

Charity Registration No. SC029247 (Scotland)

Company Registration No. SC198418 (Scotland)

**BRITISH INFECTION ASSOCIATION**  
**TRUSTEES' REPORT AND CONSOLIDATED**  
**FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED**  
**30 SEPTEMBER 2019**

# BRITISH INFECTION ASSOCIATION

## LEGAL AND ADMINISTRATIVE INFORMATION

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<b>Trustees</b>	Dr Katherine Jeffery Dr Michael Kelsey Prof Martin Llewelyn Dr Hitendrakumar Thaker Dr David Partridge
<b>Charity number (Scotland)</b>	SC029247
<b>Company number</b>	SC198418
<b>Registered office</b>	Balfour & Manson LLP 54-66 Frederick Street Edinburgh EH2 1LS
<b>Auditor</b>	RSM UK Audit LLP Chartered Accountants First Floor, Quay 2 139 Fountainbridge Edinburgh EH3 9QG
<b>Bankers</b>	The Royal Bank of Scotland 40 Albyn Place Aberdeen AB10 1YN
<b>Solicitors</b>	Balfour & Manson LLP 54-66 Frederick Street Edinburgh EH2 1LS
<b>Investment advisors</b>	Rathbone Investment Management 28 St Andrew Square Edinburgh EH2 1AF

# BRITISH INFECTION ASSOCIATION

## LEGAL AND ADMINISTRATIVE INFORMATION

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### Council Members – from May 2019

President*	Professor Martin Llewelyn (Brighton & Sussex University Hospitals NHS Trust)
Vice President*	Dr Katie Jeffery (Oxford University Hospitals NHS Foundation Trust)
Honorary Secretary*	Dr David Partridge (Sheffield Teaching Hospitals NHS Foundation Trust)
Honorary Treasurer*	Dr Michael Kelsey (Whittington Health NHS)
Meetings Secretary*	Dr Hiten Thaker (Hull and East Yorkshire Hospitals NHS Trust)
Manpower & Training Secretary	Dr Bridget Atkins (Oxford University Hospitals NHS Foundation Trust)
Scientific & Research Secretary	Dr Chris Chiu (Imperial College, London)
Guidelines Secretary	Dr Anna Goodman (Guy's & St Thomas' NHS Foundation Trust)
Membership Secretary	Dr Mark Melzer (WXUH Barts Health NHS Trust)
Clinical Services Secretary (MMV)	Dr Natasha Ratnaraja (Sandwell & West Birmingham Hosp NHS Trust)
Clinical Services Secretary (ID)	Dr Anna Checkley (Hosp for Tropical Diseases, London), & Dr Jo Herman (Imperial College London)
Communications Secretary	Dr Ed Moran (Southmead Hospital, Bristol)
Trainee representatives (Meetings)	Dr Farnaz Dave (North Manchester General Hospital)
Trainee representatives (Professional Affairs)	Dr Sara Boyd (Imperial College, London)
Newsletter Editor	Dr Naomi Meardon (Sheffield Teaching Hospitals NHS Foundation Trust)
Devolved Administrations Secretary	Dr Ray Fox (Gartnavel General Hosp, Glasgow)
Associate Members Secretary	Dr Louise Dunsmure (Oxford University Hospitals NHS Foundation Trust)
Editor, Journal of Infection ( <i>ex officio</i> )	Professor Rob Read (University of Southampton)
Editor, Clinical Infection in Practice ( <i>ex officio</i> )	Professor Martin Wiselka (University Hospitals Leicester)

\* *Principal Officers of the Association*

^ *Interim post holders*

# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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The Trustees present their report and financial statements for the year ended 30 September 2019.

The consolidated financial statements have been prepared in accordance with the accounting policies set out in note 1 to the financial statements and comply with the Articles of Association, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 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 UK and Republic of Ireland (FRS 102)" (as amended for accounting periods commencing from 1 January 2016).

#### **Structure, governance and management**

British Infection Association is a charitable company limited by guarantee, company registration no. SC198418, established under a Memorandum of Association and is governed under its Articles of Association. It is a charity registered in Scotland, charity registration no. SC029247 and its registered office is located at 54-66 Frederick Street, Edinburgh.

BIA Conferences Limited (SC551988) is a wholly owned subsidiary of the Association and the subsidiary's results for the year are consolidated in these financial statements. BIA Conferences Limited was established to run conferences for medical research on infectious diseases on behalf of the Association.

The members have each agreed to contribute £1 in the event of the charity being unable to meet its debts. The membership of the Association at 30 September 2019 consisted of 1,329 people (2018: 1,541).

The Trustees, who are also the directors for the purpose of company law, and who served during the year were:

Dr Katherine Jeffery

Dr Michael Kelsey

Prof Martin Llewelyn

Dr Albert Mifsud

(Resigned 23 May 2019)

Dr Hitendrakumar Thaker

Dr David Partridge

(Appointed 23 May 2019)

#### **Election of Trustees**

The sections of the Articles of Association dealing with the recruitment and appointment of Trustees are as follows:

- (a) The affairs of the Association shall be conducted by the Trustees consisting of elected members from among the general membership: President (Chairman of Council), Secretary, Treasurer, Membership Secretary, Meetings Secretary, Scientific Affairs Co-ordinator, Professional Affairs, Co-ordinator, Manpower and Training Co-ordinator, Clinical Services Co-ordinator, Training grade members x 3, Associate Member.
- (b) Each member who agrees to become a Trustee shall be proposed and seconded in writing by Association members one of whom must be of at least 2 years' standing.
- (c) The Editor of the Journal of Infection will be an ex-officio member and will be accountable to and appointed by the Trustees.
- (d) The Trustees reserve the right to co-opt new members as and when this is deemed appropriate.
- (e) A quorum for business shall comprise a majority of its membership.



# **BRITISH INFECTION ASSOCIATION**

## **TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)**

### **FOR THE YEAR ENDED 30 SEPTEMBER 2019**

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#### Office Bearers of the Association

(a) The Trustees should ensure that there are sufficient nominations for the posts of President, Treasurer, Secretary and Meetings Secretary (the Principal Officers) when these fall vacant. Additional nominations from the membership will also be welcomed. The Association should aim to include representation from the different disciplines concerned with infection on the Board. The Trustees may decide that one of its members shall become a Principal Officer in place of an Officer who has had to demit office prematurely.

(b) The President shall serve for a term of two years and shall not be eligible for re-election for a consecutive term as President, except in exceptional circumstances.

(c) Both the Secretary and the Treasurer shall serve a term of three years and shall be eligible for re-election.

#### Other Trustees

(a) Training grade Trustees shall serve for two years each; in the event of promotion to a consultant or equivalent post such members will be entitled to complete their term of office. Other Trustees shall serve for three years each, with approximately one-third of their number retiring from office each year. Trustees shall not be eligible for immediate re-election except in exceptional circumstances.

(b) The Trustees shall have the rights to establish and dissolve specific Committees, Sub-Committees or working groups as deemed appropriate for the advancement of the Association's business.

The Articles of Association states that:-

(a) The Association shall hold an Annual General Meeting on a date and at a time to be decided by the Trustees.

(b) A quorum for business at the AGM shall comprise at least 5 per cent of the full voting membership.

In addition there are at least four meetings annually where all decisions are made. No strategic decisions are delegated to service providers who act in an administrative capacity only.

The Trustees acknowledge their responsibility to assess and manage the risks that the Association faces or might face in the future. Officers and service providers are required to identify and analyse risks relevant to their responsibilities, assess risks according to their likely occurrence and impact and report on procedures that are in place to manage the risks. The risk management process is overseen and reviewed by the Council.

The aim of the risk management process is to ensure the integrity of British Infection Association as a charity is protected through continued scrutiny and the development of a published strategy which explains how the Association is governed and managed, to the satisfaction of its Membership, Office of the Scottish Charity Regulator (OSCR) and any other interested parties.

The following actions have been proposed:

- To ensure the Memorandum and Articles of Association for the Association are regularly reviewed by Council;
- To make available and publish copies of the annual report, accounts, and records of meetings;
- To review, and further develop the role of Council members;
- To promote opportunities for Council office, sub-committees and other Association activities to the Membership; and
- To establish mechanisms for ensuring continuity on Council and Association sub-committees.

#### **Objectives and activities**

The Memorandum states that the objectives of the Association is to ensure the optimum delivery of healthcare to patients diagnosed with infection.

# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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The Trustees agree a programme of work for the forthcoming year. This programme of work is dedicated to promote the science and practice of medicine in relation to further research, training and education in the subject, by organising high quality scientific meetings, awarding research and travel grants and ensuring that the infection disciplines have a voice in national decision making.

The Association aims to enable the best care for patients with infectious disease through:

- Setting and reviewing standards in infection practice, including the development of guidelines, working in collaboration where appropriate;
- Supporting infection specialists in the performance of their professional duties by facilitating communication and providing useful resources;
- Developing and providing excellent education and training in infection for all and in particular to support training grades through meetings and presentations (alone and in collaboration with other scientific societies);
- Fostering excellence in all aspects of infection-related research by supporting high quality clinical and basic science research through competitive award of funding to research applicants;
- Disseminating new research and best practice via the Association's publication: the Journal of Infection;
- Working with government, Public Health England, NHS England, and other interested bodies to promote best practice in areas related to infectious disease;
- Providing expert opinion on infection related matters to external agencies, patients, and the wider public; and
- Supporting all aspects of communication between different branches of infection and to work towards the development of an integrated voice for infection specialists.

*(A copy of the BIA Memorandum is available to view on the BIA website)*

#### **Achievements and performance**

These areas will be explored further within the following pages, under the broad headings of:

President's report  
Honorary secretary's report  
Governance and finance  
Honorary treasurer's report  
Membership and communications  
Standard setting & guideline development  
Clinical services  
European affairs  
Education and meetings  
Manpower and training  
Science and research  
Annual trainees' report  
BIS Representation to outside meetings  
Journal of infection editor's report  
Clinical Infection in Practice (CLIP) Editor's Report

# **BRITISH INFECTION ASSOCIATION**

## **TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)**

### **FOR THE YEAR ENDED 30 SEPTEMBER 2019**

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#### **President's report**

I am delighted to introduce this report describing the Association's activities during the year ending Sept 2019.

The Association was formed in November 2009, through a merger of the Association of Medical Microbiologists and the British Infection Society. This reflected changes in the way infection expertise is delivered in the NHS. Today our members are increasingly trained or training in infectious diseases and microbiology. When I took up the Presidency in 2019 the Association had just completed a review of the priorities of its membership which highlighted a desire to develop support for training and practice and to ensure the relevance of our research support to the practice of our members. I, and the other Principal Officers (POs) of the Association, have a duty to also ensure its finances are in good shape to support its ambitions. Over the last year we have had to review our expenditure carefully to ensure we live within our means. We face financial challenges posed by changes in academic publishing which affect the income we receive from our journals and an increasingly difficult environment in which to deliver high quality clinical/scientific meetings cost-effectively.

In Nov 2018 BIA led on delivery of a fantastic Federation of Infection Societies (FIS) meeting in Gateshead which nevertheless made a financial loss for the Association largely due to its proximity in time to the Hospital Infection Society meeting. I and the other POs are working closely now with senior officers of the other major UK microbiology/infection societies to develop a new working relationship for the FIS meetings from 2021 onwards to ensure this valuable meeting continues to develop sustainably into the future.

The various subsections of this report will describe workstreams in detail but I wanted to highlight a few here. This year we have made strides in support for infection trainees this year supported by a new education subcommittee. This has delivered the new LearnInfection initiative for trainees preparing for postgraduate exams and through the work of the NITCAR, the National Infection Trainee Collaborative for Audit and Research, which continues to develop new trainee led projects and is delivering its first published outputs. We continue to work closely with partner organisations for example through the Joint Specialist Committee at the Royal College of Physicians and the Pathology Alliance. Our Clinical Services Committee have drafted detailed recommendations on workforce planning for our membership which is now out for review and endorsement by the colleges and will be an invaluable resource for members. Internationally we have worked with the European Union of Medical Specialists Medical Microbiology and Infectious Diseases sections to develop European wide examinations in these specialties.

The work described here is down to the efforts of council officers and individual members of the Association all of whom have freely given up their time to further the Association's aims often with little wide recognition. We are also indebted to Hartley Taylor who provide indispensable secretariat support. On behalf of the membership I offer my gratitude for all these contributions.

#### **Clinical Excellence Awards 2019**

BIA is registered as a national specialist society with the Advisory Committee on Excellence Awards.

Professor David Dockrell again chaired the Association's Clinical Excellence Awards (CEA) committee. All members were invited to self-nominate. Nominations were circulated to the BIA CEA panel.

All panel members reviewed the applications and eight took part in the ranking meeting via telephone call held on 18<sup>th</sup> March 2019. Panel members unable to join the teleconference returned their comments to the Chair by March 15<sup>th</sup>. Six applications were received for a Bronze award with one renewal and five new applications. All applications were supported.

# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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Panel members wrote citations and the Chair uploaded these to the applicant's applications. All applicants were informed of the BIA decisions. The process was overseen by our external scrutineer Paul Ashwell who was happy with the conduct of this year's assessment.

**BIA ACCEA PANEL;** David Dockrell (chair), Albert Mifsud, Richard Bellamy, Jon Friedland, Fiona Cooke, Wil Irving, Paul Ashwell, Priya Khanna, Tim Peto, Sarah Rowland-Jones, Katie Jeffery, Mas Chaponda, Shiranee Sriskandan

#### Honorary Secretary's report

The year saw a number of changes to the Council members, following the elections in May (changes to post in italics)

#### Officer Roles elected unopposed;

<i>Vice President</i>	<i>Katie Jeffery</i>
<i>Honorary Secretary</i>	<i>David Partridge</i>
<i>Members Secretary</i>	Mark Melzer
<i>Communications Secretary</i>	<i>Ed Moran</i>

#### Officer Roles elected following election;

<i>Guidelines Secretary</i>	Anna Goodman
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A "Declaration of Interests" process has been initiated for members of Council and key BIA committees to help ensure transparency of the Association's decision-making and BIA also expects speakers at all BIA events to disclose any potential conflicts.

External administrative support and a dedicated Secretariat Services continued to be supplied by Hartley Taylor Medical Communications Ltd (HT). The principal officers reviewed the updated contract and agreed it would continue for 2020 to 2021. Any future contract will be reviewed at the end of 2021, where a formal review of the support service provided by HT will be undertaken by President, Vice President, Honorary Secretary and Treasurer. This will be to ensure BIA are happy with the support provided to date and to approve a renewal of the agreement or consider other options.

Richard Pavey continues to provide Technical Support on all Web Services and Laura Smith of HT continued in the role of BIA Web Editor.

The Honorary Secretary welcomes feedback on any aspect of the activities of the British Infection Association ([secretary@britishinfection.org](mailto:secretary@britishinfection.org)).

#### Governance and Finance

##### Aims:

To ensure the integrity of BIA as a charity is protected through open and transparent financial and organisational management, and compliance with the requirements of the Office of the Scottish Charity Regulator (OSCR). This included updates to the information held by Companies House and OSCR in line with Council Officer changes where new Principal Officers were taking up active principal officer posts from May 2019.

# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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A report on the activity and finances of the Association was presented at the Annual General Meeting in May 2019.

#### Honorary Treasurer's Report

See the financial review on page 22.

#### Membership and Communication

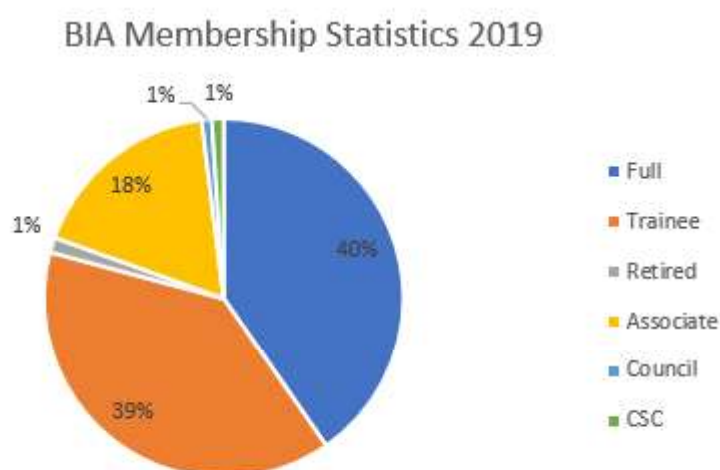
Aims:

To ensure that infection specialists and trainees are aware of the Association; that membership of it is attractive to them, and that it is responsive to their evolving requirements.

Membership Statistics 2018/19:

Category	BIA Members
Full	536
Trainee	516
Retired	18
Associate	233
Council	12
CSC	14
	<b>1329</b>

Membership split:



Membership statistics taken as of 30/09/2019

# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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#### Membership trend

Year	BIA Members
2015	1401
2016	1503
2017	1503
2018	1541
2019	1329

#### Associate Members:

With the support of the associate members' secretary, we successfully ran a parallel session at the BIA Spring conference aimed at associate members (e.g. Infection Control nurses). In future, our aim is to incorporate this session into the main Spring conference programme.

The BIA communications service works with other members of the Council with the following aims:

- promote the activity of the Association to its members and infection trainees,
- publicise material from a wide range of sources that is likely to be important to their work,
- facilitate professional communication between members,
- provide a responsive service to enquiries from the media and promote the views of the Association regarding infection-related topics that arise in the news.

#### Website:

The system running the website was upgraded by the provider, Richard Pavey, in 2019. The structure of the site has been reviewed and feedback provided by members of Council. Where thought beneficial, areas of the site will continue to be updated during 2021. Ongoing content management is delivered by Hartley Taylor, the communications secretary and Richard Pavey. Areas for development will be explored with other members of Council in 2021 and include updating the guidelines page, and sections for those interested in training in infection.

#### Monthly Members Digest:

The monthly members digest continues to develop and is the main tool for sharing information and circulating updates and requests for Guideline feedback, events and job opportunities. Requests for inclusion are triaged by the Honorary Secretary. It contains links to more detail of all content noted and helps encourage more regular visitors to the BIA website.

#### Twitter:

The BIA twitter feed now has 1703 followers. A number of Council members are able to tweet via the Tweetdeck platform using a list of criteria agreed at Council (e.g. infection-related news stories, journal articles of interest, infection-related meetings, BIA events etc.). This has led to an increase in activity with an average of 2-3 tweets a week.

#### Newsletter:

The 2019 Spring Edition of the BIA newsletter, was edited by Naomi Meardon, prepared and published online via the BIA website with a link being sent out to all members.

The autumn edition of the newsletter was made available in line with the FIS 2019 conference at which paper copies were distributed on the BIA exhibition stand. The newsletter was also available on the BIA website with a link sent out to all members.

# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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#### BIA-eList:

The BIA e-mail list system continues to be very active and is clearly appreciated by many members. It does suffer from a number of limitations, such as the inability to review previous posts. The platform on which it runs was upgraded in 2020 to allow a searchable archive and – if thought useful in the future – the addition of special interest groups (e.g. cystic fibrosis, solid organ transplant infection etc). There are around 800 users at present, both BIA members and non-members.

#### Media Enquiries:

There have been a few enquiries from the media over the last year, mostly relating to Lyme disease. The BIA produced a “position statement” over the summer following a flurry of Lyme-related news stories. This was issued on the website and on twitter.

Whilst we aim to re-direct media requests to those members with expertise in the area of interest, it is not always possible to do this within the timeframe demanded by enquirers. After a discussion with the Science Media Centre (SMC, [www.sciencemediacentre.org](http://www.sciencemediacentre.org)) in 2019 the Council agreed to re-direct any request to which BIA cannot respond promptly to the SMC.

#### Standard setting and guideline development

##### Aims:

To support infection practitioners through the development of appropriate guidelines and relevant standards of practice.

##### BIA involvement in Guidelines published in Oct 2018-Sept 2019:

Guidelines Secretary Dr Anna Goodman continued to improve and generate more interest in responses to guideline input requests.

In order for BIA to have capacity to support as many guideline developments as possible, from October 2018 to September 2019 the BIA guidelines team expanded and recruited Daniel Pan, Samuel Mills and Samuel Moses.

As a group this team responded to over 8 NICE consultations, one BHIVA opportunistic infection consultation and one PHE UTI leaflet for feedback during this time.

The BIA was involved in the development of the following guidelines with their status as of September 2019:

- **MRSA prophylaxis** (Joint with BSAC)- presented at HIS 2018. In current preparation - searches and evidence synthesis are complete according to NICE methodology. Expected publication in 2021.  
Contact: Peter Wilson, BIA rep Albert Mifsud
- **MRSA treatment** (joint with BSAC)- presented at BSAC 2019. Guideline out for consultation.  
Published in 2021.  
Contact: Carolyn Horner, BIA rep Anna Goodman.
- **Allergy guideline** - joint with BSACI and BSAC- status in development.  
Contact: Louise Savic, BIA rep Nikhil Premchand.
- **Enteric fever guideline** - joint with PHE - status in development.  
Contact: Gauri Godbole
- **Norovirus updated guidance** - joint with HIS and PHE - status in development. Work being done over email with the working party meeting for the first time in November 2019.  
Contact, Kay Miller, BIA rep Sam Mills

# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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#### Future Plans:

Guidelines which are in evolution/proposed include: Eosinophilia in migrants or returning travellers (Contact: Anna Checkley); Necrotising OE guidance (Contacts: Susanne Hodgson and Monique Andersson. More details and current activity can be found on the Consultations page on BIA Website:

<https://www.britishinfection.org/professional-affairs/consultations/>

#### Clinical services

##### Aims:

To support infection specialists in their daily work, addressing issues of current concern and importance in the delivery of clinical microbiology, infectious diseases and other infection-related clinical specialties, public health and infection control.

##### Progress during 2019:

The **clinical services committee for medical microbiology and virology** meets 4 times a year in London and Birmingham. The aim of the committee is to work together to improve infection services. There are regional representatives who then take back initiatives for consultation and also bring ideas for improving infection services. Teleconferencing facilities are available for those who cannot attend in person.

We try and have representatives from all regions across the United Kingdom, with representatives from Infectious Diseases and Virology as well as Medical Microbiology. We have recently appointed two Virology representatives, Dr Samuel Moses and Dr Judith Timms, and are looking to appoint an Infection Prevention and Control representative and several regional representatives.

This year we welcomed many new members who were a welcome addition.

If you would like further information on what being a representative involves, please contact **Dr Natasha Ratnaraja, Clinical Services Secretary (Microbiology & Virology)**, at [natasha.ratnaraja@uhcw.nhs.uk](mailto:natasha.ratnaraja@uhcw.nhs.uk). Given the proposed NHSi pathology networks, having a national committee such as the clinical services committee, which is part of the BIA, is important in ensuring that all of our members are represented and that we can retain high quality and safe infection services across the United Kingdom.

It is recognised that attendance in person is challenging, due to competing work commitments and shortages of staff in departments. The use of teleconferencing facilities has enabled more members of the committee to attend meetings, although face to face meetings are also encouraged.

Over the past year the committee has continued to develop the BIA/RCPATH Best practice standards document for Infection Services. This document sets out eight practical and flexible standards to recognise the diverse ways in which infection expertise may be required across the NHS. It draws on published evidence and guidance where they exist. This is currently in the consultation phase for endorsement by RCPATH and RCP.

The committee has been working with the PHE SMI (standards for microbiological investigations) group to develop infection quick reference guides (IQRGs). These are intended to be complimentary tools to the SMIs for the management of common infections. It is anticipated that for each infectious condition there would be a flowsheet to guide the clinician in ordering appropriate and timely tests, with signposting to relevant clinical guidance on the subject. They would also cover clinician interpretation of laboratory tests. It is hoped that these will be available on the BIA website and as an app, as well as an integrated part of the NICE-accredited SMI documents.

CSC members were also directly involved in responding to key consultation documents.



# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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#### European Affairs

Highlights from 2019:

At the end of September 2019, the UK was still a full member of the European Union, but we know that soon after, on 31st January 2020, the UK was withdrawn from the EU.

This outcome had long been expected and feared by most clinicians and academics. Throughout 2019, BIA has played its part in efforts to attenuate this damaging process.

BIA has contributed to ongoing European co-operation and integration primarily through the Union Européenne des Médecins Spécialistes (UEMS). UEMS is the representative organisation of the National Associations of Medical Specialists in the European Union and certain associated countries – full members of UEMS being EU, EEA members and Switzerland; there are also some associate and observer members. UEMS sets standards for high quality healthcare practice, that are transmitted to the Authorities and Institutions of the EU and the National Medical Associations stimulating and encouraging them to implement its recommendations.

Foremost among these is the development of pan-European Training Requirements (ETRs) and Assessments of training. The BMA is the UK's official National Medical Association and ongoing full membership of UEMS had been negotiated, irrespective of the outcome of Brexit. UEMS undertakes its work through, inter alia 43 specialist sections that include infectious diseases and medical microbiology. Each country is entitled to nominate two individuals to each specialist section; in the UK one is nominated by the appropriate specialist society, the other by the relevant Royal College. Albert Mifsud and Steve Green are BIA's nominated representatives for medical microbiology and infectious diseases. Both Albert Mifsud and Steve Green attend the biannual UK delegate meetings where ETRs submitted by specialist sections are discussed in detail prior to being submitted for approval by UEMS Council and they have contributed to this scrutiny. The new ETR and Curriculum in Infectious Diseases was ratified by UEMS in October 2018 and is on their website at <https://www.uems.eu/areas-of-expertise/postgraduate-training/european-standards-inmedical-training>.

Your UEMS representatives also attend the respective annual specialist section meetings. ETRs in both medical microbiology and infectious diseases have been developed in recent years and both specialties are now actively developing European exit examinations, both in collaboration with ESCMID based on the ETRs. Albert Mifsud is a member of the core group that has been developing the examination, and a pilot examination was planned for the day before ECCMID 2020 in Paris (the COVID-19 pandemic has forced the postponement of the examination).

In infectious diseases (ID) a European certificate examination is being developed with the aim of providing it yearly as an "extra" for European trainees, although it might be used by some countries as part of their own national assessment process. It will not replace national accreditation systems. Much of the discussion was around candidate eligibility and the realities of developing and delivering such an exam.

A larger question writing panel meeting was being planned for the day after the annual ECCMID Conference in Paris in April 2020, to enable delivery of a pilot examination planned for ECCMID 2021 in Vienna. Nick Beeching, the JRCPTB representative to the ID section has also been active in the development of that examination.

In December 2018, Albert Mifsud was elected as Honorary Secretary to CESMA in his personal capacity, nominated by BMA. CESMA is the Council for European Specialists Medical Assessments, the UEMS body that works towards the harmonisation of assessments across Europe and appraising such examinations, with the long-term aim of replacing national assessments where possible and appropriate.

# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

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The Association has become affiliated with ESCMID. This engagement with ESCMID will provide our members with direct access to ESCMID's activities that should be of interest to seniors and trainees alike. Affiliation would also provide other benefits such as enabling the Association to propose sessions at ECCMID and to propose postgraduate educational events (which are usually supported financially by ESCMID). See: [https://www.escmid.org/membership\\_organization/partners/affiliated\\_societies/](https://www.escmid.org/membership_organization/partners/affiliated_societies/)

#### Education and meetings

##### Aims:

To organise and promote scientific meetings on behalf of the Association (alone, or in collaboration with other scientific bodies) to disseminate knowledge in infection disciplines

To provide a forum for the presentation of clinical and basic science research by clinical academics, including those in training

To award prizes for outstanding presentations, encouraging the production of high-quality material.

##### Highlights from 2019:

##### BIA Spring Meeting

BIA's Annual Spring Scientific meeting was held at the Congress Centre in London at the on 23rd May 2019, incorporating the BIA AGM. Another interesting programme designed by Dr Hiten Thaker was delivered. The meeting was attended by 160 delegates, some of whom also attended the Trainee day held on the previous day. The keynote speakers were Professor Shiranee Shriskandan, who spoke on Streptococcal Sepsis, Dr Nicholas Price who spoke on Endovascular Infections and Professor Sarah Walker who spoke on Non-Inferiority trials in Infection Research. There were 24 poster presentations and 18 Oral presentations delivered by both UK and International researchers.

##### BIA Spring Meeting- Associate Breakout Session

A programme on Gram Negative Bloodstream Infections- put together by Dr Mark Melzer (Membership secretary) & Louise Dunsmure (Associate Member Secretary) was delivered to a sub group of the Scientific Meeting attendees. The meeting was very well received and now a regular item on the Spring meeting agenda. Presentations were delivered by a number of speakers including Dr Katie Jeffery from Oxford and Dr Susan Hopkins Deputy Director of National Infection Service on reducing Gram negative Infections and the Current management of Urinary Tract Infections in the Elderly.

##### Junior Doctors Supper Meeting evening of 23rd May 2019

Held as a follow-on evening after the Spring Trainee day, the programme designed and organised by Dr Farnaz Dave. This was the second Supper meeting and though not as well attended as the first meeting still engaged active participation and interaction with the presenters from those attending.

##### Trainee Meetings November 2018 and May 2019

These excellent meetings were organised by Dr Farnaz Dave with speakers from all over the UK and had excellent feedback. There are further details within the Trainee Meetings section of this report.

##### BIA 2<sup>nd</sup> Infection Dilemmas Meeting January 2019

This took place at Manchester Conference Centre on the 24<sup>th</sup> January 2019, held the day before and complimenting the well-established HIV Dilemmas Meeting series. It was chaired by Dr Anne Tunbridge. This meeting was attended by 93 delegates and the feedback was excellent. There were several excellent interactive lectures delivered by leading figures from the around the UK including Dr Patrick Lillie (Hull & East Yorkshire), Dr Andrew Brent (Oxford) Dr Bridget Atkins (Oxford), Dr Erica Peters ( Glasgow ) , Dr Penny Lethwaite ( Leeds) and Dr Nick Beeching ( Liverpool) all contributing to the successful delivery of this event.

# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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FIS 2018 13-15th November 2018

BIA was the principal Conference organiser and host of this premier event which was held at the Sage Centre in Gateshead/Newcastle. This was the first time the event was held in the North East. The programme was varied and the development of this was supported by all the associated Infection societies. Hartley Taylor were the PCO and provided excellent logistic and financial management of the event. There were plenary sessions and symposia on HIV Medicine, Travel related infections, Vaccinations, Mycology, Bone and joint Infections, Antimicrobial Therapy, Clostridia infections and Outbreak control, Resistance surveillance and Zoonosis to name a few.

Professor Tom Rodgers delivered the JD Williams lecturer presenting “Fungi and Human Health: The Good, The Bad and The Unknown”.

The Barnet Christie lecture was presented by Dr Bernadette Young who delivered her winning presentation **on Passengers and Pathogens: How bacterial Genomes help us understand Staphylococcal Infections.**

#### Forthcoming conferences

We have now entered unprecedented times due to the COVID-19 Global pandemic. We were fortunate that we were able to host The Infection Dilemmas meeting in January 2020. However, following the National restrictions being placed due to the pandemic, we had to cancel/postpone the BIA 2020 Spring meeting to 2021. The preparations were well underway when this decision was made in March 2020. The AGM took place during September 2020. In view of the costs and to increase the mobility of the Spring Meeting we are planning to have a future Spring meeting in Manchester.

The Primary Sponsoring societies for FIS 2020 and onwards will be BIA, HIS and Microbiology Society. These meetings will from now on incorporate the biennial HIS meetings. BIA will once again host FIS in 2021.

#### Final Word

The world now has become a different place with restrictions on people movement, travel and gatherings. The BIA is looking at new and innovative ways of delivering future educational events and conferences. We hope to embrace the “new normal” of virtual meetings and teaching webinars in the future.

<i><b>BIA Delegates Year on Year</b></i>	<i><b>Spring Meeting</b></i>	<i><b>Trainees Meeting</b></i>
<i><b>2019</b></i>	<i><b>160</b></i>	<i><b>152</b></i>
<i><b>2018</b></i>	<i><b>215</b></i>	<i><b>175</b></i>
<i><b>2017</b></i>	<i><b>202</b></i>	<i><b>236</b></i>
<i><b>2016</b></i>	<i><b>210</b></i>	<i><b>191</b></i>
<i><b>2015</b></i>	<i><b>193</b></i>	<i><b>178</b></i>

#### Manpower and training

Aims:

To monitor and advise on workforce issues at trainee and consultant level.

To support BIA training and teaching events and opportunities for trainees in all the infection specialities.

To provide leadership for the BIA Education Subcommittee.

# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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#### Highlights from 2019:

This year saw further work from the BIA Education Subcommittee (ESC) fulfilling some of the aims (strengthening teaching and training opportunities for trainees in all the infection specialties nationally). Work by ESC in 2019 includes:

- 1) Launching of the 'Learn Infection' on line teaching tool on a new platform in free resources for BIA members.
- 2) Continuing links and support for the National Infection Trainee Collaborative for Audit and Research (NITCAR) including at the Federation of Infection Societies Meeting.
- 3) Provision of professional support and advice for the BIA trainee meeting representative.
- 4) Advice to council about educational issues.

#### BIA Education Sub-Committee (ESC)

##### Members:

- Bridget Atkins (Chair)
- Vice President of BIA - Prof Martin Llewelyn (Brighton & Sussex)
- Learn Infection lead - Dr Bethany Davies (Brighton & Sussex)
- BIA trainee council reps
  - Farnaz Dave (Manchester)
  - Naomi Meardon (Sheffield)
- NITCAR representative - Jordan Skittrall (Cambridge)
- BIA Junior Doctor representative - Naeem Desai (Blackburn)

If trainees wish to raise issues or suggestions via this committee please do via the [BIA trainee representatives](#)

#### Science & Research

##### Highlights from 2019:

Science and research are a major focus for the BIA. To keep up with the changing environment of infection training and academia, this year the BIA began a process of revising and refocusing its research strategy. This started with formation of the BIA Research Strategy Working group, which met for the first time in August 2019 and from which a new research strategy document has been developed. With this process ongoing, we have limited the types and number of grants on offer but remained fully committed to research activity via these and BIA-supported meetings.

The Spring Meeting was held in May 2019 and awards totaling £1,800 were made for the best scientific free paper, the best clinical case, and best poster presentation.

##### Prize winners

Free Paper - 1st Prize	Gabriele Pollara
Free Paper - 2nd Prize	Naomi Walker
BIA Clinical Lesson prize	Fay Dickson and Phillipa Burns
BIA Poster Prize winner	Simon Stoneham

As ever, the BIA contributed strongly to the Federation of Infection Societies Meeting 2018 in Newcastle, playing a key role in selection of abstracts and oral presentations. The prestigious Barnett Christie Lecture, which recognizes future clinical academic leaders with an outstanding early track record in research, was awarded to Dr Bernadette Young who delivered her winning presentation on **Passengers and Pathogens: How bacterial Genomes help us understand Staphylococcal Infections.**

# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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The Association made a total of £54,450 worth of grant awards in 2019.

Sixteen applications were received for Research Project Grants for £20,000. The successful applicants were

- Rohma Ghani (Imperial College London): "Mechanisms of efficacy of Faecal Microbiota Transplantation for the intestinal decolonisation of multidrug-resistant organisms"
- Nyarie Sithole (University of Cambridge): "Regulation of HIV replication by virion-associated RNA helicases"

Seven travel awards were made out of 32 applications and the Clinical Exchange award for £5,000 was awarded to Helen Groves (Queen's University Belfast) to support a clinical fellowship in infectious diseases at the Hospital for Sick Children, Toronto.

The 2018-19 Scientific Assessment Committee members and Grant Selection Panel are: Martin Llewellyn, Tristan Clark, Chris Chiu, Tihana Bicanic and Tom Evans, without whom the work of review and selection would not be possible. The selection process always includes a Principal Officer as part of the agreed standards.

#### **Trainees Report**

Meeting Highlights from 2018 - 2019:

The Trainees had two very successful meetings, facilitated by the Trainee Reps, and introduced an evening meeting for juniors.

Autumn Trainee Meeting, 11th October 2018 - University of Manchester, Manchester

Topics for the trainees' day included 'CPE management', 'TB/HIV co-infection' and 'MERS-CoV: UK impact'. 43 trainees attended.

This was a change of venue for the meeting - it was selected as it is accessible and cost effective, and the meeting turned out to be very successful.

Spring Trainee Meeting, 22nd May 2019 - Congress Centre, London.

The meeting was well attended and included our first collaboration with NITCAR. Topics at the trainees' day included 'investigating and managing bone and joint infections', 'designing infection studies and choosing statistical tests' and 'investigating and managing endovascular infections'. 152 trainees attended the day time programme, and 45 attended the evening meeting for juniors.

Autumn Trainee Meeting, 17th October 2019 - University of Manchester, Manchester

Topics for the trainees' day include 'hepatitis C for infection trainees', 'diagnostic imaging in infections' and 'immunisation in adults'. There will also be an evening meeting for juniors. This venue was selected again as it is accessible and cost effective. We now plan to rotate the location of the autumn meeting in future as the Spring meeting will also be held in Manchester, this will give trainees in different regions more opportunities to attend the trainee's days.

Professional Affairs 2018/2019:

Dr Sara Boyd (Professional Affairs)

The majority of the focus for the professional affairs trainee rep was in attending JRCPTB SAC meetings for Infection training and disseminating feedback to trainees nationally. Much of the focus of these meetings has been around developing the new ID, MM and MV curricula with consideration for Shape of Training. By way of update the CIT SAC has appointed a focus group to develop these curricula, which were submitted during 2020. The CIT SAC was able to agree broadly on the specialty specific CiPS (capabilities in practice). These are essentially headline/core competencies that need to be evidenced and signed off through training and these will be finalised and submitted to the relevant committees for approval in due course. The committee has also made a formal agreement that for any time OOPR, a maximum of 3 months will be counted towards time in training, based upon the generic transferrable skills attained during a period of research. It is acknowledged that some

# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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trainees may be involved in additional clinical duties whilst in research and that up to a total of 6 months could be counted in these cases. This information and other training issues including regarding e-portfolio, courses and exams were disseminated to trainees and feedback or queries relayed to the committee by the BIA professional affairs rep throughout the year.

#### **BIS Representation to outside meetings**

Aims:

To support BIA have representation at various meetings and gatherings throughout the year. Representation is usually as a result of invitation and nominations; the meetings can include though are not limited to, Guidelines and Standard Settings, also workshops and investigations.

BIA Representation during 2019:

A number of BIA members represented the interests of BIA Members on the invitation of the Council to various meetings and events – some are noted below with reports on the attendance and any documented outcomes as agreed.

- RCP Health Informatics Unit  
Dr Ewan Hunter – on-going
- Pathology Alliance  
Dr Albert Mifsud – Katie Jeffery from May 2019
- RCP London Workforce Meetings  
Dr Bridget Atkins– on-going
- Royal College of Pathologists Medical Microbiology SAC  
Natasha Ratnaraja– on-going
- Joint Specialty Royal Colleges SAC  
Prof Martin Wiselka / Dr Albert Mifsud / Dr Sara Boyd
- UEMS Medical Microbiology section  
Dr Albert Mifsud – on-going
- UEMS Infectious Diseases section  
Professor Steve Green – on-going
- Chair of ACCEA BIA committee  
Prof David Dockrell – on-going
- British Thoracic Society MDRTB steering group as the BIA representative  
Dr Martin Dediccoat
- BTS Joint Tuberculosis Committee Meeting  
Prof Martin Wiselka

#### **Journal of Infection editor's report**

Editors Summary 2019:

- In 2019 the Journal of Infection (JOI) received 1,561 submissions – a 13.6% increase on the previous year's total of 1,374.
- The Journal published 18 Gold Open Access articles in 2019, compared to 22 such papers in the previous year. OA publication continues to be a significant issue amongst some funders, with both PlanS in Europe and OSTP in the USA looking to encourage greater publication of Gold OA articles and challenge the traditional subscription publishing model. These developments could affect around 15% of papers published in the Journal so it is obviously a significant threat which is being kept under close scrutiny.

# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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- The average rejection rate was fairly steady at 87% (83% being desk rejects and 4% peer review process rejects).
- The time taken to reach a first decision on a manuscript was 1 week for desk rejected articles and 11.6 weeks for papers that were fully peer reviewed (compared to 0.8 weeks and 12.5 weeks, respectively, in 2018).
- The average time from submission of an article to it appearing online in its final form in 2019 was 26.9 weeks (was 30.9 weeks in 2018). The increase in speed is due to a slight improvement in peer review turnaround times as well as faster processing at Elsevier.
- The key concern for authors is the time taken from acceptance to appearance in corrected form online. The median time required to go from an accepted manuscript to a corrected proof is currently around 8-10 days.
- The Journal's latest impact factor decreased slightly to 4.842, dropping slightly from the 2018 high of 5.099. JOI is now ranked 12/93 in the Infectious Diseases category of the Journal Citation Reports (in the 2018 figures, the IF was 5.099 and the ranking 9/89).
- The journal's CiteScore for 2019 is 8.0, placing the journal 21/283 in the Infectious Diseases category (CiteScore is the citation metric which is derived from Elsevier's Scopus database). According to the Scopus database, over 85% of JOI articles receive at least 1 citation with a Source Normalised Impact per Paper of 1.587.
- Over 420,000 papers were downloaded in 2019 (across all platforms), an average of over 35,000 per month, which is comparable with the download figures from previous years.

We have had a truly excellent year with the Journal receiving over 1500 submissions and publishing 253 papers in the current 2-year impact cycle. Again, most of the papers are original scientific papers from all over the world with the majority coming from western Europe.

Our impact factor was announced in July 2019 to be 5.1 which is the highest it has ever been, and the journal was ranked 9th amongst global infectious disease Journals, being placed higher even than some of its major competitors, such as Journal of Infectious Disease.

The editor's thanks go to all assistant and associate editors, as well as our Editorial Assistant, Emma Cousins.

*A full report has been made available to members on request to [BIA@hartleytaylor.co.uk](mailto:BIA@hartleytaylor.co.uk):*

### **Clinical Infection in Practice (CLIP) Editor's Report**

Editors Summary 2018/2019:

Achievements:

- New Journal set up from concept to First Edition in 9 months
- First Edition published on-line in September 2019. Fully open access to all
- BIA notification to all Members. Newsletter article
- Journal and Editorial Board supported by Elsevier
- Received papers from worldwide submissions and all aspects of Infection practice
- First 25 published papers funded by BIA
- Article transfer has been arranged with the Journal of Infection with potentially suitable papers being cascaded to CLIP



# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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- 3 Further Editions planned for 2019

#### Aims and Scope:

The Journal will provide a forum for the advancement of knowledge and discussion of clinical infection in practice. It will embrace relevant clinical research and clinical management issues, including case reports and case series demonstrating novel or interesting findings. This will be of particular value in a field where clinicians are often faced with relatively rare conditions or clinical problems where the only supportive literature is at case report level.

It is aimed at all specialists and trainees working in clinical infection-related disciplines including Clinical Microbiologists/Virologists, Infectious Diseases and Tropical Disease physicians, Public Health Specialists and supporting professional staff. The Journal will publish high-quality peer-reviewed clinically relevant research and case-based reports. Its aims are as follows:

- To publish high quality clinical research, of direct relevance to practising infection specialists, with an international scope.
- To publish state of the art reviews of areas of current clinical and research interest.
- To publish novel case reports of high educational value with relevant learning points.
- To publish educational and relevant clinical audit and quality improvement projects.
- To facilitate clinical decision making by publishing clinic-pathological conferences, illustrative case histories (with questions and learning points), and clinical images of high educational value and relevance.
- To facilitate problem-based learning and help trainees prepare for professional examinations including FRCPPath (CICE) and international equivalent assessments.
- Indexing via PubMed Central will be applied for once 25 articles have been published in the journal.

#### Submissions to September 2019:

- 27 papers received.
- 19 have been fully reviewed 10 (53%) accepted, 9 rejected
- 8 undergoing review

Main subject of paper	Number of submissions
Malaria/Tropical Medicine	7
Clinical Virology	2
Clinical Microbiology	2
Fungal infections	2
Clinical ID	7
HIV	2
OPAT	2
Paediatric ID	1
Epidemiology/Public Health	2
<b>TOTAL</b>	<b>27</b>



# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

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Origin of paper	Number of submissions
UK	15
Europe	4
Asia	6
N America	0
S. America	1
Africa	1
Australasia	0
<b>TOTAL</b>	<b>27</b>

Website

<https://www.journals.elsevier.com/clinical-infection-in-practice>

*A full report has been made available to members on request to [BIA@hartleytaylor.co.uk](mailto:BIA@hartleytaylor.co.uk):*

#### **Abbreviations used within this review:**

ACCEA Advisory Committee on Clinical Excellence Awards  
BIA British Infection Association  
BSAC British Society for Antimicrobial Chemotherapy  
CCT Certificate of Completion of Training  
FIS Federation of Infection Societies  
GMC General Medical Council  
HIS Healthcare Infection Society  
OSCR Office of the Scottish Charity Regulator  
PHE Public Health England  
IPS Infection Prevention Society  
JRCPTB Joint Royal Colleges of Physicians Training Board  
MRC Medical Research Council  
MRCP (UK) Membership of the Royal College of Physicians (UK)  
NHSI National Health Service Improvement  
NICE National Institute for Clinical Excellence  
RCPPath Royal College of Pathologists  
RCP Royal College of Physicians  
SAC Specialty Advisory Committee  
SMI Standards for Microbiology Investigations  
UEMS European Union of Medical Specialists  
UKAS United Kingdom Accreditation Service  
UK NSC UK National Screening Committee

#### **Contact details**

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# BRITISH INFECTION ASSOCIATION

## TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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Council members contact details:

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Newsletter Editor, Dr Naomi Meardon, [newsletter@britishinfection.org](mailto:newsletter@britishinfection.org)

#### Financial review

The group's income has increased from £306,990 in 2018 to £587,817 in 2019. This comprises investment income of £47,213 (2018: £41,158), income from charitable activities of £288,296 (2018: £265,832) and £252,308 (2018: £nil) from other trading activities which relates to running the FIS 2018 event. The event is run by the group every four years which explains why there is no comparable income. The income from charitable activities includes subscription income of £52,010 (2018: £51,203), royalty income from the Journal of Infection of £232,886 (2018: £214,629) and delegate income of £3,400 (2018: £nil).

Supplying members' Journal copies cost £31,599 (2018: £29,239) in the year. Grants for the year net off to a refund of £3,790 (2018: expense of £143,634), which is represented by grants awarded in the year amounting to £54,450 (2018: £145,134) and grants written off as a result of amounts being unclaimed totalling £58,240 (2018: £1,500). Grants payable are accounted for when either the recipient has a reasonable expectation that they will receive a grant and the Trustees have agreed to pay the grant without condition, or the recipient has a reasonable expectation they will receive a grant and any condition attaching to the grant is outside the control of the charity. The reduction in grants available in 2019 was decided upon by Council when it was clear the costs of running the Association had risen considerably and with uncertainties regarding future income relating to changes in the publishing market for journals. In order to maintain the BIA cash flow, the decision was made to reduce expenditure temporally on grants, in the hope that income from the journal would increase in future years. Consideration will be made in future years to set aside income from investments, creating a sustainable and identified sum of money from which to award the scientific grants.

Expenditure for the group has increased from £375,787 in 2018 to £530,807 in 2019. This includes £5,781 (2018: £5,665) of expenditure on raising funds i.e. investment manager's costs plus £242,611 (2018: £369,172) of expenditure on charitable activities. A breakdown of the expenditure on charitable activities can be seen in note 6. Costs from running the FIS 2018 event amounted to £282,415 (2018: £nil)

# **BRITISH INFECTION ASSOCIATION**

## **TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)**

### **FOR THE YEAR ENDED 30 SEPTEMBER 2019**

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The total income and expenditure detailed above has resulted in net incoming resources for the year of £57,010 (2018: net outgoing resources of £67,847).

Net gains on investment assets for the year amount to £45,452 (2018: £72,238).

Overall, the group's net income for the year amounted to £102,462 (2018: 4,391). The Association continues to operate in a net income position of £104,593 (2018: £6,813) but the subsidiary had a net deficit for the year of £35,137 (2018: £2,422). This equates to a total deficit carried forward of £37,559 (2018: £2,422) for the subsidiary, but the Association will continue to provide financial support to the subsidiary and cover any of its future losses.

Investments held by the group have increased from £1,814,444 in 2018 to £1,894,766 in 2019 which relates to a portfolio managed by Rathbone Investment Management. The group made an unrealised gain of £46,393 in the year (2018: £83,047). This is the result of changes in stock market conditions in the year.

Creditors at 30 September 2019 have decreased by £78,461 to £311,409. This decrease is mainly attributable to the value of grants awarded but not yet paid of £232,211 (2018: £331,772), which includes write offs totalling £58,240 (2018: £1,500) discussed above. The outstanding grants can be broken down into the following year of award - 2019: £46,350, 2018: £104,529 and 2017: £81,332.

The reserves of the group at 30 September 2019 amounted to £1,853,696 (2018: £1,751,234).

The Association does not exist to build up reserves, however, the Trustees have given consideration to a reserves policy as required by the Statement of Recommended Practice in order to demonstrate that it acts prudently to ensure the adequacy of resources available to it. The Trustees consider that the level of reserves should be adequate to support its activities over the next five years which is estimated to be around £1.8m. The group currently has reserves of £1.9m however future grants may be reduced if income falls. It is the intention to continue to generate income in excess of resources expended.

Under the memorandum and articles of association, the Association has the power to make any investment which the Trustees see fit.

#### **Going Concern**

At the year end the group had net current liabilities of £41,070 (2018: £63,210) due to the value of grants payable at the balance sheet date. The group holds listed fixed asset investments of £1,894,766 (2018: £1,814,444) which are held for investment purposes but can be realised to meet liabilities as they fall due. At the time of approving the financial statements, the Trustees have a reasonable expectation that the group has adequate resources to continue in operational existence for the foreseeable future. Thus the Trustees continue to adopt the going concern basis of accounting in preparing the financial statements. COVID-19 has not had an impact on income derived from journal publication and membership fees, and although these may fluctuate it is not foreseen that there will be significant future shifts in this income due to the pandemic. The value of investments was £2,063,567 as of 23 March 2021, compared to £1,894,766 at 30 September 2019, showing there has been a recovery in valuations towards pre-pandemic levels post year end.

#### **Investment Policy and Performance**

The investment policy of the group is to not invest in companies which contravene our charitable purpose. The investment manager's own policies regarding environmental, social and governance issues are also relevant. The current investment objective is to:

(a) meet budgeted investment income targets as approved on an annual basis by the Board of Trustees, and

# **BRITISH INFECTION ASSOCIATION**

## **TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)**

### **FOR THE YEAR ENDED 30 SEPTEMBER 2019**

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(b) to achieve an increase in the value of the income and investment portfolio in real terms over time, while maintaining prudent diversification of assets.

The results for the year show an unrealised gain of £46,394 (2018: £83,047) and a realised loss on sale of investments of £942 (2018: £10,809). These could be compared to any targets set and any plans with the investment manager to improve future performance.

The BIA's investment strategy has a medium risk tolerance and aims to generate a return over the long term of 3% above the rate of inflation. It is expected to experience fluctuations of 60 – 80% of the volatility of the global equity markets. This has taken place following discussion with investment managers and has a 6 - 10-year time horizon, recognising that there may be some temporary or permanent capital loss.

This performance criteria was brought about because of the volatility within the scientific journal publication market, which is moving towards an open access model. It is unclear at this time whether profits from such activities will equal those of the current model.

#### **Risk management**

The Trustees have assessed the major risks to which the group is exposed and systems have been established to mitigate these risks. The Trustees review the risks facing the group on a regular basis and have assessed the following key risk areas:

- **Financial Risk:** There is a reliance on income from the journal of infection and membership fees. Although income from these streams has remained consistent over the years, there is a risk that publishing revenues or memberships could decline in the future. This can be mitigated by the sale of investments if additional funding was necessary.
- **Reputational Risk:** This is mitigated by the governance framework by ensuring clear policies and standards are in place that are regularly reviewed, and the appointment of experienced persons to the Board of Trustees.
- **Investments Risk:** The Association's assets are largely held in stock exchange investments, the values of which are subject to fluctuations experienced from time to time in the financial markets. This risk is mitigated by engaging a professional fund manager to manage the portfolio. The fund manager has been instructed to adopt a medium risk approach and the portfolio is widely diversified.
- **COVID-19:** The Trustees have considered the impact of the COVID-19 pandemic on the investments and although there is a risk that further losses may be made, they are confident that the diversification within the portfolio will balance the losses going forward. The Trustees believe there is limited risk from the pandemic to day to day operations with the exception being the cancellation of large-scale events. However, loss of income from cancelled events can be mitigated through insurance policies and by presenting events remotely.

#### **Disclosure of information to auditor**

Each of the Trustees has confirmed that there is no information of which they are aware which is relevant to the audit, but of which the auditor is unaware. They have further confirmed that they have taken appropriate steps to identify such relevant information and to establish that the auditor is aware of such information.

This report has been prepared in accordance with the special provision of Part 15 of the Companies Act 2006 relating to small companies.

# **BRITISH INFECTION ASSOCIATION**

## **TRUSTEES' REPORT (CONTINUED)(INCLUDING DIRECTORS' REPORT)**

**FOR THE YEAR ENDED 30 SEPTEMBER 2019**

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The Trustees' report was approved by the Board of Trustees.



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Dr Michael Kelsey (Treasurer)

Trustee

Dated: 29 March 2021

# **BRITISH INFECTION ASSOCIATION**

## **STATEMENT OF TRUSTEES' RESPONSIBILITIES**

### **FOR THE YEAR ENDED 30 SEPTEMBER 2019**

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The directors (who are also the trustees of the charitable company (British Infection Association)) are responsible for preparing the Directors' report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the directors 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 the group and of the incoming resources and application of resources, including the income and expenditure, of the BIA group for that period.

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

- select suitable accounting policies and apply them consistently;
- observe the methods and principles in the Charities Statement of Recommended Practice ("SORP");
- make judgements and estimates that are reasonable and prudent;
- state whether applicable 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 business.

The directors 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 accounts comply with the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 (as amended). They are also responsible for safeguarding the assets of the charitable company and the group and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

# INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF BRITISH INFECTION ASSOCIATION

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## Opinion on financial statements

We have audited the financial statements of British Infection Association (the 'parent charitable company') and its subsidiaries (the 'group') for the year ended 30 September 2019 which comprise the Group and Parent Charitable Company Statement of Financial Activities, the Group and Parent Charitable Company Balance Sheet, the Group and Parent Charitable Company Cash Flow Statements and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 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 group's and the parent charitable company's affairs as at 30 September 2019 and of the group's and parent charitable company's incoming resources and application of resources, including their 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, the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006 (as amended).

## Basis for opinion

We have been appointed auditor under section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report to you in accordance with regulations made under those Acts.

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 group and parent charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

## Conclusions relating to going concern

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

- the trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the group's or parent 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 other information comprises the information included in the annual report other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information. 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.

# INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF BRITISH INFECTION ASSOCIATION (CONTINUED)

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## Opinion 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 directors' report prepared for the purposes of company law and included within the trustees' report, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the directors' report, included within 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 group and the parent 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 where the Companies Act 2006 and the Charities Accounts (Scotland) Regulations 2006 (as amended) require us to report to you if, in our opinion:

- adequate accounting records have not been kept by the parent charitable company, or returns adequate for our audit have not been received from branches not visited by us; or
- The parent charitable company 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.

## Responsibilities of Trustees

As explained more fully in the statement of trustees' responsibilities set out on page 26, the trustees (who are also the directors of the parent charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the group's and parent 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 group or the parent 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.

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

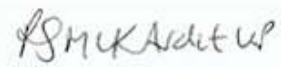
## Use of our report

This report is made exclusively to the members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006, and to the parent charitable company's trustees, as a body, in accordance with section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and regulation 10 of the Charities Accounts (Scotland) Regulations 2006 (as amended). Our audit work has been undertaken so that we might state to the members and the parent charitable company's trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the parent charitable company, its members as a body, and its trustees as a body, for our audit work, for this report, or for the opinions we have formed.



## INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF BRITISH INFECTION ASSOCIATION (CONTINUED)

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Kelly Adams MA (Hons) CA (Senior Statutory Auditor)  
For and on behalf of RSM Audit LLP, Statutory Auditor  
Chartered Accountants  
First Floor, Quay 2  
139 Fountainbridge  
Edinburgh  
EH3 9QG

29 March 2021

RSM UK Audit LLP is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006.

# BRITISH INFECTION ASSOCIATION

## CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 30 SEPTEMBER 2019

	Notes	2019 £	2018 £
<b><u>Income from:</u></b>			
Charitable activities	2	288,296	265,832
Other trading activities	3	252,308	-
Investments	4	47,213	41,158
<b>Total income</b>		<u>587,817</u>	<u>306,990</u>
<b><u>Expenditure on:</u></b>			
Raising funds	5	5,781	5,665
Charitable activities	6	242,611	369,172
FIS 2018		282,415	-
<b>Total resources expended</b>		<u>530,807</u>	<u>374,837</u>
 Net gains on investments	 11	 <u>45,452</u>	 <u>72,238</u>
<b>Net income for the year/ Net movement in funds</b>		<b>102,462</b>	<b>4,391</b>
 Total funds brought forward		 <u>1,751,234</u>	 <u>1,746,843</u>
<b>Total funds carried forward</b>		<b><u>1,853,696</u></b>	<b><u>1,751,234</u></b>

The statement of financial activities includes all gains and losses recognised in the year.

All income and expenditure derive from continuing activities and relates to unrestricted income funds.



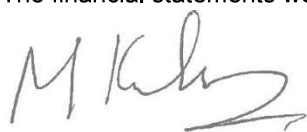
**BRITISH INFECTION ASSOCIATION**

**CHARITY BALANCE SHEET**

**FOR THE YEAR ENDED 30 SEPTEMBER 2019**

	Notes	2019 £	£	2018 £	£
<b>Fixed assets</b>					
Investments	12		1,894,767		1,814,445
<b>Current assets</b>					
Debtors	14	2,213		2,956	
Cash at bank and in hand		268,126		325,585	
		270,339		328,541	
<b>Creditors: amounts falling due within one year</b>	15	(306,857)		(389,330)	
Net current liabilities			(36,518)		(60,789)
<b>Total assets less current liabilities</b>			1,858,249		1,753,656
<b>Income funds</b>					
<u>Unrestricted funds</u>					
Designated funds	17	1,650		3,150	
General unrestricted funds		1,856,599		1,750,506	
			1,858,249		1,753,656
			1,858,249		1,753,656

The financial statements were approved by the Trustees and authorised for issue on 29 March 2021.



Dr Michael Kelsey  
Trustee

# BRITISH INFECTION ASSOCIATION

## CHARITY STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 30 SEPTEMBER 2019

	Notes	2019 £	2018 £
<b><u>Income from:</u></b>			
Charitable activities	2	288,296	265,832
Investments	4	47,213	41,158
<b>Total income</b>		<u>335,509</u>	<u>306,990</u>
<b><u>Expenditure on:</u></b>			
Raising funds	5	5,781	5,665
Charitable activities	6	270,587	366,750
<b>Total resources expended</b>		<u>276,368</u>	<u>372,415</u>
 Net gains on investments	 11	 <u>45,452</u>	 <u>72,238</u>
<b>Net income for the year/ Net movement in funds</b>		104,593	6,813
 Total funds brought forward		<u>1,753,656</u>	<u>1,746,843</u>
<b>Total funds carried forward</b>		<u>1,858,249</u>	<u>1,753,656</u>

The statement of financial activities includes all gains and losses recognised in the year.

All income and expenditure derive from continuing activities and relates to unrestricted income funds.

# BRITISH INFECTION ASSOCIATION

## CONSOLIDATED AND CHARITY STATEMENTS OF CASH FLOW

FOR THE YEAR ENDED 30 SEPTEMBER 2019

	Notes	Group 2019 £	Group 2018 £	Charity 2019 £	Charity 2018 £
<b>Cash flows from operating activities</b>					
Cash absorbed by operations	19	(69,802)	(44,028)	(69,802)	(44,028)
<b>Investing activities</b>					
Purchase of investments		(102,249)	(127,588)	(102,249)	(127,588)
Proceeds on disposal of investments		67,379	60,614	67,379	60,614
Interest received		47,213	41,158	47,213	41,158
<b>Net cash generated from/(used in) investing activities</b>		12,343	(25,816)	12,343	(25,816)
<b>Net cash used in financing activities</b>		-	-	-	-
<b>Net decrease in cash and cash equivalents</b>		(57,459)	(69,844)	(57,459)	(69,844)
Cash and cash equivalents at beginning of year		325,585	395,429	325,585	395,429
<b>Cash and cash equivalents at end of year</b>		268,126	325,585	268,126	325,585

# BRITISH INFECTION ASSOCIATION

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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#### 1 Accounting policies – Group and Charity

##### Charity information

British Infection Association is a private company limited by guarantee incorporated in Scotland (SC198418). The registered office is 54-66 Frederick Street, Edinburgh, EH2 1LS. A description of the charity's activities is included in the Trustees' Report. The liability of each member of the charity in the event of winding-up is limited to £1.

British Infection Association has one wholly owned subsidiary undertaking, BIA Conferences Limited, the results of which are consolidated with those of the charity. BIA Conferences' principal activity is the running of conferences relating to infectious diseases and microbiology on behalf of the charity.

##### Accounting convention

The financial statements have been prepared in accordance with the charity's Memorandum and Articles of Association, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 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 UK and Republic of Ireland (FRS 102)" (as amended for accounting periods commencing from 1 January 2016). The charity is a Public Benefit Entity as defined by FRS 102.

The financial statements are prepared in sterling, which is the functional currency of the charity. Monetary amounts in these financial statements are rounded to the nearest £.

The financial statements have been prepared under the historical cost convention with the exception of investments which are included on a fair value basis. The principal accounting policies adopted are set out below.

##### Basis of Consolidation

The charity holds 100% of the issued share capital of BIA Conferences Limited. The results include those of British Infection Association, and those of BIA Conferences Limited, the wholly owned subsidiary of the charity. Uniform accounting policies are adopted throughout the group and intra-group transactions or balances are eliminated on consolidation.

##### Going concern

At the year end the group had net current liabilities of £41,070 (2018: £63,210) due to the value of grants payable at the balance sheet date. The group holds listed fixed asset investments of £1,894,766 (2018: £1,814,444) which are held for investment purposes but can be realised to meet liabilities as they fall due. At the time of approving the financial statements, the Trustees have a reasonable expectation that the group has adequate resources to continue in operational existence for the foreseeable future. Thus the Trustees continue to adopt the going concern basis of accounting in preparing the financial statements. COVID-19 has not had an impact on income derived from journal publication and membership fees, and although these may fluctuate it is not foreseen that there will be significant future shifts in this income due to the pandemic. The value of investments was £2,063,567 as of 23 March 2021, compared to £1,894,766 at 30 September 2019, showing there has been a recovery in valuations towards pre-pandemic levels post year end.

##### Charitable funds

Funds are classified as either restricted or unrestricted funds, defined as follows:

Restricted funds are funds subject to specific purposes which may be declared by the donor or with their authority (e.g. by the restrictive wording of an appeal). A transfer from unrestricted to restricted funds will be made to prevent any restricted fund deficit.

Unrestricted funds are expendable at the discretion of the Trustees in furtherance of the general objectives of the Association. Designated funds represent those unrestricted funds set aside by the Trustees for particular purposes.

# BRITISH INFECTION ASSOCIATION

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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#### 1 Accounting policies – Group and Charity (Continued)

##### **Incoming resources**

Donations are recognised in the period in which they are receivable, which is when the charity becomes entitled to the resource, it is probable that it will be received and it can be reliably measured.

Income from charitable activities includes royalty income from the charity's publication and membership subscriptions. Income is recognised where the charity is entitled to the resource, it is probable that it will be received and it can be reliably measured.

Income from other trade activities includes sponsorship income from hosting third-party conferences and meetings and is recognised on a receivable basis.

Investment income is recognised in the year in which it is receivable, which is when the Association becomes entitled to use the resources.

##### **Resources expended**

Resources expended are included in the Statement of Financial Activities on an accruals basis and are recognised when a legal or constructive obligation arises.

Expenditure on raising funds includes costs incurred in relation to the management of the charity's investment portfolio and those costs associated with the hosting of third-party conferences and meetings.

Expenditure on charitable activities comprises those costs incurred by the charity in the delivery of activities and services undertaken to further the purposes of the charity. This includes costs that can be allocated directly to such activities, those costs of an indirect nature necessary to support them and governance costs.

Support costs are those functions that assist the work of the charity but do not directly undertake charitable activities. Support costs include secretarial costs, computer running costs and other similar costs.

Governance costs include those incurred in the governance of the charity and its assets and are primarily associated with constitutional and statutory requirements.

Grants payable are payments to third parties in the furtherance of the objectives of the charity and payments made to members in respect of travel awards granted in the year. Single or multi-year grants are accounted for when either the recipient has a reasonable expectation that they will receive a grant and the Trustees have agreed to pay the grant without condition, or the recipient has a reasonable expectation they will receive a grant and any condition attached to the grant is outside the control of the charity.

##### **Fixed asset investments**

Fixed asset investments are initially measured at transaction price excluding transaction costs, and are subsequently measured at fair value at each reporting date. Changes in fair value are recognised in net movement in funds for the year. Transaction costs are expensed as incurred.

A subsidiary is an entity controlled by the charity. Control is the power to govern the financial and operating policies of the entity so as to obtain benefits from its activities.

Investments in subsidiaries are initially measured at cost and subsequently measured at cost less any accumulated impairment losses.

##### **Financial instruments**

The charity has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the charity's balance sheet when the charity becomes party to the contractual provisions of the instrument.



# BRITISH INFECTION ASSOCIATION

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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#### 1 Accounting policies – Group and Charity (Continued)

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

##### **Basic financial assets**

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price including transaction costs and are subsequently carried at amortised cost using the effective interest method unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts discounted at a market rate of interest. Financial assets classified as receivable within one year are not amortised.

##### **Basic financial liabilities**

Basic financial liabilities, including creditors, are initially recognised at transaction price unless the arrangement constitutes a financing transaction, where the debt instrument is measured at the present value of the future payments discounted at a market rate of interest. Financial liabilities classified as payable within one year are not amortised.

Debt instruments are subsequently carried at amortised cost, using the effective interest rate method.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of operations from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

##### **Derecognition of financial liabilities**

Financial liabilities are derecognised when the charity's contractual obligations expire or are discharged or cancelled.

#### 2 Charitable activities – Group and Charity

	2019 £	2018 £
Subscriptions	52,010	51,203
Delegate Income	3,400	-
Journal of Infection	232,886	214,629
	<u>288,296</u>	<u>265,832</u>

All income from charitable activities in both the current and the prior year was unrestricted.

# BRITISH INFECTION ASSOCIATION

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

#### 3 Other trading activities

	Group 2019	Group 2018	Charity 2019	Charity 2018
	£	£	£	£
FIS 2018	252,308	-	-	-

Income for the group from other trading activities amounted to £252,308 (2018: £nil) for the year, which entirely relates to unrestricted income funds. Income for the charity from other trading activities amounted to £nil (2018: £nil). The Federation of Infection Societies event takes place each year to discuss infectious diseases and microbiology, and is held by the group every four years.

#### 4 Investments – Group and Charity

	2019 £	2018 £
Income from listed investments	47,098	41,101
Interest receivable	115	57
	<u>47,213</u>	<u>41,158</u>

All investment income in both the current and the prior year was unrestricted.

#### 5 Raising funds – Group and Charity

	2019 £	2018 £
Investment management costs	5,781	5,665
	<u>5,781</u>	<u>5,665</u>

All expenditure on raising funds in both the current and the prior year was from unrestricted funds.

# BRITISH INFECTION ASSOCIATION

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

#### 6 Charitable activities

	Group 2019	Group 2018	Charity 2019	Charity 2018
	£	£	£	£
Meeting expenses	62,590	91,126	62,590	91,126
Travel expenses	14,490	15,475	14,490	15,475
Educational workshops	7,132	11,789	7,132	11,789
Journal of Infection	31,599	29,239	31,599	29,239
Research Guidelines	3,500	-	3,500	-
Advertising	13,318	-	13,318	-
	<u>132,629</u>	<u>147,629</u>	<u>132,629</u>	<u>147,629</u>
Grant funding of activities (see note 7)	(3,790)	143,634	(3,790)	143,634
Share of support costs (see note 8)	90,589	59,147	122,847	58,554
Share of governance costs (see note 8)	23,183	18,762	18,901	16,933
	<u>242,611</u>	<u>369,172</u>	<u>270,587</u>	<u>366,750</u>
<b>Analysis by fund</b>				
Unrestricted funds	<u>242,611</u>	<u>369,172</u>	<u>270,587</u>	<u>366,750</u>

#### 7 Grants payable – Group and Charity

	2019 £	2018 £
Grants to institutions:		
To fund research - University of Cambridge (1 grant)	20,000	70,000
To fund research - University College London (1 grant)	-	20,000
To fund research - University of Birmingham (1 grant)	-	20,000
To fund research - Imperial College London (1 grant)	20,000	20,000
To fund research - Queens University Belfast (1 grant)	5,000	-
To support event - The Royal College of Pathologists (1 grant)	-	3,000
For clinical exchange award - University of Liverpool (1 grant)	-	5,000
	<u>45,000</u>	<u>138,000</u>
Grants to individuals	<u>9,450</u>	<u>7,134</u>
	54,450	145,134
Grants to institutions written off	(53,756)	-
Grants to individuals written off	(4,484)	(1,500)
	<u>(3,790)</u>	<u>143,634</u>

# BRITISH INFECTION ASSOCIATION

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

#### 7 Grants payable – Group and Charity (cont.)

As described in the Trustees' Report, grants to individuals are awarded for travel to infection related conferences and for research projects and fellowships.

Grants written off are a result of amounts unclaimed by grant recipients. Unclaimed amounts by individuals for travel grants are written off in the year they are awarded. Other grants are written off when they have remained unclaimed for a three year period.

#### 8 Support costs

Group	Support costs	Governance costs	2019	2018
	£	£	£	£
Secretarial assistance	72,128	-	72,128	49,447
Computer running costs	16,452	-	16,452	8,143
Bank charges	229	-	229	240
Legal and professional fees	1,211	-	1,211	2,283
Insurance	453	-	453	436
Sundry	116	-	116	185
Irrecoverable VAT	-	-	-	(1,587)
Independent examiner's fee	-	696	696	3,354
Accountancy fees	-	9,030	9,030	7,440
Tax advisory services	-	6,307	6,307	7,968
Audit fees	-	7,150	7,150	-
	<u>90,589</u>	<u>23,183</u>	<u>113,772</u>	<u>77,909</u>

Fees payable to RSM UK Audit LLP and its associates are £7,150 (2018: £nil) for statutory audit services, £696 (2018: £3,354) for independent examination services, £6,307 (2018: £7,968) for tax advisory services and £9,030 (2018: £7,440) for other financial services. Note the current year's fees payable for independent examination services relate to the independent exam of the charity's prior year accounts.

Charity	Support costs	Governance costs	2019	2018
	£	£	£	£
Secretarial assistance	72,128	-	72,128	49,447
Computer running costs	16,452	-	16,452	8,143
Bank charges	229	-	229	240
Legal and professional fees	463	-	463	1,840
Insurance	453	-	453	436
Sundry	116	-	116	35
Bad and doubtful debts	33,006	-	33,006	-
Irrecoverable VAT	-	-	-	(1,587)
Independent examiner's fee	-	696	696	3,354
Accountancy fees	-	6,510	6,510	6,360
Tax advisory services	-	4,545	4,545	7,219
Audit fees	-	7,150	7,150	-
	<u>122,847</u>	<u>18,901</u>	<u>141,748</u>	<u>75,487</u>

# BRITISH INFECTION ASSOCIATION

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

#### 8 Support costs (cont.)

Fees payable to RSM UK Audit LLP and its associates are £7,150 (2018: £nil) for statutory audit services, £696 (2018: £3,354) for independent examination services, £4,545 (2018: £7,219) for tax advisory services and £6,510 (2018: £6,360) for other financial services. Note the current year's fees payable for independent examination services relate to the independent exam of the charity's prior year accounts.

#### 9 Trustees – Group and Charity

None of the Trustees (or any persons connected with them) received any remuneration from the group during the year. Nil (2018: one) Trustees were reimbursed a total of £nil for the year (2018: £428) for travel expenditure.

#### 10 Employees – Group and Charity

There were no employees during the year (2018: nil).

#### 11 Net gains/(losses) on investments – Group and Charity

	2019 £	2018 £
Revaluation of investments (see note 12)	46,394	83,047
Gain/(loss) on sale of investments	(942)	(10,809)
	<u>45,452</u>	<u>72,238</u>

#### 12 Fixed asset investments

Group	Listed investments £
<b>Cost or valuation</b>	
At 1 October 2018	1,814,444
Additions	102,249
Unrealised gain	46,394
Disposals	(68,321)
	<u>1,894,766</u>
At 30 September 2019	
<b>Carrying amount</b>	
At 30 September 2019	<u>1,894,766</u>
At 30 September 2018	<u>1,814,444</u>

#### Fixed asset investments revalued

Listed investments are valued at their market price at each year end. The comparable amount on the historical cost basis is £1,282,405 (2018: £1,220,506).

# BRITISH INFECTION ASSOCIATION

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

#### 12 Fixed asset investments (cont.)

Charity	Listed investments £	Other investments £	Total £
<b>Cost or valuation</b>			
At 1 October 2018	1,814,444	1	1,814,445
Additions	102,249	-	102,249
Unrealised gain	46,394	-	46,394
Disposals	(68,321)	-	(68,321)
At 30 September 2019	1,894,766	1	1,894,767
<b>Carrying amount</b>			
At 30 September 2019	1,894,766	1	1,894,767
At 30 September 2018	1,814,444	1	1,814,445
Other investments comprise:	<b>Note</b>	<b>2019 £</b>	<b>2018 £</b>
Investments in subsidiaries	<b>13</b>	1	1

#### Fixed asset investments revalued

Listed investments are valued at their market price at each year end. The comparable amount on the historical cost basis is £1,282,405 (2018: £1,220,506).

#### 13 Subsidiary – Charity

Details of the charity's subsidiary at 30 September 2019 is as follows:

Name of undertaking	Registered office	Nature of business	Class of shares	% Held DirectIndirect
BIA Conferences Limited (SC551988)	54-66 Frederick Street, Edinburgh, EH2 1LS	To run conferences	Ordinary share capital	100.00

BIA Conferences Limited had capital and reserves deficit of £37,559 (2018: £2,421) at the year end. Income for the year amounted to £252,308 (2018: £nil), while expenditure amounted to £287,445 (2018: £2,422), giving a loss for the year of £35,137 (2018: £2,422).

# BRITISH INFECTION ASSOCIATION

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

#### 14 Debtors

	Group 2019 £	Group 2018 £	Charity 2019 £	Charity 2018 £
<b>Amounts falling due within one year:</b>				
Amounts due from subsidiary undertakings	-	-	-	1,881
Other debtors	2,213	1,075	2,213	1,075
	<u>2,213</u>	<u>1,075</u>	<u>2,213</u>	<u>2,956</u>

#### 15 Creditors: amounts falling due within one year

	Group 2019 £	Group 2018 £	Charity 2019 £	Charity 2018 £
Trade creditors	17,853	1,499	17,853	1,499
Accruals and deferred income	61,345	56,599	56,793	56,059
Accruals for grants payable	232,211	331,772	232,211	331,772
	<u>311,409</u>	<u>389,870</u>	<u>306,857</u>	<u>389,330</u>

#### 16 Financial instruments

Group	2019 £	2018 £
<b>Carrying amount of financial assets</b>		
Instruments measured at fair value through income and expenditure	<u>1,894,766</u>	<u>1,814,444</u>
<b>Carrying amount of financial liabilities</b>		
Measured at amortised cost	<u>311,409</u>	<u>389,870</u>
<b>Charity</b>	<b>2019 £</b>	<b>2018 £</b>
<b>Carrying amount of financial assets</b>		
Debt instruments measured at amortised cost	-	1,881
Instruments measured at fair value through income and expenditure	<u>1,894,766</u>	<u>1,814,444</u>
<b>Carrying amount of financial liabilities</b>		
Measured at amortised cost	<u>305,907</u>	<u>389,330</u>

# BRITISH INFECTION ASSOCIATION

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

#### 17 Designated funds – Group and Charity

The income funds of the charity include the following designated funds which have been set aside out of unrestricted funds by the Trustees for specific purposes:

	Movement in funds			
	Balance at 1 October 2018	Incoming resources	Resources expended	Transfers
	£	£	£	£
Designated funds	3,150	-	(3,150)	1,650
	<u>3,150</u>	<u>-</u>	<u>(3,150)</u>	<u>1,650</u>
	<u>3,150</u>	<u>-</u>	<u>(3,150)</u>	<u>1,650</u>

Funds were set aside at the current and prior year end for the purpose of awarding travel grants to individuals who were not notified of the grant until post year end.

#### 18 Analysis of net assets between funds

Group	Unrestricted Funds £	Designated Funds £	Total £
Fund balances at 30 September 2019 are represented by:			
Investments	1,894,766	-	1,894,766
Current (liabilities)/assets	(42,720)	1,650	(41,070)
	<u>1,852,046</u>	<u>1,650</u>	<u>1,853,696</u>
Charity	Unrestricted Funds £	Designated Funds £	Total £
Fund balances at 30 September 2019 are represented by:			
Investments	1,894,767	-	1,894,767
Current (liabilities)/assets	(38,168)	1,650	(36,518)
	<u>1,856,599</u>	<u>1,650</u>	<u>1,858,249</u>
Group	Unrestricted Funds £	Designated Funds £	Total £
Fund balances at 30 September 2018 are represented by:			
Investments	1,814,444	-	1,814,444
Current (liabilities)/assets	(66,360)	3,150	(63,210)
	<u>1,748,084</u>	<u>3,150</u>	<u>1,751,234</u>



# BRITISH INFECTION ASSOCIATION

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

#### 18 Analysis of net assets between funds (cont.)

Charity	Unrestricted Funds £	Designated Funds £	Total £
Fund balances at 30 September 2018 are represented by:			
Investments	1,814,445	-	1,814,445
Current (liabilities)/assets	(63,939)	3,150	(60,789)
	<u>1,750,506</u>	<u>3,150</u>	<u>1,753,656</u>

19 Cash generated from operations	Group 2019 £	Group 2018 £	Charity 2019 £	Charity 2018 £
Surplus for the year	102,462	4,391	104,593	6,813
Adjustments for:				
Investment income	(47,213)	(41,158)	(47,213)	(41,158)
Loss on disposal of investments	941	10,809	941	10,809
Fair value gains and losses on investments	(46,393)	(83,047)	(46,393)	(83,047)
Movements in working capital:				
(Increase)/decrease in debtors	(1,138)	4,348	743	2,467
(Decrease)/increase in creditors	<u>(78,461)</u>	<u>60,629</u>	<u>(82,473)</u>	<u>60,088</u>
<b>Cash absorbed by operations</b>	<u>(69,802)</u>	<u>(44,028)</u>	<u>(69,802)</u>	<u>(44,028)</u>

#### 20 Net debt reconciliation

Group	As at 1 October 2018 £	Cash movements £	Non-cash movements £	As at 30 September 2019 £
Cash and cash equivalents	325,585	(57,459)	-	268,126
Debt – more than one year	-	-	-	-
Debt – less than one year	-	-	-	-
<b>Net debt</b>	<u>325,585</u>	<u>(57,459)</u>	<u>-</u>	<u>268,126</u>
Charity	As at 1 October 2018 £	Cash movements £	Non-cash movements £	As at 30 September 2019 £
Cash and cash equivalents	325,585	(57,459)	-	268,126
Debt – more than one year	-	-	-	-
Debt – less than one year	-	-	-	-
<b>Net debt</b>	<u>325,585</u>	<u>(57,459)</u>	<u>-</u>	<u>268,126</u>

#### 21 Related party transactions

BIA Conferences Limited, a subsidiary of the charity, incurred expenses amounting to £31,125 (2018: £1,881) which were paid by the charity. At the year end £33,006 (2018: £nil) was provided against amounts due from BIA Conferences Limited, resulting in £nil (2018: £1,881) due from BIA Conferences Limited, which is included within amounts due from subsidiary undertakings, see note 14.

# BRITISH INFECTION ASSOCIATION

## NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

### FOR THE YEAR ENDED 30 SEPTEMBER 2019

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#### **22 Post balance sheet event**

Since the year end, the Association has faced the challenge of COVID-19. The Trustees are reviewing all aspects of the ongoing needs of the Association. Whilst there have been implications such as a reduction in investment income, the Association is well placed to support its activities. There has been a £4,636 reduction in investment income for the year ended 30 September 2020 when compared to the year ended 30 September 2019. At 23 March 2021, the value of investments was £2,063,567 compared to £1,894,766 at 30 September 2019, due to the impact of the pandemic on the stock market.