAUS will be able to stay in its current offices until early 2021. Beyond May 2021 all options will be considered including potentially taking space in the redeveloped College building or possibly moving out to alternative premises. There will be cost implications arising from the office re-location and therefore the Trustees feel it is prudent to have additional monies held in reserve.

There is increasing pressure on BAUS to reimburse Trusts for time surgeons spend on BAUS business. The Trustees made provision in 2015 to reimburse the employing trust of the BAUS President for two sessions per week and in 2016 began reimbursing the employing trust of the Vice President for one session per week. In 2019 BAUS began making payments for one session a week for the Honorary Secretary, who is responsible for leading the organisation of the Annual Scientific meetings. Sessional payments for these officers rose to £43,807 in 2019 and are expected to exceed £50,000 in 2020. The employing trusts of the Educational Leads are reimbursed for time they spend away from their Trusts running BAUS courses. The climate in the NHS is such that members are finding it increasingly difficult to secure time away from their employing hospitals to undertake work on behalf of the Association.

The Strategic Plan 2016-2020 set out the Association's goals, the Plan has informed business plans and budgets. During 2019 BAUS undertook an income review. BAUS relies on membership subscriptions and the AGM for almost 80% of its income and it was felt there was a need to diversify and enhance its income model. The intention was to continue to take steps to mitigate the decline in AGM income whilst also looking to expand the sponsorship offer and seek grant funds and systematic partnership development across workstreams.

The Coronavirus (COVID-19) pandemic will impact on all BAUS activities and result in the cancellation or postponement of several BAUS events in 2020. Where contractual commitments exist BAUS may incur expenditure and be unable to generate usual levels of income. Fortunately, the levels of reserves that BAUS holds, which are readily accessible, is such that BAUS should be able to continue to operate effectively notwithstanding the current national crisis and the consequent the economic uncertainties.

Financial review (continued)

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 2019, the Trustees held £2,004,725 (£1,802,718 in 2018) of the Association's free reserves in COIF having moved two investment portfolios managed by Quilter Cheviot Limited and Sarasin and Partners to the COIF Charity Funds Scheme managed by CCLA Investment Management in August 2019. £2,003,725 (£1,789,802) of the free reserves was invested and £1,000 (£12,916 in 2018) was held as cash by the investment managers. The balance of free reserves, £472,596 (£660,708 in 2018) was held as current assets, principally cash in interest bearing bank accounts.

As a result of the COVID-19 pandemic, world stock markets have experienced significant volatility and falls since the balance sheet date. It is estimated that the market value of investments was £1,851,794 at 4 May 2020.

The Trustees take professional advice from, and are responsible for managing the relationship with, the Association's investment manager, CCLA. The Association's investment strategy is to seek a long-term total return comprising growth in capital and income with a medium level of investment risk. The Trustees have delegated certain discretionary powers of investment to CCLA but can approve changes to the overall investment strategy (for example where an emphasis may be put on capital growth) meaning a slight increase in the relative risk exposure. The Trustees will keep the performance of the investment managers under review and will review their investment strategy on an annual basis.

Performance of the COIF Charities Investment Fund is measured against the bespoke benchmark used by the Fund and by the ARC Steady Growth Charity Index which is used to measure peer group performance.

During the year, investment values rose 11.96% compared to the market value at the end of the previous year (-8.86% in 2018) and generated investment income at an average rate of 3.6% (3.4% in 2018). During the year the Association's cash balances generated income at an average rate of 0.7% (0.6% in 2018). This reflected the prevailing economic climate.

Governance, structure and management

Status and History

The British Association of Urological Surgeons Limited is a registered charity, and a company limited by guarantee, not having a 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 has always functioned as a charity. The current corporate entity was incorporated on 16 January 2007 and became a registered charity on 4 December 2010.

Governance, structure and management (continued)

Status and History (continued)

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 of BAUS have legal and fiduciary responsibility for the Association.

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

E A Bishop	Chief Executive and Company Secretary
P Hagan	Deputy Chief Executive

The Association currently employs three part-time and six full time members of staff.

The Council of the Association plays a pivotal role advising the Trustees and 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.

Governance, structure and management *(continued)*

Organisational structure *(continued)*

The following members have served on the Council since 1 January 2019:

Elected Regional Representatives

M Brown	(2017-2020)	
D Douglas	(2018-2021)	
B Duggan	(2019-2022)	(from 25 June 2019)
G Durkan	(2019-2022)	(from 25 June 2019)
N Fenn	(2016-2019)	(until 25 June 2019)
M Hayes	(2016-2021)	
S Jain	(2018-2020)	
G Kanda Swamy	(2019-2022)	(from 25 June 2019)
M Lynch	(2019-2022)	(from 25 June 2019)
T Lynch	(2016-2019)	(until 25 June 2019)
H Ojha	(2017-2020)	(until 25 June 2019)
B Patel	(2019-2022)	(from 25 June 2019)
D Ross	(2018-2021)	
N Shah	(2019-2022)	(from 25 June 2019)
S Sriprasad	(2015-2020)	
M Stott	(2014-2019)	(until 25 June 2019)
D Thomas	(2015-2020)	
N Watkin	(2013-2019)	(until 25 June 2019)
S Williams	(2016-2021)	
D Wood	(2019-2022)	(from 25 June 2019)

Ex-officio Council Members

J McGrath	(2019)	Lead, Research Committee
R Rees	(2018-2019)	Chairman, Section of Andrology and Genito-Urethral Surgery
J Glass	(2018-2019)	Chairman of Section of Endourology (until September 2019)
D Smith	(2019-2021)	Chairman of Section of Endourology (from September 2019)
C Harding	(2018-2019)	Chairman of Section of Female, Neurological and Urodynamic Urology
B Challacombe	(2019-2020)	Chairman, Section of Oncology
L Forster	(2018-2020)	Chairman, Section of Trainees
R Kirby	(2007-2019)	The Urology Foundation (TUF) Representative
K Sethia	(2015-2020)	Chairman, Executive Committee BJU International
D Hodgson	(2019-2021)	Chairman, BAUS Education Committee
P Cornford	(2019-2022)	Chairman of the Specialist Advisory Committee in Urology
J Glass	(2019-)	RCS England Council
J Brocksom	(2019-2021)	President, British Association of Urological Nurses Representative <i>(invited non-voting)</i>

Governance, structure and management *(continued)*

Key management

The Trustees consider that they, together with the Chief Executive and Deputy Chief Executive, comprise the key management of the charity in charge of directing and controlling, running and operating the charity on a day to day basis.

None of the Trustees receives remuneration in connection with their duties as trustees. The employing trust of the BAUS President is reimbursed for two sessions per week and the Vice President and Honorary Secretary's trusts are reimbursed for one session respectively per week to ensure they have sufficient protected time to undertake the role. Remuneration for all BAUS staff (including the Chief Executive and Deputy Chief Executive) is agreed by the Trustees who receive an annual confidential salary review report from an independent HR Consultant. The report contains salary review statistics and benchmarking of all job descriptions.

Method of recruitment, appointment, election, induction and training of 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 and 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 have their elections confirmed 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.

The Honorary Secretary and Honorary Treasurer hold office for two years from the time of the Annual General Meeting. The Honorary Secretary Elect and the Honorary Treasurer Elect hold office for two years thereafter becoming Secretary/Treasurer.

All Officers are elected by the voting members of BAUS.

Trustees can co-opt up to four members, one of the co-opted Trustees is elected by the Regional Council members from among their number and two more members were appointed as co-opted Trustees after a recruitment process in 2017.

Governance, structure and management (continued)

Method of recruitment, appointment, election, induction and training of Trustees
(continued)

Induction and 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 given to all Trustees on election and appointment.

The induction pack includes 'The Essential Trustee – what you need to know' published by the Charity Commission, the Trustees' Report and financial statements for the previous year, minutes of Trustee and Council meetings for the 12 month period before the newly elected/appointed Trustees formally begin their period of office, the Association's risk register and other general information – including the dates and times of future Trustees' meetings.

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

Risk and 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 exposure 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 40% 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 practicing in the field of urology.

Other key risks include:

- ◆ The charity lacking direction, strategy and forward planning. A strategic planning process was undertaken in 2015 and a Strategic Plan was published at the end of 2015 which articulated the vision and mission of the Association and three key goals for delivery by 2020.
- ◆ Contract risks. These are mitigated by clear authorisation procedures which include countersigning contracts for payment of over £25,000 by an authorised Trustee and competitive tendering for contracts worth over £50,000.

Governance, structure and management (continued)

Risk and corporate governance matters (continued)

- ◆ IT risks. Hardware and / or software may fail to meet operational needs and there may be a failure to innovate or update systems leading to loss or corruption of data. There may also be lack of appropriate technical support. BAUS is highly reliant on IT to support all its activities. In recognition of this the Association has a contract with an external IT support company (Doherty Associates). This contract includes support from a dedicated client manager, an IT Helpdesk (accessible 24 hours a day 7 days a week) which means problems can be resolved quickly, and proactive visits by consultants to advise on the strategic deployment of IT to ensure BAUS makes effective and efficient use of hardware and software.

The Association maintains a comprehensive risk register which is reviewed regularly by the Trustees. The Trustees are satisfied that appropriate processes and policies are in place to manage the major risks identified to an acceptable level.

Sub-Committees

Under the Association's Rules the Trustees may establish (and disestablish) such committees as they think fit and delegate any of their functions to committees of BAUS. One member of every committee must be a Trustee. The main committees of BAUS are as follows:

The UROLINK Committee

The UROLINK Committee meets twice a year, and is responsible for the organisation, financial administration and running of UROLINK. UROLINK aims to encourage and support the establishment of links with individual departments and organisations in low income countries and to facilitate professional visits to work with colleagues in the developing world.

Priorities for UROLINK currently are to maintain the long-established link with Kilimanjaro Christian Medical College (KCMC) in Tanzania and develop the links with Hawassa University Referral Hospital in Ethiopia and University Teaching Hospital Lusaka, Zambia. In 2015 funding proposals were submitted to the BJU International and The Urology Foundation (TUF) to support activities at designated centres in Lusaka (Zambia) and Hawassa (Ethiopia) respectively and funds donated are held in a reserve account. Progress reports are submitted to BJU International and TUF on an annual basis.

Governance, structure and management (continued)

Sub-Committees (continued)

Education Committee

The Education Committee was set up in 2011 and aims to provide a clear and comprehensive strategy to support 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. The committee brings together the various elements of educational provision under one umbrella as it is essential BAUS has a clear strategy in relation to the provision and quality assurance of education in urology. The Chair is appointed (following open advertisement among members) and the committee includes representatives of the sub-specialty sections.

The Education Committee meets three times a year and the meeting in July incorporates a review of the Annual Scientific Meeting which informs the planning for the next meeting. The review of each Meeting includes examination of attendance by day and by category of registration as well as feedback from delegates and exhibitors. The purpose of the review is to enhance the quality of the Meeting and the educational opportunities it provides therefore ensuring it remains relevant to delegates.

Audit Steering Group

As described above, the Audit Steering Group (ASG) was set up in 2018 to provide leadership and strategic oversight across all data and audit activity within BAUS. The ASG reports to Trustees and presents an annual report to Council.

Sub-Specialty Sections

BAUS has four 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; and
- ◆ BAUS Section of Andrology and Genito-Urethral Surgery formed in 2003;

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.

In addition to the sub-specialty Sections in 2018 a new BAUS Section of Trainees was formed (BSoT). All trainee members of BAUS are automatically members of BSoT.

Governance, structure and management (continued)

Sub-Specialty Sections (continued)

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 opportunities throughout the year and section representatives sit on the Education Committee to report on these educational activities.

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.

Plans for future periods

Future strategy

BAUS will celebrate its 75th anniversary in 2020. The medical and political landscapes in which it operates are almost unrecognisable from those in 1945 and the Association must continue to ensure it remains relevant to patients, members and healthcare practitioners working in urology. BAUS will continue to strive to maintain and improve standards in the practice of urology and the Strategic Plan 2016-2020 sets out the objectives and specific goals it wishes to achieve over this five-year period. The Plan remains true to the visions of the Association's founders.

Future Activities and Events

In 2020, it is anticipated that the Association will:

- ◆ Review the current strategic plan in order to inform the development of the next iteration of the plan from 2021.
- ◆ Build on the income review to explore ways of diversifying income streams and expand partnership working.
- ◆ Finalise the governance update so that membership of BAUS can be extended to all those in the urological team and there is potential to appoint non-medically qualified trustees.
- ◆ Consider a new model for Council meetings.
- ◆ Use the enhancements made to the CRM in 2019 to improve the collection and effective utilisation of workforce data to strengthen BAUS' position at the leading urological body in the UK.
- ◆ Review and update 'A Guide to Job Planning for Consultant Urologists' (published in 2016). Job planning is crucial to enable consultants to fulfil their roles successfully and support the delivery of high-quality safe patient care.
- ◆ Update the patient information leaflets on the BAUS website.

Plans for future periods (continued)

Future Activities and Events (continued)

- ◆ Review usage of the BAUS website to inform future enhancements as the website is the key tool in the dissemination of information about the specialty; which is at the core of the Association's activities.
- ◆ Continue to embed the newly formed Section of Trainees in BAUS and hold the first BSoT conference.
- ◆ Mark 100 years of urological excellence in the UK, including the 75th anniversary of BAUS, with a number of events in 2020 including at the national meeting in Birmingham which will celebrate the past and look to the future.

During the period from 31 December 2019 to the date that the financial statements were approved, the COVID-19 outbreak had spread worldwide and caused extensive disruptions to businesses as well as economic activities globally including the UK.

We have considered the effects of the 2020 outbreak of COVID-19 on the Association's operations and have concluded that the impact on BAUS operations can be managed. Following the advice issued by the UK Government in March 2020 regarding employees working from home and other social distancing measures, we have enacted procedures to facilitate this and have a detailed plan that enables effective operation to continue whilst employees are not physically present in the Association's office.

Trustees acknowledge and recognise the potential impact of the COVID-19 pandemic on the future operations of the Association, its beneficiaries, partners and stakeholders and on wider society. As well as the personal risk to health of its staff, the Association may lose planned income as the result of the cancellation of events and/or the absence of key personnel although there may be some expenditure savings also. The reduced opportunities for scheduled face to face interaction may well impact on the ability to plan effectively for the medium term but it is not anticipated at the current time that the overall financial position of the Association will be too adversely affected or its financial solvency threatened.

Statement of Trustees' responsibilities

The Trustees (who are also directors of The British Association of Urological Surgeons Limited for the purposes of company law) are responsible for preparing the Trustees' report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the income and expenditure of the charitable company for that period.

In preparing these financial statements, the Trustees are required to:

- ◆ select suitable accounting policies and then apply them consistently;

Statement of Trustees' responsibilities (continued)

- ◆ observe the methods and principles in Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable to the United Kingdom and Republic of Ireland (FRS 102);
- ◆ make judgements and estimates that are reasonable and prudent;
- ◆ state whether applicable United Kingdom Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- ◆ prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

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

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

Each of the Trustees confirms that:

- ◆ so far as the Trustee is aware, there is no relevant audit information of which the charitable company's auditor is unaware; and
- ◆ the Trustee has taken all the steps that he/she ought to have taken as a Trustee in order to make himself/herself aware of any relevant audit information and to establish that the charitable company's auditor is aware of that information.

This confirmation is given and should be interpreted in accordance with the provisions of s418 of the Companies Act 2006.

Approved by the Trustees and signed on their behalf by:



A Muneer, Honorary Secretary

Approved by the Trustees on: 4 May 2020

Independent auditor's report to the members of The British Association of Urological Surgeons Limited

Opinion

We have audited the financial statements of The British Association of Urological Surgeons Limited (the 'charitable company') for the year ended 31 December 2019 which comprise the statement of financial activities, the balance sheet, and statement of cash flows, the principal accounting policies and the notes to the financial statements. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- ◆ give a true and fair view of the state of the charitable company's affairs as at 31 December 2019 and of its income and expenditure for the year then ended;
- ◆ have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- ◆ have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Emphasis of matter – Effects of COVID-19

We draw attention to the Trustees' report, principal accounting policies and Note 11, which describes the economic and social disruption the charity is facing as a result of COVID-19 which is impacting personnel being able to access offices. Our opinion is not modified in respect of this matter.

Conclusions relating to going concern

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

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

Other information

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

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

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- ◆ the information given in the trustees' report, which is also a directors' report for the purposes of company law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- ◆ the trustees' report has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' report. We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion:

- ◆ adequate accounting records have not been kept, 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 prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the trustees' report and from the requirement to prepare a strategic report.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditor's responsibilities for the audit of the financial statements

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

Auditor's responsibilities for the audit of the financial statements (continued)

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

Use of our report

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.



Edward Finch (Senior Statutory Auditor)
For and on behalf of Buzzacott LLP, Statutory Auditor
130 Wood Street
London
EC2V 6DL

30 July 2020

Statement of financial activities Year to 31 December 2019

		Unrestricted funds 2019 £	Restricted funds 2019 £	2019 £	Unrestricted funds 2018 £	Restricted funds 2018 £	2018 £
Income and expenditure							
Income:							
Investment income	1	78,292	—	78,292	66,164	—	66,164
Income from charitable activities							
. Dissemination of information	2	1,456,159	—	1,456,159	1,527,147	23,768	1,550,915
Total income		1,534,451	—	1,534,451	1,593,311	23,768	1,617,079
Expenditure							
Cost of generating funds							
. Investment management costs		6,329	—	6,329	7,289	—	7,289
Expenditure on charitable activities							
. Dissemination of information	3	1,698,099	5,741	1,703,840	1,635,964	22,098	1,658,062
Total expenditure		1,704,428	5,741	1,710,169	1,643,253	22,098	1,665,351
Net (expenditure) income before gains on investments		(169,977)	(5,741)	(175,718)	(49,942)	1,670	(48,272)
Net gains (losses) on investments	11	206,098	—	206,098	(164,846)	—	(164,846)
Net income (expenditure) and net movement in funds for the year		36,121	(5,741)	30,380	(214,788)	1,670	(213,118)
Reconciliation of funds:							
Fund balances brought forward at 1 January 2019		2,799,454	23,375	2,822,829	3,014,242	21,705	3,035,947
Fund balances carried forward at 31 December 2019		2,835,575	17,634	2,853,209	2,799,454	23,375	2,822,829

All of the charity's activities derived from continuing operations during the current financial period.

All recognised gains or losses are included in the above statement of financial activities.

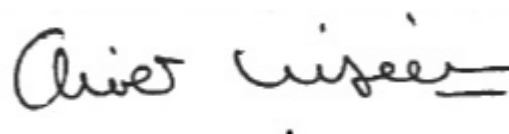
Balance sheet 31 December 2019

	Notes	2019 £	2019 £	2018 £	2018 £
Fixed assets					
Intangible fixed assets	9		28,080		37,440
Tangible fixed assets	10		8,029		6,914
Investments	11		2,003,725		1,789,802
			2,039,834		1,834,156
Current assets					
Stocks		7,460		9,137	
Debtors	12	459,414		268,957	
Cash at bank and in hand		819,610		851,763	
		1,286,484		1,129,857	
Liabilities:					
Creditors: amounts falling due within one year	13	(473,109)		(141,184)	
Net current assets			813,375		988,673
Total net assets			2,853,209		2,822,829
The funds of the charity:					
Restricted funds					
. UROLINK funds	14		17,634		23,375
Designated funds					
. Endourology funds	14		281,889		291,674
. Section of Trainee funds			50,849		—
Unrestricted funds:					
. General funds	14		2,502,837		2,507,780
			2,853,209		2,822,829

Approved by the Trustees
and signed on their behalf by:



D. Summerton
President



O. Wiseman
Honorary Treasurer

Approved on: 4 May 2020

The British Association of Urological Surgeons Limited
Registered Company Number: 06054614 (England and Wales)

Statement of cash flows 31 December 2019

	Notes	2019 £	2018 £
Cash outflow from operating activities:			
Net cash used in operating activities	A	(96,526)	(250,859)
Cash inflow from investing activities:			
Dividends and interest from investments		78,292	66,164
Purchase of tangible fixed assets		(6,094)	(1,297)
Purchase of intangible fixed assets		—	(46,800)
Proceeds from the disposal of investments		2,022,607	75,625
Purchase of investments		(2,030,432)	(66,395)
Net cash provided by investing activities		64,373	27,297
Change in cash and cash equivalents in the year		(32,153)	(223,562)
Cash and cash equivalents at 1 January 2019	B	851,763	1,075,325
Cash and cash equivalents at 31 December 2019	B	819,610	851,763

Notes to the cash flow statement for the year to 31 December 2019.

A Reconciliation of net movement in funds to net cash flow from operating activities			
		2019 £	2018 £
Net movement in funds (as per the statement of financial activities)		30,380	(213,118)
Adjustments for:			
Depreciation charge		4,979	3,760
Amortisation charge		9,360	9,360
(Gains) losses on investments		(206,098)	164,846
Dividends and interest from investments		(78,292)	(66,164)
Increase (decrease) in stocks		1,677	(5,404)
(Increase) decrease in debtors		(190,457)	(97,514)
Increase (decrease) in creditors		331,925	(46,625)
Net cash used in operating activities		(96,526)	(250,859)
B Analysis of cash and cash equivalents			
		2019 £	2018 £
Cash at bank and in hand		818,610	838,847
Cash held by investment managers		1,000	12,916
Total cash and cash equivalents		819,610	851,763

Principal accounting policies 31 December 2019

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the accounts are laid out below.

Basis of preparation

These accounts have been prepared for the year to 31 December 2019.

The accounts have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant accounting policies below or the notes to these accounts.

The accounts have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) (Charities SORP FRS 102) issued on 16 July 2014, the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Charities Act 2011.

The charity constitutes a public benefit entity as defined by FRS 102.

The accounts are presented in sterling and are rounded to the nearest pound.

Critical accounting estimates and areas of judgement

Preparation of the accounts requires the trustees and management to make significant judgements and estimates.

The items in the accounts where judgements and estimates have been made include the judgement whether items meet the criteria for capitalisation as intangible fixed assets, estimating the amortisation and useful economic life and likely residual values, if any, of intangible and tangible fixed assets for the purposes of determining the annual depreciation charge.

Assessment of going concern

The trustees have assessed whether the use of the going concern assumption is appropriate in preparing these accounts. The trustees have made this assessment in respect to a period of one year from the date of approval of these accounts.

The trustees of the charity have concluded that, notwithstanding the uncertainties consequent on the COVID-19 pandemic, the charity is able to continue as a going concern. The trustees are of the opinion that the charity will have sufficient resources to meet its liabilities as they fall due. The most significant areas of judgement that affect items in the accounts are detailed above. With regard to the next accounting period, the year ending 31 December 2020, the most significant areas that affect the carrying value of the assets held by the charity are the level of investment return and the performance of the investment markets.

Income recognition

Income is recognised in the period in which the charity becomes entitled to that income, where receipt of resources is probable and the amount can be measured reliably.

Income comprises subscriptions, income from scientific meetings and journals, investment income, donations and other income.

General donations and other similar types of voluntary income are recognised when the charity has confirmation of both the amount and settlement date. In the event of amounts pledged but not received, the amount is accrued for where the receipt is considered probable. Donated income is included gross of any attributable tax recoverable, where relevant. Donations given for specific purposes are treated as restricted income.

Dividends are recognised once the dividend has been declared and notification has been received of the dividend due. Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity. This is normally upon notification of the interest paid or payable by the bank.

Income is recognised in the statement of financial activities for the proportion of subscriptions, which are receivable in the financial period. Amounts received but not recognised in the statement of financial activities are carried forward in the balance sheet as deferred income.

Income from scientific meetings and journals is recognised in the statement of financial activities when the service is delivered. Amounts received but not recognised are carried forward in the balance sheet as deferred income.

Resources expended

All expenditure is accounted for on an accruals basis. Expenditure comprises direct costs and support costs. All expenses, including support costs, are allocated or apportioned to the applicable expenditure headings. The classification between activities is as follows:

- ◆ Expenditure on raising funds includes all expenditure associated with raising funds for the charity. This includes investment management fees.
- ◆ Expenditure on charitable activities includes all costs associated with furthering the charitable purposes of the charity through the provision of its charitable activities. Such costs include charitable grants and donations, direct and support costs in respect of the dissemination of information including governance costs.

Grants payable are included in the statement of financial activities when approved and when the intended recipient has either received the funds or been informed of the decision to make the grant and has satisfied all performance conditions. Grants approved but not paid at the end of the financial year are accrued. Grants where the beneficiary has not been informed or has to fulfil performance conditions before the grant is released are not accrued for but are disclosed as financial commitments in the notes to the accounts. Grants comprise single year payments rather than multi-year grants.

All expenditure is stated inclusive of irrecoverable VAT.

Allocation of support and governance costs

Support costs represent indirect charitable expenditure. In order to carry out the primary purposes of the charity it is necessary to provide support in the form of personnel development, financial procedures, provision of office services and equipment and a suitable working environment.

Governance costs comprise the costs involving the public accountability of the charity (including audit costs) and costs in respect of its compliance with regulation and good practice.

Support costs and governance costs are allocated in full to the charitable activity of dissemination of information.

Intangible fixed assets

All intangible 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 intangible fixed assets. Intangible fixed assets are stated at historical cost less amortisation. Amortisation is provided on all intangible fixed assets at rates calculated to write each asset down to its estimated residual value evenly over its expected useful life, as follows:

- ◆ CRM database – over 5 years.

An annual impairment review is carried out for each asset after it has been brought into use to reassess its remaining useful life and that it still meets the definition of an intangible asset. Provision is made for assets that are no longer deemed to give an ongoing benefit to the charity for a period of greater than 12 months.

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 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 and fittings – over 5 years
- ◆ Office equipment – over 5 years

Fixed asset investments

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

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

Fixed asset investments (continued)

Realised gains (or losses) on investment assets are calculated as the difference between disposal proceeds and their opening carrying value or their purchase value if acquired subsequent to the first day of the financial year. Unrealised gains and losses are calculated as the difference between the fair value at the year end and their carrying value at that date. Realised and unrealised investment gains (or losses) are combined in the statement of financial activities and are credited (or debited) in the year in which they arise.

Stocks

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

Debtors

Debtors are recognised at their settlement amount, less any provision for non-recoverability. Prepayments are valued at the amount prepaid. They have been discounted to the present value of the future cash receipt where such discounting is material.

Cash at bank and in hand

Cash at bank and in hand represents such accounts and instruments that are available on demand or have a maturity of less than three months from the date of acquisition.

Creditors and provisions

Creditors and provisions are as soon as there is a legal or constructive obligation at the balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Creditors and provisions are recognised at the amount the charity anticipates it will pay to settle the debt. They have been discounted to the present value of the future cash payment where such discounting is material.

Leased assets

Rentals applicable to operating leases where substantially all of the benefits and risks of ownership remain with the lessor are charged on a straight line basis over the term of the lease.

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, therefore the financial statements include pension costs payable in respect of the plan on a defined contribution basis.

Principal accounting policies 31 December 2019

Fund accounting

The general fund comprises the accumulated surpluses of unrestricted incoming resources not yet expended, which are available for use in furtherance of the general objectives of the charity.

Designated funds are set aside out of unrestricted funds and consist 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.

1 Investment income

	Unrestricted funds £	Restricted funds £	2019 £
Bank interest receivable on short term cash deposits	5,624	—	5,624
Income from investments listed on a recognised stock exchange	72,668	—	72,668
2019 Total funds	78,292	—	78,292
	<i>Unrestricted funds £</i>	<i>Restricted funds £</i>	<i>2018 £</i>
<i>Bank interest receivable on short term cash deposits</i>	<i>5,151</i>	<i>—</i>	<i>5,151</i>
<i>Income from investments listed on a recognised stock exchange</i>	<i>61,013</i>	<i>—</i>	<i>61,013</i>
<i>2018 Total funds</i>	<i>66,164</i>	<i>—</i>	<i>66,164</i>

2 Income from dissemination of information

	Unrestricted funds £	Restricted funds £	2019 £
Subscriptions	519,426	—	519,426
Annual Scientific Meeting	548,673	—	548,673
Journal of Clinical Urology	49,210	—	49,210
Journal of Medical & Surgical Urology	536	—	536
Office of Education	135,239	—	135,239
Section of Oncology	62,922	—	62,922
Section of Endourology	60,814	—	60,814
Section of Trainees	53,669	—	53,669
Section of Andrology and Genito-Urethral Surgery	19,333	—	19,333
Section of Academic Urology	—	—	—
Urolink	2,000	—	2,000
Data and audit	1,508	—	1,508
Other income	2,829	—	2,829
2019 Total funds	1,456,159	—	1,456,159

2 Income from dissemination of information (continued)

	<i>Unrestricted funds</i>	<i>Restricted funds</i>	<i>2018</i>
	£	£	£
<i>Subscriptions</i>	454,524	—	454,524
<i>Annual Scientific Meeting</i>	660,175	—	660,175
<i>Journal of Clinical Urology</i>	52,982	—	52,982
<i>Journal of Medical & Surgical Urology</i>	4,923	—	4,923
<i>Office of Education</i>	160,004	—	160,004
<i>Section of Oncology</i>	65,992	—	65,992
<i>Section of Endourology</i>	49,702	—	49,702
<i>Section of Academic Urology</i>	845	—	845
<i>Urolink</i>	49,783	23,768	73,551
<i>Data and audit</i>	26,979	—	26,979
<i>Other income</i>	1,238	—	1,238
2018 Total funds	1,527,147	23,768	1,550,915

3 Costs of dissemination of information

	<i>Unrestricted funds</i>	<i>Restricted funds</i>	2019
	£	£	£
Direct costs:			
Annual Scientific Meeting	470,883	—	470,883
Journal of Clinical Urology	63,917	—	63,917
Office of Education	131,995	—	131,995
Section of Oncology	48,495	—	48,495
Section of Endourology	28,187	—	28,187
Section of Female, Neurological and Urodynamic Urology	1,580	—	1,580
Section of Trainees	2,470	—	15,479
Section of Andrology and Genito-Urethral Surgery	15,479	—	1,523
Section of Academic Urology	1,523	—	2,470
Data and audit	28,905	—	28,905
British Journal of Urology International	56,834	—	56,834
Grants, donations and awards (see note 4)	58,509	—	58,509
Urolink	6,090	5,741	11,831
Subscriptions	11,753	—	11,753
Website Costs	6,021	—	6,021
	932,641	5,741	938,382
Support costs (see note 5)	663,248	—	663,248
Governance costs (see note 5)	102,210	—	102,210
2019 Total funds	1,698,099	5,741	1,703,840

3 Costs of dissemination of information (continued)

	Unrestricted funds £	Restricted funds £	2018 £
<i>Direct costs:</i>			
Annual Scientific Meeting	434,163	—	434,163
Journal of Clinical Urology	60,738	—	60,738
Office of Education	147,216	—	147,216
Section of Oncology	44,116	—	44,116
Section of Endourology	37,572	—	37,572
Section of Female, Neurological and Urodynamic Urology	1,994	—	1,994
Section of Trainees	1,215	—	1,215
Section of Andrology and Genito-Urethral Surgery	1,895	—	1,895
Section of Academic Urology	3,830	—	3,830
Data and audit	26,784	—	26,784
British Journal of Urology International	87,450	—	87,450
Grants, donations and awards (see note 4)	4,792	—	4,792
Urolink	13,035	22,098	35,133
Subscriptions	3,000	—	3,000
Website Costs	6,495	—	6,495
	874,295	22,098	896,393
<i>Support costs (see note 5)</i>	672,681	—	672,681
<i>Governance costs (see note 5)</i>	88,988	—	88,988
2018 Total funds	1,635,964	22,098	1,658,062

Included within website costs is an ex gratia payment of £5,000.

4 Prizes, donations and awards

	Unrestricted funds £	Restricted funds £	2019 £
Other Grants	56,832	—	56,832
Medals awarded to five individuals	1,677	—	1,677
2019 Total funds	58,509	—	58,509

	Unrestricted funds £	Restricted funds £	2018 £
Other Grants	3,399	—	3,399
Medals awarded to four individuals	1,393	—	1,393
2018 Total funds	4,792	—	4,792

5 Support and governance costs

	Support costs £	Governance £	2019 £
Staff costs (see note 7)	434,729	—	434,729
Staff recruitment, training, travel and welfare	6,601	—	6,601
Council and committee expenses	—	19,659	19,659
President's expenses and Officer's sessional time	—	72,621	72,621
Accommodation costs	75,631	—	75,631
Repairs, maintenance, and computer software expenses	45,647	—	45,647
Telephone	7,236	—	7,236
Postage, mailings, printing and stationery	7,366	—	7,366
Legal and professional fees	22,926	—	22,926
Auditors' remuneration:			
. Audit – current year	—	7,900	7,900
. Audit – prior year under / (over) accrual	—	—	—
Accountancy and advisory	—	2,030	2,030
Bank and credit card charges	13,440	—	13,440
Irrecoverable VAT	30,519	—	30,519
Sundry office expenses	4,814	—	4,814
Depreciation	4,979	—	4,979
Amortisation	9,360	—	9,360
	663,248	102,210	765,458
	Support costs £	Governance £	2018 £
Staff costs (see note 7)	452,073	—	452,073
Staff recruitment, training, travel and welfare	8,624	—	8,624
Council and committee expenses	—	23,257	23,257
President's expenses and sessional time	—	55,586	55,586
Accommodation costs	82,456	—	82,456
Repairs, maintenance, and computer software expenses	45,795	—	45,795
Telephone	3,153	—	3,153
Postage, mailings, printing and stationery	11,425	—	11,425
Legal and professional fees	14,220	—	14,220
Auditors' remuneration:			
. Audit – current year	—	7,700	7,700
. Audit – prior year under / (over) accrual	—	20	20
Accountancy and advisory	—	2,425	2,425
Bank and credit card charges	12,732	—	12,732
Irrecoverable VAT	25,274	—	25,274
Sundry office expenses	3,810	—	3,810
Depreciation	3,759	—	3,759
Amortisation	9,360	—	9,360
	672,681	88,988	761,669

6 Net (expenditure) income before gains on investments

This is stated after charging:

	2019 £	2018 £
Staff costs (see note 7)	434,729	452,073
Depreciation	4,979	3,760
Amortisation	9,360	9,360
Operating lease charges	72,631	74,595
Auditors' remuneration		
. Audit – current year	7,900	7,700
. Audit – prior year	—	20

7 Staff costs and remuneration of key management personnel

The average number of persons employed by the charity (excluding council members), during the year was as follows:

	2019 No	2018 No
Office and administration	10	8

6 full-time, 3 part-time, 1 maternity leave (2018 – 6 full-time, 2 part-time)

Staff costs for the above persons:

	2019 £	2018 £
Wages and salaries	343,702	359,709
Social security costs	37,061	37,381
Other pension costs	53,966	54,983
	434,729	452,073

No trustee received any remuneration for services to the charity as a member of Council during the current or previous year. During the year, nine (2018 - eight) trustees were reimbursed for travel and meetings expenses totalling £29,210 (2018 - £22,269), this includes £9,236 travel expenses paid in respect of the President's wife in an ambassadorial role at international meetings. BAUS reimbursed the employing trust of the BAUS President for two sessions per week and the employing trust of the Vice President for one session per week, amounting to £43,807 (2018 - £42,948).

During the year the number of employees earning £60,000 or more (including taxable benefits but excluding employer pension contributions) was as follows:

	2019 No	2018 No
£60,001 - £70,000	1	1
£70,001 - £80,000	1	1

The pension contributions payable for these employees amounted to £23,538 (2018 - £23,077).

7 Staff costs and remuneration of key management personnel (continued)

The key management personnel of the charity in charge of directing and controlling, running and operating the charity on a day to day basis comprise the trustees, the Chief Executive and Deputy Chief Executive. The total employment costs (including employer's national insurance and pension contributions) of the key management personnel for the year was £188,586 (2018 - £186,920).

8 Taxation

The charity is not liable to corporation tax on income derived from its charitable activities, as it falls within the various exemptions available to registered charities.

9 Intangible fixed assets

	CRM database £
Cost	
At 1 January 2019 and at 31 December 2019	46,800
Depreciation	
At 1 January 2019	9,360
Charge for the year	9,360
At 31 December 2019	18,720
Net book values	
At 31 December 2019	28,080
At 31 December 2018	37,440

10 Tangible fixed assets

	Improvements to leasehold premises £	Fixtures & fittings £	Computer equipment £	Total £
Cost				
At 1 January 2019	450,214	34,401	25,345	509,960
Additions	—	—	6,094	6,094
Disposals	—	—	(10,931)	(10,931)
At 31 December 2019	450,214	34,401	20,508	505,123
Depreciation				
At 1 January 2019	450,214	32,822	20,010	503,046
Charge for the year	—	979	4,000	4,979
Disposals	—	—	(10,931)	(10,931)
At 31 December 2019	450,214	33,801	13,079	497,094
Net book values				
At 31 December 2019	—	600	7,429	8,029
At 31 December 2018	—	1,579	5,335	6,914

Improvements to leasehold premises have been written off over the life of the lease. In the previous year, the lease was extended until May 2021, these original assets therefore remain in use.

11 Investments

	2019 £	2018 £
Investments listed on a recognised stock exchange at market value		
1 January 2019	1,789,802	1,963,878
Additions at cost	2,030,432	66,395
Disposal proceeds	(2,022,607)	(75,625)
Realised gains (losses)	175,713	(65,352)
Unrealised gains (losses)	30,385	(99,494)
At 31 December 2019	2,003,725	1,789,802

At the balance sheet date, the historical cost of the investments was £1,972,364 (2018 - £1,398,168).

At the balance sheet date, the market value of the portfolio comprised:

	2019 £	2018 £
Fixed interest	8,015	181,939
UK equities	250,466	521,777
Global equities	1,170,175	842,236
Property	448,834	87,748
Other assets	126,235	156,102
	2,003,725	1,789,802

Individual holdings representing more than 5% of the market value of the portfolio at the balance sheet date are as follows:

	2019 £	2018 £
Sarasin Alpha CIF for endowments	—	959,823
COIF Charities Investment Fund	2,003,725	—

As explained in the trustees' report and accounting policies to the financial statements, as a result of the Coronavirus pandemic, world stock markets have experienced significant volatility and falls since the balance sheet date. It is estimated that the market value of investments was £1,851,794 at 4 May 2020.

12 Debtors

	2019 £	2018 £
Amounts falling due within one year:		
Trade debtors	224,499	73,024
VAT recoverable	20,063	20,097
Other debtors	8,976	4,129
Prepayments and accrued income	205,876	171,707
	459,414	268,957

13 Creditors: amounts falling due within one year

	2019 £	2018 £
Amounts falling due within one year:		
Trade creditors	48,744	45,730
Other taxes and social security costs	38,592	10,854
Accruals	105,985	29,698
Annual meeting income received in advance	228,430	9,750
Office of Education income received in advance	51,108	45,152
Subscription income received in advance	250	—
	473,109	141,184

Income has been deferred because the charity has not yet met the conditions for recognising the income. The movements on deferred income are analysed below:

	2019 £	2018 £
Brought forward	54,902	64,075
Released in year	(54,902)	(64,075)
Additions in year	279,788	54,902
Carried forward	279,788	54,902

14 Funds

	1 January 2019 £	Income £	Expenditure £	Transfers & gains (losses) on investments £	31 December 2019 £
Restricted income funds:					
. UROLINK fund	23,375	—	(5,741)	—	17,634
Designated fund					
. Section of Trainees fund	—	—	(5,838)	56,687	50,849
. Endourology fund	291,674	—	(50,511)	40,726	281,889
Unrestricted income funds					
. General fund	2,507,780	1,534,451	(1,648,079)	108,685	2,502,837
	2,822,829	1,534,451	(1,710,169)	206,098	2,853,209

	1 January 2018 £	Income £	Expenditure £	Transfers & gains on investments £	31 December 2018 £
Restricted income funds:					
. UROLINK fund	21,705	23,768	(22,098)	—	23,375
Designated fund					
. Endourology fund	308,732	—	(3,399)	(13,659)	291,674
Unrestricted income funds					
. General fund	2,705,510	1,593,311	(1,639,854)	(151,187)	2,507,780
	3,035,947	1,617,079	(1,665,351)	(164,846)	2,822,829

14 Funds (continued)

The UROLINK Fund was set up in 2008 by the unincorporated Association with a donation received from BJU international. Further funds have been received in recent years from BJU International and The Urology Foundation. These monies continue to be utilised to support UROLINK activities.

The Endourology designated fund represents the net surplus generated from the World Congress of Endourology, which will be used to support fellowships in endourology. It is anticipated this fund will be spent over a maximum of ten years.

The BSoT designated fund represents the monies transferred to BAUS in 2019 when the Specialist Urology Registrars' Group (SURG), which had been a separate charity, ceased to exist and BSOT was formed as part of BAUS. Trustees agreed these funds plus any surpluses generated by BSoT activities could be held in a designated fund to support urological training/trainees.

15 Analysis of net assets between funds

	Fixed assets £	Investments £	Net current assets £	2019 Total £
Restricted income funds:				
. UROLINK fund	—	—	17,634	17,634
Designated income funds	—	332,738	—	332,738
Unrestricted income funds				
. General fund	36,109	1,670,987	795,741	2,502,837
	<u>36,109</u>	<u>2,003,725</u>	<u>813,375</u>	<u>2,853,209</u>

	Fixed assets £	Investments £	Net current assets £	2018 Total £
Restricted income funds:				
. UROLINK fund	—	—	23,375	23,375
Designated income funds	—	291,674	—	291,674
Unrestricted income funds				
. General fund	44,354	1,498,128	965,298	2,507,780
	<u>44,354</u>	<u>1,789,802</u>	<u>988,673</u>	<u>2,822,829</u>

15 Analysis of net assets between funds (continued)

The total unrealised gains as at 31 December 2019 constitutes movements on fair value and are as follows:

	2019 £	2018 £
Unrealised gains included above:		
On investments	30,361	391,634
Total unrealised gains at 31 December 2019	30,361	391,634
Reconciliation of movements in unrealised gains		
Unrealised gains at 1 January 2019	391,634	558,621
Less: in respect of disposals in the year	(390,658)	(67,493)
	976	491,128
Add: net gains (losses) rising on fair value movements arising in the year	30,385	(99,494)
Total unrealised gains at 31 December 2019	31,361	391,634

16 Commitments under operating leases

At 31 December 2019, the charitable company had the following future minimum commitments under non-cancellable operating leases as follows:

	2019 £	2018 £
In respect of land and building leases		
Payments which fall due:		
. Within one year	72,631	72,631
. Within two to five years	30,263	102,894
	102,894	175,525

17 Pension commitments

The charitable company participates in a centralised defined benefit scheme known as Superannuation Arrangements of the University of London (SAUL) for all qualified employees with the assets held in 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 payable (cash amounts) in accordance with FRS 102. The amount charged to the statement of financial activities in respect of pension costs (as shown in note 7) is the total contributions payable for the year. Any contributions payable at the balance sheet date are treated as creditors (as shown in note 13).

SAUL is subject to triennial valuation by professionally qualified and independent actuaries. The last available valuation was carried out as at 31 March 2017 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:

17 Pension commitments (continued)

Pre-retirement discount rate	5.96% per annum
Post-retirement discount rate	3.86% per annum
General salary increases	3.72% per annum
Price inflation – RPI	3.57% per annum
Price inflation – CPI	2.72% per annum
Pension increases in payment	2.72% per annum

The actuarial valuation applies to SAUL as a whole and does not identify surpluses or deficits applicable to individual employers. As at 31 March 2017, SAUL had assets of £3,205 million against liabilities of £3,149 million. This means that SAUL's funding level has improved to 102% with a surplus of £56 million.

Employer contributions increased to 16% with effect from 1 April 2016. Member contributions were maintained at 6% of salaries.

18 Related party transactions

There were three transactions, totalling £9,236, with a related party requiring disclosure during the period (2018 - none) see note 7 to the financial statements.