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Welcome

The Healthcare Infection Society (HIS) has existed as charity since the early 1980s. Our mission has always been, and will continue to be, to provide healthcare professionals with the information, evidence and skills they need to prevent and control healthcare-associated infections.

The financial year ending March 2018 has been pivotal in the development and progression of HIS. In this report we summarise our key achievements, and the Society’s activities throughout the year.

April 2017 saw the recruitment of the first member of our new staff team and during the year, a further seven staff joined the Society, in newly created roles. Each member of the team is aligned to a specific strategic objective which has enabled the Society to deliver more events, develop the Journal of Hospital Infection, widen our funding portfolio and increase the number and discoverability of our educational resources.

In May 2017 we launched our Director of Infection Prevention and Control (DIPC) Development Programme with an event in Manchester, and a second held in London in December. Although the DIPC role is only a requirement of registered NHS care providers in England, equivalent roles exist all healthcare settings in the devolved nations and Ireland. The professional background of individuals undertaking the role is varied and, in recognition of this diversity, HIS now delivers a programme of events that considers the professional needs of DIPCs, irrespective of a clinical background and type of healthcare organisation.

Our Trainee Education Programme completed its first three-year cycle in November 2017, and has been re-mapped against the current RCPath curriculum. The next three-year cycle of HIS Trainee days recommenced in February 2018 with an event on surgical site infections. We are now at the stage where all our events - particularly Trainee days - regularly ‘sell out’, and I urge all HIS members to ensure that they register for events as soon as the dates are announced.

In July 2017 members of HIS Council and the staff team began to evaluate how the Society and the Journal of Hospital Infection (JHI) were perceived by members and external stakeholders. This process included a review of the language we use to communicate our activities and ambitions, and also our visual identity – particularly our logo.

This process culminated in a consultation with HIS members and non-members in December 2017. The results from the consultation were clear - HIS and its members continue to be viewed externally as experts in the prevention and control of healthcare-associated infections, and it was time to refresh our visual identity to reflect the importance of infection prevention in modern healthcare.

In February 2018 we announced the results of the consultation to HIS members, and presented the new HIS and JHI logos to members ahead of the official launch on 25 April 2018. The new identities have, we feel, a bold and contemporary feel and sit seamlessly together.
In this report the trustees present their annual report and financial statements for the year ended 31 March 2018 which have been prepared in accordance with FRS 102 and the Charities SORP 2015.

Background

The Healthcare Infection Society (HIS) became a charitable incorporated organisation, charity number 1158172, in 2014. It was previously a registered charity, number 286064, originally called the Hospital Infection Society. It was formed by medical microbiologists in the early 1980s as a society that would foster the scientific interests of those hospital doctors who were interested in nosocomial (or hospital acquired) infections. First registered as a charity in January 1983, the name was later changed to the Healthcare Infection Society, as preventable infections associated with healthcare are not limited to the hospital environment. Membership of the Society is open to people interested in furthering its objectives, and since May 2018 members fall into the categories of Full, Trainee, Associate, and Emeritus members, depending on professional and academic qualifications, and practice in the control of infection. Honorary membership is awarded by Council to an individual in recognition of a significant and longstanding commitment to infection prevention and control, who has worked in the field of hospital and other healthcare-associated infection and who has a clear connection with the Society.

The Society publishes the Journal of Hospital Infection (JHI) which is a leading publication in the field of healthcare-associated infection prevention and control.

Objectives

The objects of HIS are, for the public benefit, to advance education among the general public and in particular among medical and allied professionals in the prevention and control of hospital and other healthcare-associated infections, and to promote research in all aspects of that subject and to publish the useful results.

Statements of purpose

Vision
A world in which healthcare-associated infections have been reduced to the lowest possible level.

Mission
To provide healthcare professionals with the information, evidence and skills they need to prevent and control healthcare-associated infections.

Values
We believe that:

- Good science underpins good clinical practice
- Continual professional learning and development is necessary to reduce the incidence of healthcare-associated infections
- Many healthcare-associated infections are preventable through effective multidisciplinary teamwork
- Collaboration within and beyond the Society will help to advance and communicate knowledge

Public benefit

The Society has referred to the Charity Commission’s guidance on public benefit when reviewing its aims and objectives and in planning its future activities.

The Society provides public benefit through a programme of:

- Research grant funding that supports the advancement of the science of healthcare-associated infection prevention and control
- Organised educational and training events for healthcare professionals
- Support and guidance for healthcare professionals at all stages of their career and specialty
- The publication of the JHI
- An accessible network of experts in the field of healthcare-associated infection prevention and control
By providing the evidence and guidance to help healthcare professionals to prevent and control healthcare-associated infections, the public benefits through the advancement of health or the saving of lives.

In this report, we demonstrate how our charitable funds for the reported year are distributed and spent, and the benefits and impact that has on the advancement of medical research and clinical practice.

The trustees confirm that we have complied with our duty to have regard for the guidance on public benefit published by the Charity Commission on exercising our powers and duties.

**Strategic objectives (2015 - 2019)**

The trustees met in February 2016 to review the Society’s strategic objectives which were as follows:

- To ensure that the JHI is the leading journal in its field
- To promote and develop the science of infection prevention and control and to strive to ensure that clinical practice is consistent with latest scientific knowledge
- To design and deliver a range of educational activities that will help equip healthcare professionals to prevent and control healthcare-associated infections
- To retain, enhance engagement with and increase membership
- To increase the numbers of people and organisations with whom HIS communicates and collaborates, particularly overseas
- To ensure that the Society is properly resourced to effectively fulfil its strategic objectives and to enhance its existing governance procedures

It was agreed in 2016 that the objectives were still valid, but the Society would focus on resourcing the organisation to ensure the delivery of the objectives. During 2017, five new staff were recruited in order work with the Chief Executive and Council to focus on the delivery of each of the strategic objectives. A further two staff were recruited in February 2018.

**Achievements against objectives in 2017/18**

**Membership and Engagement**

The Society’s membership network grew to 917 members by the end of March 2018. This represented an increase of 87 members (12%) since April 2017. The membership at 31 March 2018 comprised 567 Full members, 81 Associate members, 257 Trainee members and 12 Emeritus members.

We attribute membership growth during this period to a number of activities, including a lapsed member campaign which resulted in an excellent re-join rate. In early 2018, a number of new membership benefits were introduced, including development of a DIPC network and training events, reduced member registration rates for HIS events, reduced open access publishing fees for the JHI and the launch of member-only grants and bursaries. Alongside this, the Trainee Committee continued to work hard to recruit and engage with trainees and, as a result, achieved their target of 250 HIS Trainee members in March 2018.

The Society also continued to communicate with members via targeted members’ news emails and social media. Twitter followers had increased to 2,355 by the end of March 2018.

**Twitter Metrics March 2017 – March 2018**

<table>
<thead>
<tr>
<th>2355 followers in March 2018</th>
<th>↑481% increase in followers from March 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>4,646 engagements</td>
<td></td>
</tr>
<tr>
<td>183,136 impressions</td>
<td></td>
</tr>
<tr>
<td>234 tweets</td>
<td></td>
</tr>
</tbody>
</table>
Our activities 2017/2018

MEMBERSHIP ENGAGEMENT AND RECRUITMENT
March 2018

917 members

- 257 Trainee members
- 567 Full members
- 81 Associate members
- 12 Emeritus members

↑12% increase in members since April 2017

RESOURCES AND GUIDELINES

- Meticillin-resistant *Staphylococcus aureus* (MRSA), jointly with BSAC, Infection Prevention Society (IPS) and BIA
- Multi-drug resistant Gram-negative bacteria, jointly with the British Society of Antimicrobial Chemotherapy (BSAC) and British Infection Association (BIA)
- Prevention and control of infection in burns units, jointly with the British Burns Association
- Rituals and behaviours in the operating theatre, joint with ESCMID
- Bone and joint infections: Infection prevention and control, joint with BIA and The British Orthopaedic Association
- Faecal microbiota transplant, jointly with the British Society of Gastroenterology
- Decontamination of intracavity medical devices
- Water management for the microbiologist
- Final rinse water for endoscope washer disinfectors
- Automatic room decontamination
- Commissioning and monitoring of operating theatre suites

Funding awarded £224k

- 2 Small research grants
- 2 Major research grants
- 1 Graham Ayliffe Fellowship
- 6 Travel grants
Our activities 2017/2018

PUBLISHING

856 submissions
326 articles published
54 Short Reports
170 Original research
15 Other
67 Letters
14 Review
5 Practice Points
1 Commentary

200,000 unique users on the JHI website
700,000 downloads across 120 countries

International Editorial Board
112 members from 26 countries

Europe: 86
North America: 7
Asia: 7
Middle East: 6
Australasia: 4
Africa: 1
South America: 1

TRAINING AND EVENTS

Trainee Days
DIPC Days
Spring Meeting
Engineering Courses
Foundation Course

3
2
1
2
1

208 attendees
125 attendees
60 attendees
23 attendees
45 attendees

Trustee’s report and financial statements for the year ended 31 March 2018
In line with the Society's core objective to retain, enhance engagement with and increase membership, the Society recruited a Membership, Education and Events Manager in September 2017. As well as focusing on membership, Dr Helen Davies has responsibility for managing and developing the HIS programme of education and training events and supporting the committees that deliver these activities.

**HIS Events and Education**

The HIS Spring Meeting took place on 27 April 2017 at the Birmingham Repertory Theatre. Despite an excellent programme of speakers, presenting on the topic of **HCAIs – what to target next?**, attendance was lower than expected at 60 delegates. The timing of the event and its proximity to a large international infection conference (ECCMID 22-25 April 2017) is likely to have influenced attendance.

In May 2017, HIS launched the **DIPC Network and Development Programme** with the first sell out event taking place in Manchester, attracting over 90 delegates. The second event in London in December 2017, focused on the topic of **Influencing Others and Changing Behaviour** and again was well attended and received excellent feedback.

The **Trainee Education Programme** continued in 2017/18 with three Trainee Days focused on the topics of **Behaviour Change, Quality Improvement and Leadership, Aspects of Decontamination** and **Reducing Harm to Patients and Improving Quality of Care: Surgical Site Infection and Sepsis**. All three Trainee Days attracted more than 70 delegates, with the November event selling out.

To support the **HIS Trainee Education Programme** and enable HIS to recognise those trainees who demonstrate a sustained commitment to their professional development in infection prevention and control (IPC), in January 2018 the Society launched the **HIS Foundation Certificate in IPC** which recognises HIS Trainee members who have attended and participated in a defined number of HIS educational events during their training.

The Society continued to support two key training courses between April 2017 and March 2018; **The Foundation Course in Infection Prevention and Control**, held at Colindale in collaboration with Public Health England, was expanded in response to demand to allow increased attendance. The **Engineering Aspects of Infection Control** courses were held in June and September 2017 at Eastwood Park Training centre in Falfield, Gloucestershire.

HIS also continued to support the joint **BSAC/BIA/HIS Educational Workshops** held at venues across the UK between October and December 2017.

**Educational Resources**

In line with the Society’s objective “to advance education among the general public and in particular among medical and allied professionals in the prevention and control of hospital and other healthcare associated infections” from February 2018, HIS began generating a new educational online resource – **IPC in 5**. **IPC in 5** are concise (5 minute) narrated PowerPoint presentations from speakers who present at HIS Training Days. **IPC in 5** resources are freely available via the HIS website.
External Events

HIS had a presence at a number of key events during the period, either with an exhibition stand or sponsorship of speakers and sessions, providing the opportunity to engage with members and potential members and raise the profile of the Society. Events attended during the period were:

- International Federation of Infection Control (IFIC), Brazil, March 2017
- European Congress of Clinical Microbiology and Infectious Diseases (ECCMID), Vienna, April 2017
- Don’t Panic! – Practical Aspects of Infection Control, Sheffield, June 2017
- Infection Prevention Society Conference, Manchester, September 2017
- Federation of Infection Societies (FIS), Birmingham, November 2017

The Lowbury Lecture 2017 was presented at FIS 2017 by Professor Nick Graves School of Public Health, Queensland University of Technology who spoke on the topic of ‘Make Economics Your Friend.’

The Journal of Hospital Infection

The Journal of Hospital Infection (JHI) is a monthly publication and continues to be a leading international journal in its field. The Society is committed to make improvements to the quality of the journal and to widen its international contribution, and works closely with Elsevier, (its publisher) to promote the journal and to ensure it has a wide penetration in the academic and healthcare environment. The journal continues to break its own records regarding submissions, and operational procedures which have improved again in this time period. The journal received 856 submissions in the period between April 2017 and March 2018, a 13% increase on the previous year. The editorial team have also been successful in reducing the average time from submission to first decision to 12 days, a reduction of 2 days compared to the previous year.

A new Twitter strategy was created and launched, with the HIS and JHI Twitter accounts tweeting material from the journal to over 3,000 followers. Twitter campaigns focused on key papers from the journal including two papers published on VIOLET (Visualising Infection with Optimised Light for Education and Training), a PPE training tool developed and tested by the HIS Graham Ayliffe training fellow Dr Bozena (Jenny) Poller.
In January 2018 the journal launched a new article type titled **Practice Points.**

This short article type was designed to rapidly communicate clinical experiences in the area of Gram-negative bloodstream infections, a key strategic topic area for the journal, which is in line with UK government targets to reduce these infections by 50% by 2020. Several issues of the journal published special sections focusing on this topic.

The journal underwent a full rebrand to align with the newly developed HIS visual identity and to modernise the look of the journal, and now includes a custom designed monthly cover.

The journal website was also redesigned and relaunched in style with our new branding.

The International Editorial Board (IEB) now comprises 112 editors from across the globe. A quarterly IEB newsletter was established in Q1 of 2018. This newsletter aimed to inform the International Editorial Board of JHI and HIS-related news and to solicit commissions where necessary.

This initiative has improved communication and engagement with the board, alongside new initiatives to improve the relationship between the journal office and our board members. Many board members accepted our offer of a year’s free Society membership.

An Editorial and Production Manager, Dr Antonia Johnston, was appointed and started in September 2017. Antonia’s role involves working alongside the editors to improve editorial processes and to develop new strategic aims and objectives for the journal. In the future, the journal aims to develop a more ambitious strategic framework, focusing less on operational procedures and more on the journal vision for accessibility, discoverability and impact.
The science of infection prevention and control

The Society promotes and develops the science of IPC by supporting working parties (either on its own or jointly with other organisations), to produce evidence-based and expert guidelines in all relevant areas. The Society’s methodology for the production of guidelines is accredited by the National Institute for Health and Care Excellence (NICE), which provides assurance of high quality guidance. HIS members also participate in the working parties of other organisations.

The Society funds research and career development through a number of grants and awards, which range from smaller awards (such as travel grants) to major research grants. Both research and career development awards aim to foster opportunities and knowledge that can directly impact clinical practice.

The activities involved in guideline production and funding are carried out under the auspices of the Scientific Development Committee (SDC) and the Grants Committee, and in past years, HIS has largely provided administration support to these committees and working parties. Support has taken the form of the organisation of meetings, reimbursement of meeting expenses and other direct expenses such as payment for literature reviews and referencing services. Historically, HIS has been heavily reliant on the goodwill and dedication of many volunteers who serve on committees and working parties. In April 2017, in order to increase the Society’s impact in the field of infection prevention science, a new member of staff (Dr Gemma Marsden) was recruited into the new role of Research and Development Manager (RDM). This role supports the work of both the SDC and Grants Committee. The RDM has worked to improve the pre-award and post-award funding processes, has revised the Society’s funding terms and conditions and works to maintain the guideline methodology and a schedule of working party progress.

The working parties active during April 2017-March 2018 period were:

- Multi-drug resistant Gram-negative bacteria, jointly with the British Society of Antimicrobial Chemotherapy (BSAC) and British Infection Association (BIA)
- Prevention and control of infection in burns units, jointly with the British Burns Association
- Commissioning and monitoring of operating theatre suites
- Meticillin-resistant Staphylococcus aureus (MRSA), jointly with BSAC, Infection Prevention Society (IPS) and BIA
- Final rinse water for endoscope washer disinfectors
- Faecal microbiota transplant, jointly with the British Society of Gastroenterology
- Automatic room decontamination
- Decontamination of intracavity medical devices
- Water management for the microbiologist
- Rituals and behaviours in the operating theatre, joint with ESCMID
- Bone and joint infections: Infection prevention and control, joint with BIA and BOA

In order to increase the support for the working parties and to facilitate timely guideline production, the Society recruited two Researchers in Evidence Synthesis in February 2018, who undertake literature searching, sifting and data extraction using GRADE methodology.

The grants and awards made during this period were:

**The Mike Emmerson Young Investigator’s Award**

This award, with a value of up to £10,000, is made annually and is specifically aimed at encouraging trainees to become more involved in the many issues of IPC. The recipient in 2017 was Dr Cristina Suarez, St George’s University of London, who was awarded £9,751 to research ‘Optimising environmental screening for multidrug-resistant Gram-negative bacteria.’

**Small research grants**

Two small research grants totalling £19,760 were awarded during the year. Dr Beatrix Duran Jimenez, University Hospital of South Manchester NHS Foundation Trust, was awarded a small research grant of £10,000 in order to complete research entitled ‘Randomised double-blind placebo-controlled trial of probiotic in the treatment of faecal carriage carbapenemase-bearing Klebsiella pneumoniae.’ In the second funding call, Dr Katie Hardy, PHE, was awarded £9,760 for her project ‘Attack of the clones? Implementation of whole genome sequencing to determine spread of vancomycin-resistant Enterococcus faecium in a high-risk healthcare setting.’
Major research grant
Two major research grants to the value of £127,488 were awarded in 2017. One year’s funding of £32,000 was awarded to Dr Ginny Moore (PHE) for a project examining ‘Mycobacterium chimaera contamination of heater-cooler units: a hybrid product of water and engineering.’ The remaining funds of £95,488 were awarded to Dr Nicola Irwin, Queen’s University Belfast, for a three year research project on ‘Combatting device-associated, healthcare-associated infections with innovative anti-biofouling, anti-blocking and non-resistance-promoting technologies.’

The Graham Ayliffe Training Fellowship
Graham Ayliffe Training Fellowship awards support a senior trainee for a year to pursue and develop interests relevant to IPC. An award for the value of £63,000 was made to Dr Bozena (Jenny) Poller, a medical virology specialty registrar, to design, evaluate and disseminate a UK model of personal protective equipment for high consequence infectious diseases. Working with the Health and Safety Laboratory, the research team have conducted experiments to model cross-contamination events upon primary patient examination, using a model called VIOLET. Dr Poller and team have presented data at both national and international conferences, and have reported in the results of the project in a number of issues of the JHI, (see page 7).

Travel Grants
Travel Grants are awarded at the discretion of the Society and are primarily intended to enable Trainee members to attend meetings of educational benefit. In the year to March 2018, 6 travel grants were awarded for a total value of £3,821.

New grants
This financial year also saw the launch of the Strategic Research Grant, where the Society demonstrated its commitment to innovative and outstanding research into antimicrobial stewardship and infection prevention and control. The Society has called for ambitious research projects in this area with a minimum 3-year duration and total funds available of £800,000.

In order to promote the science of infection prevention further, the Society launched two new grants to support public engagement activities and Society sponsored events in early 2018.
Policies

Grant making

Grants are awarded for research which is pertinent to IPC, including epidemiology and prevention. The aims must be clearly stated and must be hypothesis driven. Methodology should be evidence-based if possible and achievable in the study time frame. The outcome should be translatable to clinical practice with evidence of improving patient well-being, be of practical use to healthcare workers and be cost-effective.

The award of grants carries several conditions:

- A progress report must be submitted to the Grants Committee every 6 months until completion of the project
- The grant must be acknowledged in any publications associated with this work
- Unless there is a compelling reason not to do so, the main publication should be submitted to JHI for first refusal
- Once the study is completed it will be presented to a meeting of the Society

Selection of social or programme related investments

In addition to regular grants, the Society may, from time to time, award additional funds for activities which fall within its aims and objectives. Such awards will be discussed and approved or disapproved by the members of Council on presentation of a fully-costed application which includes aims, objectives, intended outcomes and an outline timetable.

The roles and contribution of volunteers

Members and Officers of Council conduct the business of the Society on a voluntary basis.

There are also other volunteers of HIS such as members of working parties and HIS representatives on the committees of other organisations. All members of Council and other volunteers are entitled to reimbursement of expenses as outlined in the Travel and Expenses Policy. This Policy is drawn up to ensure that expenses are kept to a minimum.

Financial review

Brief review of the financial position of the charity

The Society continues to be in a healthy financial position with total funds of £8,358,000 as at 31 March 2018 (2017: £8,723,000). The deficit for the period of £365,000 (2017: £1,071,000 surplus) comprises of an operational deficit of £137,000 (2017: £196,000 surplus) together with investment losses of £228,000 (2017: £875,000 gains). Further details are given in the Statement of Financial Activities on page 20, the Balance Sheet on page 24, and the associated notes to the Financial Statements.

Reserves Policy, Designated Funds and Going Concern

It is the policy of Council to maintain sufficient funds to meet its objectives and obligations on an ongoing basis. Society funds of £8,358,000 as at 31 March 2018 are all unrestricted funds.

The trustees continue to designate funds in accordance with the Society’s financial strategy to ensure sufficient funding for the ongoing Society activities, objectives and strategy, and to safeguard against expected or potential contingencies. Designated funds are further explained in note 15 to the accounts.

Operating Reserves represent free reserves and are calculated as total Society funds after deducting designated funds and the net book value of fixed assets. Operating Reserves are held to ensure the financial stability and ongoing operations of the Society in the event of an unanticipated loss in income or unexpected rise in expenditure. Operating Reserves as at 31 March 2018 amounted to £1,863,000.
The Council have determined that the ideal level of Operating Reserves will be equivalent to 6 months of average operating cost, within a range of 3 months above or below this level. For the year to 31 March 2018 the requisite level of reserves on this basis was £277,000.

The trustees have reviewed the Society’s financial position and consider that the Society has adequate resources to continue operating for the foreseeable future. For this reason they continue to adopt the going concern basis in preparing the financial statements.

The Society will continue to review its Reserves Policy annually.

**Investment policy and performance**

The trustees operate an investment strategy of balanced risk, seeking to provide an income stream supporting Society activities and operations, whilst protecting income and capital values, at least in real terms, through longer term growth.

The Society holds an investment portfolio, primarily in readily marketable securities and managed by Rathbone Investment Management in accordance with an agreed policy. Risk is mitigated through a well-diversified portfolio with reliance on any one investment at less than 5%. Assets are invested for the longer term with no expected calls for capital disposal.

Performance is benchmarked by reference to the MSCI WMA Balanced Index on a quarterly basis, and annual income targets are agreed between the Society and the fund manager. In the interest of ethical investment, the fund manager will avoid direct investment in shares of tobacco companies and armament manufacturers.

No individual holding represents more than 5% of the total value, and no direct investments were held in tobacco companies of armament manufacturers.

**Plans for future periods**

The Society aims to further increase its profile as an international leader in the field of IPC, and continue to implement and review its strategic objectives. During 2018, the Society and JHI will continue to develop its brand and the launch of a new website towards the end of 2018 will ensure that our position, activities and impact are easily understood, and resonate with current, and trainee healthcare professionals.

**Membership engagement and educational activities**

The Society aims to maintain its reputation as a leading provider of expert training and events for those working in the field of IPC who are committed to best practice and continued professional development.

The launch of a new HIS website in autumn 2018 will provide a much improved experience for those who visit the site to access events and resources. As part of the website redevelopment project, the Society will also implement a new membership database. This database will fully integrate with the website enabling members to more easily join and renew their membership online, as well as to view and update their personal profile and view register and pay for events.

During the next 12 months, HIS will continue with its existing programme of conferences, events and training courses with further plans during 2018/19 to grow and diversify the events programme in response to member and delegate feedback. The *Foundation Course in Infection Prevention and Control* will again permit a higher capacity to meet demand, and the programme will be expanded to 4 days in January 2019 to include a session on behaviour change. A new hands-on training workshop on *Dealing with outbreaks* will launch in autumn 2018 and for the first time, the Society will run the popular *Don’t Panic!* Conference as a HIS event in 2019.

To further support the continuing professional development of members there are plans to launch two further certificates; a DIPC Foundation Certificate and an Advanced Certificate in IPC, both of which will recognise those members who have demonstrated a continuing and sustained commitment to their training attendance and participation in HIS training events and courses.

Organisation is now well underway for the 11th HIS International Conference (HIS2018) which will be held in Liverpool in November 2018, and will feature the Lowbury Lecture “Decolonisation to reduce multidrug-resistant organisms (MDROs) in healthcare: who, what, where, when, and why?” by Dr Susan Huang, University of California, Irvine.
The Journal of Hospital Infection

The JHI’s Editor-in-Chief, Dr Jim Gray, will work with the Society’s Editorial and Production Manager to continue to build on the improvements to editorial production and article handling times as introduced last year. The first meeting of the IEB is planned to take place at the HIS 2018 International Conference in November, during which the board will discuss the publishing strategy going forward.

The Society will widen its activities to promote and support the strategic objectives of the journal and to ensure that these activities are integrated in order to maximize the impact of the JHI. The Society is confident that the increasing trend in the JHI Impact Factor will continue to strengthen into the next year, and we are also reviewing additional metrics including rejection rates, submissions from overseas and article downloads.

The science of infection prevention and control

The Society continuously reviews its current guidelines, and a schedule of updates based on criteria aligned to both SIGN and NICE methodology is in use. Where appropriate, existing guidelines will be updated during 2018/2019 and new guidelines will be prepared using the NICE accredited methodology.

The Society has committed to setting aside additional resources to ensure that evidence based guidelines are produced to NICE accreditation standard, and reviewed regularly to ensure that guidance remains up to date. As mentioned previously, in February 2018 Council approved the recruitment of two Researchers in Evidence Synthesis to be employed on a six month contracts in order to expedite the production of updates to the Meticillin-resistant Staphylococcus aureus (MRSA) that were previously published in 2006. Following a review of progress, and due to the high number of articles that required review, in June 2018 Council agreed to extend both contracts for a further six months to ensure that searches and sifting is completed as soon as possible.

Our new staff structure will both facilitate and enhance the activities of the working parties to ensure guideline development and review is maintained as a key activity of the Society.

HIS reviewed its funding portfolio during the 2018 financial year in addition to reviewing the awards process. As a result, a new Career Development Bursary to support full members, and a Pilot Project Grant will be launched in the third quarter of 2018. In order to support transparency in funding and reporting, HIS will seek Association of Medical Research Councils (AMRC) membership in 2018.

External collaboration

The Society will continue to focus on growing and strengthening its collaboration with external organisations and kindred societies.

New premises and income diversification

The Society plans to relocate its Head Office to premises of a size, configuration and location appropriate to fulfilling its function to the benefit of its members, advancing the efficiency and quality in the delivery of its objectives and activities, and creating capacity for growth. This will be achieved through the planned purchase of larger freehold premises in central London. In addition to achieving benefits in operation and service, it is intended that the new property will allow for the diversification of income streams and allow the Society to generate revenue from renting unused space to other charities (where possible) at competitive rates. The intention is that this new income stream, coupled with the diversification of the investment portfolio, will ensure the long term sustainability of the Society.
Investment management review

Over the coming year the Society will, as a matter of good governance, undertake an investment manager review to ensure that its investment portfolio is relative and integrated to its operations and strategic aims. The review is intended to ensure the Society achieves the best in terms of performance and cost together with the products and options to align and enable current and planned activities.

Advances in digital services

During the coming year the Society will reconfigure its digital platforms to enable in-house management of our activities, providing enhanced online services to our members, efficiencies in the administration, management and delivery of our events, and a higher level of engagement, communication and information for our constituency. This will be achieved through the implementation of a Customer Relationship Management (CRM) and website integrated with back office services to provide a fully digitised platform. Together with the introduction of a cloud-based finance system, and as well as achieving significant cost savings, this will underpin the Society’s GDPR policies and meet the HMRC requirements for digital tax.

Structure, governance and management

Nature of governing document and how the charity is constituted

The Society’s governing document is its Constitution. This incorporates the elements of the previous constitution into the requirements of the Charity Commission for a Charitable Incorporated Organisation.

The Society had previously one trading subsidiary; Hospital Infection Society (Management) Limited, which did not trade during the year. This company was dissolved on 31 May 2016.

Methods adopted for the recruitment and appointment of new trustees

Full and Trainee members of the Society are eligible to be trustees. There are a maximum of 13 trustees of the Society who are all members of the Council. They are:

President (an Officer) - elected by Council members for a single term of four years.

Other Officers (Chair, Secretary, and Treasurer) - elected by Council members for a three-year term and may be re-elected for one further term of three years.

Editor-in-Chief of the JHI - appointed by Council for an initial three-year term extendable for two further two-year terms.

Seven Council members - elected by Full and Trainee members of the Society. The call for nominations and any resulting ballot of the membership (should the number of nominations exceed the number of vacancies) is managed by an election process. Following a Resolution passed on 27 April 2017, the inclusion of a lay trustee position was agreed by the membership.

In addition to trustee members of Council, there may be members co-opted onto Council at the discretion of the trustees as per clause 4(14) of the Constitution. Such individuals serve for one year in the first instance, renewable on an annual basis for up to three years. In addition, trustees will appoint the Chairs of the Society’s standing committees, which are the Scientific Development Committee and the Education Committee.

The Chairs of standing committees are appointed for three years in the first instance but trustees could extend this term by a further two years. Neither the Chairs nor co-opted members are trustees by virtue of their position on Council. Council also appoints the Chair of the HIS Conference Organising Committee, who is a member of Council but not a trustee.

Policies and procedures for the induction and training of trustees

Trustees participate in an annual trustee development and training session and are provided with a trustee induction pack which includes the Society’s Constitution, details of Society policies and procedures and information on trusteeship from the Charity Commission. Trustees also have access to on-line training material provided by the National Council for Voluntary Organisations.

A register of interests of trustees is maintained, and declarations of interests are made at all council and committee meetings. The trustee role description was reviewed during the year.
Organisational structure and decision-making process

The business of the Society is conducted by its Council, which meets quarterly. The Council determines the strategy of the Society and reviews progress against its strategic aims and objectives. Council reports to the members via the Annual General Meeting, by notices on the Society website, by post and by email. The Officers, Chief Executive Officer, the Chairs of the standing committees and the Editor-In-Chief meet in person or by teleconference as and when required to discuss key issues, and their proposals and recommendations are taken to Council for discussion and formal decision making.

The Society’s Annual General Meeting was held on 2 December 2017, and minutes are available on the Society’s website.

Governance reviews

The Society began a governance review in 2016 and since then has refined existing processes, defined new roles and training processes. This review continued during 2017, and to date the following changes have been agreed and are being implemented:

Recruitment of a Lay trustee
In June 2016 Council agreed in principle to the appointment of a lay trustee. A Resolution was passed on 27 April 2017 and Andrea Parsons was recruited in February 2018.

Number of trustees
The number of trustees was increased from 12 to 13 on 27 April 2017 when a Resolution was passed.

Lapsed members
During the year, following a benchmarking exercise with similar organisations, Council proposed a Constitutional Change regarding the policy on lapsed membership. The previous constitution allowed a grace period of six months (from the date of membership expiration) before members were considered to be lapsed members of the Society. It was agreed the grace period should be reduced to 56 days in keeping with the best practice of other organisations. This was unanimously agreed by Council members and approved at a General Meeting on 27 April 2017.

The Charity Commission confirmed the constitutional changes passed on 27 April 2017 in May 2017.

Land
The title to all land held by or in trust for the Society, which consists of the premises at 162 King’s Cross Road, London, WC1X 9DH, is held on behalf of the Society by the Official Custodian of Charities.

Details of related parties and wider networks in which the charity is involved

HIS is represented on a number of national and international committees and other forums. The following is a list of these groups and the current HIS members with involvement:

Royal College of Pathologists: Infection Training Speciality Advisory Committee
Peter Wilson
Royal College of Pathologists: Medical Microbiology Speciality Advisory Committee
Peter Wilson
European Network to Promote Infection Prevention for Patient Safety (EUNETIPS)
Martin Kiernan
Infection Prevention Society: Research and Development Group
Chris Settle
Professional Expert Communication Forum: Decontamination of Medical Devices
Mark Garvey
Public Health England: Standards for Microbiology Investigation Steering Group
Chris Settle
Sepsis Trust Steering Group
Simon Goldenberg
Department of Health: Human Health Stakeholder Group
Peter Wilson
NHS Improvement: National Standards of Cleanliness
Chris Settle
Standards for Microbiology Investigation Steering Group
Chris Settle
European Committee in Infection Prevention and Control (EUCIC)
Kay Miller
Bill Newsholme
BSI Committee on CH/216 Chemical Disinfectants and Antiseptics
Karren Staniforth

The Society participates with several other organisations in an annual three-day scientific meeting under the title of the Federation of Infection Societies (FIS). It holds other scientific meetings with like-minded groups on an ad hoc basis.

The Society liaises closely with like-minded groups, both national and international, in the production of scientific guidelines and in the provision of educational workshops and other educational opportunities.

A Foundation Course in Infection Prevention and Control is run in collaboration with Public Health England (PHE).
**Risks and Uncertainties**

The trustees have examined the major risks that the Society faces and confirm that systems have been established so that the necessary steps can be taken to manage any such risks. An extensive risk register is held and reviewed annually.

The trustees recognise that the activities of the Charity in providing support for scientific research and education are principally reliant on the income it receives from the JHI. Support to ensure the continuing success of the journal is therefore a critical function of the Council. As such, a new staff role of Editorial and Production Manager is in place within the new staff structure. The Editorial and Production Manager, alongside the editors, is responsible for the strategic development of the JHI.

The Society maintains a reserve, appropriately invested, to ensure that it is able at any time to fully support all grants and awards that it has made, and to remain a going concern.

The trustees are aware of the research undertaken by the Fraud Advisory Panel on the extent of fraud in the charity sector and recognise that fraud must be covered in its risk management processes.

The trustees support health and safety risk management with the intention of providing a modern and safe environment in which to work. The strategy is to identify hazards and risks within the Society’s premises and to control, eliminate or reduce to an acceptable level all risks which have an adverse effect on the ability of staff, members and visitors to work within the premises.

The trustees are aware of additional obligations arising from the Charities (Protection and Social Investment) Act 2016 and are implementing measures to ensure compliance.

The trustees have appointed an external human resources/health and safety management firm to ensure compliance with legal requirements and good practice.

**Key management personnel remuneration**

The Society considers its key management personnel comprises the trustees, Chief Executive and the entire staff team.

All trustees give of their time freely and no trustee received any remuneration or other employee benefits for their role as trustee. Details of trustee expenses and related party transactions are disclosed in notes 9, 16 and 17 to the accounts.

The policy and procedure in determining the remuneration payable to the Chief Executive is as agreed by the trustees. The rate of remuneration for all staff is benchmarked against organisations of a similar size and activity.
Statement of trustees' responsibilities

The trustees are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable legislation and regulations.

The law applicable to charities in England and Wales requires trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charity and of its incoming resources and application of resources of the charity for that period. The trustees have elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). In preparing these financial statements, the trustees are required to:

1. Select suitable accounting policies and apply them consistently;
2. Observe the methods and principles in the Charities Statement of Recommended Practice;
3. Make judgements and accounting estimates that are reasonable and prudent;
4. State whether applicable accounting standards and statements of recommended practice have been followed, subject to any departures disclosed and explained in the financial statements; and
5. Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

The trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the charity's transactions and disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that the financial statements comply with Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the charity's constitution. They are also responsible for safeguarding the assets of the charity and group and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the trustees are aware:

1. There is no relevant audit information of which the charity's auditor is unaware; and
2. The trustees have taken all steps that they ought to have taken to make them aware of any relevant audit information and to establish that the auditor is aware of that information.

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

Approved by the trustees

Date: 12 September 2018

Signed on their behalf by

Dr Richard Cunningham

Trustee's report and financial statements for the year ended 31 March 2018 17
Independent auditor’s report

to the trustees of the Healthcare Infection Society

Opinion

We have audited the financial statements of Healthcare Infection Society (the ‘charity’) for the year ended 31 March 2018 which comprise the Statement of Financial Activities, the Balance Sheet, the Statement of Cash Flows 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 charity’s affairs as at 31 March 2018 and of its incoming resources and application of resources 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 Charities Act 2011.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor’s responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC’s Ethical Standard, and we have fulfilled our 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 audit opinion.

Conclusions relating to going concern

We have nothing to report in respect of the following matters in 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 charity’s ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

Other information

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

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

We have nothing to report in this regard.
Matters on which we are required to report by exception

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

- The information given in the Trustees’ Annual Report is inconsistent in any material respect with the financial statements; or
- Sufficient accounting records have not been kept; or
- The financial statements are not in agreement with the accounting records and returns; or
- We have not received all the information and explanations we require for our audit.

Responsibilities of trustees

As explained more fully in the trustees’ responsibilities statement set out on page 17, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the charity’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 charity 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: www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor’s report.

Use of our report

This report is made solely to the charity’s trustees, as a body, in accordance with Chapter 3 of Part 8 of the Charities Act 2011 and regulations made under section 154 of that Act. Our audit work has been undertaken so that we might state to the charity’s trustees those matters we are required to state to them in an 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 charity and its trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Philip Clark, Senior Statutory Auditor

For and on behalf of Moore Stephens LLP, Statutory Auditor

150 Aldersgate Street
London
EC1A 4AB

Date 13 September 2018

Moore Stephens LLP is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006
Statement of financial activities for the year ended 31 March 2018

Unrestricted Funds

<table>
<thead>
<tr>
<th>Notes</th>
<th>General</th>
<th>Designated</th>
<th>Total funds 2018</th>
<th>Total funds 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
</tbody>
</table>

Income from:

- **Donations and legacies**

- **Charitable activities**
  - Education: £61,090 (2018), £64,872 (2017)

- **Investments**

Total Income: £930,650 (2018), £1,655,993 (2017)

Expenditure on:

- **Costs of raising funds**

- **Charitable activities**
  - Conference costs: £614,570 (2018)
  - Other charitable activities: £47,144 (2018), £77,541 (2017)


Net (expenditure) / income and net movement in funds for the year: £(5,498,970) (2018), £1,071,169 (2017)


Fund balances carried forward at 31 March: £1,862,885 (2018), £8,357,885 (2017)

All the above results were derived from continuing activities.
The notes and information on pages 23 to 32 form part of these financial statements.
# Balance sheet as at 31 March 2018

<table>
<thead>
<tr>
<th></th>
<th>Notes</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td><strong>Fixed assets</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tangible assets</td>
<td>10</td>
<td>388,264</td>
<td>396,765</td>
</tr>
<tr>
<td>Investments</td>
<td>11</td>
<td>7,460,032</td>
<td>7,299,138</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>7,848,296</td>
<td>7,695,903</td>
</tr>
<tr>
<td><strong>Current assets</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Debtors</td>
<td>12</td>
<td>431,116</td>
<td>434,429</td>
</tr>
<tr>
<td>Short term deposits</td>
<td></td>
<td>201,357</td>
<td>315,702</td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td></td>
<td>435,024</td>
<td>714,571</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>1,067,497</td>
<td>1,464,702</td>
</tr>
<tr>
<td><strong>Creditors: amounts falling due within one year</strong></td>
<td>13</td>
<td>369,908</td>
<td>298,389</td>
</tr>
<tr>
<td><strong>Net current assets</strong></td>
<td></td>
<td>697,589</td>
<td>1,166,313</td>
</tr>
<tr>
<td><strong>Creditors: amounts falling due after more than one year</strong></td>
<td>13</td>
<td>188,000</td>
<td>139,361</td>
</tr>
<tr>
<td><strong>Net assets</strong></td>
<td>15</td>
<td>8,357,885</td>
<td>8,722,855</td>
</tr>
<tr>
<td><strong>Restricted Funds:</strong></td>
<td></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Unrestricted Funds:</strong></td>
<td>16</td>
<td>1,862,885</td>
<td>7,361,855</td>
</tr>
<tr>
<td>General fund</td>
<td></td>
<td>6,495,000</td>
<td>1,361,000</td>
</tr>
<tr>
<td><strong>Total funds</strong></td>
<td>16</td>
<td>8,357,885</td>
<td>8,722,855</td>
</tr>
</tbody>
</table>

Approved by the Board on 12 September 2018 and signed on its behalf by:

Richard Cunningham
Trustee

The notes on pages 23 to 32 form part of these financial statements.
Statement of cash flows
for the year ended 31 March 2018

<table>
<thead>
<tr>
<th>Year</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
</tbody>
</table>

Cash flows from operating activities:

Net cash used in operating activities  
(302,048)  
(207,253)

Cash flows from investing activities:

<table>
<thead>
<tr>
<th>Description</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interest and dividends from investments</td>
<td>304,890</td>
<td>143,496</td>
</tr>
<tr>
<td>Interest on bank deposit accounts</td>
<td>1,362</td>
<td>2,697</td>
</tr>
<tr>
<td>Fixed asset additions</td>
<td>(8,947)</td>
<td>(7,143)</td>
</tr>
<tr>
<td>Proceeds on sale of investments</td>
<td>1,482,764</td>
<td>1,541,783</td>
</tr>
<tr>
<td>Additions to investment portfolio</td>
<td>(1,871,913)</td>
<td>(1,696,685)</td>
</tr>
</tbody>
</table>

Net cash (used in) investing activities  
(91,844)  
(15,852)

Change in cash and cash equivalents in the reporting period  
(393,892)  
(223,105)

Cash and cash equivalents at the beginning of the reporting period  
1,030,273  
1,253,378

Cash and cash equivalents at the end of the reporting period  
636,381  
1,030,273

Reconciliation of net (expenditure) / income to net cash flow from operation activities

<table>
<thead>
<tr>
<th>Description</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Deficit) / surplus after other recognised gains and losses</td>
<td>(364,970)</td>
<td>1,071,169</td>
</tr>
<tr>
<td>Net investment losses / (gains)</td>
<td>228,255</td>
<td>(875,423)</td>
</tr>
<tr>
<td>Depreciation of tangible fixed assets</td>
<td>17,448</td>
<td>14,930</td>
</tr>
<tr>
<td>Decrease / (increase) in debtors</td>
<td>3,313</td>
<td>(230,406)</td>
</tr>
<tr>
<td>Increase / (decrease) in creditors</td>
<td>120,158</td>
<td>(41,330)</td>
</tr>
<tr>
<td>Investment income</td>
<td>(306,252)</td>
<td>(146,193)</td>
</tr>
</tbody>
</table>

Cash flow from operating activities  
(302,048)  
(207,253)

Analysis of cash and cash equivalents

<table>
<thead>
<tr>
<th>Description</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash in hand</td>
<td>435,024</td>
<td>714,571</td>
</tr>
<tr>
<td>Short term deposits</td>
<td>201,357</td>
<td>315,702</td>
</tr>
</tbody>
</table>

Total cash and cash equivalents  
636,381  
1,030,273

The notes on pages 23 to 32 form part of these financial statements.
1. Accounting policies

The principal accounting policies adopted by the Society are as detailed below:

a) **Basis of preparation**

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant note(s) to these financial statements. The financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015) (Charities SORP (FRS 102)), and the Charities Act 2011.

Healthcare Infection Society meets the definition of a public benefit entity as defined by FRS102.

The trustees consider that there are no material uncertainties about the Society’s ability to continue as a going concern. There are no significant areas of judgement or key assumptions that affect items in the financial statements other than those included within the accounting policies described below. With respect to the next reporting period for the year ended 31 March 2018, the most significant areas of uncertainty that affect the carrying value of assets held by the Society are the level of investment return and the performance of the investment markets (see the investment policy and performance and risk management sections of the Report of the Trustees’ for more information).

b) **Income recognition**

All income is recognised once the charity has entitlement to the income, it is probable and that the income will be received and that the amount of income receivable can be measured reliably.

Voluntary income including donations, investment income and income from charitable activities including subscriptions, journal and conference income are shown in the financial statements on a receivable basis. Grant income is not recognised in the statement of financial activities until the conditions for receipt have been fulfilled and it is probable that the grant will be received.

c) **Expenditure recognition**

Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that settlement will be required and the amount of the obligation can be measured reliably.

Expenditure is recognised on an accruals basis, that is, in the period in which the liability is incurred. Support costs are those costs attributable to a specific activity and are allocated to the Statement of Financial Activities on the basis of staff time spent on each area of activity.

Costs of raising funds comprise investment managers’ fees.

Charitable activities expenditure includes services supplied identifiable as wholly or mainly in support of the Society’s objectives and includes grants payable.

Governance costs are those costs relating to compliance with constitutional and statutory requirements.

d) **Grants payable**

Grants are made to institutions and individuals for training, research and travel and are charged to the Statement of Financial Activities when authorised by the Board of Trustees and communicated to the recipient. The provision for a multi-year grant is recognised at its transaction value and is not discounted, given that discounting is not material.
1. Accounting policies (continued)

e) Investments
Investments are a form of basic financial instrument and are initially recognised at their transaction value and subsequently measured at their fair value as at the Balance Sheet date using the closing quoted market price. The Statement of Financial Activities includes the net gains and losses arising on the revaluation and disposals throughout the year.

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

The main form of financial risk faced by the Society is that of volatility in equity markets and investment markets due to wider economic conditions, the attitude of investors to investment risk and changes in sentiment concerning equities and within particular sectors or sub-sectors.

f) Gains/losses on investment assets
All gains and losses are taken to the Statement of Financial Activities as they arise.

Unrealised gains and losses on investment assets represent the difference between their fair value at the end of the year and their fair value at the beginning of the year, or transaction value if acquired during the year.

Realised gains and losses on disposal of investment assets represent the difference between the sale proceeds and the fair value at the beginning of the year, or transaction value if acquired during the year.

g) Foreign currencies
Monetary assets and liabilities denominated in foreign currencies are translated at the rate of exchange ruling at the Balance Sheet date. Transactions in foreign currencies are recorded at the rate ruling at the date of the transaction. All differences are taken to the Statement of Financial Activities.

h) Liquid resources
Liquid resources comprise sums on short term deposit with recognised United Kingdom banks.

i) Irrecoverable value added tax
Irrecoverable value added tax on purchases and expenses is charged as an expense.

j) Fixed assets
Tangible fixed assets are stated at cost less accumulated depreciation.

Depreciation is charged so as to write off the full cost less residual value over the economic life of the asset at the following annual rates:

- Land and buildings: 2% straight line
- Computer equipment: 33% straight line
- Fixtures and fittings: 15% straight line

k) Fund accounting
General funds are unrestricted funds used for furthering the objects of the Society.

Designated funds are unrestricted funds which have been set aside by the Trustees at their discretion for specific purposes as shown in Note 16.

l) Operating leases
Rentals payable under operating leases, where substantially all the risks and rewards of ownership remain with the lessor, are charged to the Statement of Financial Activities on a straight line basis over the lease duration. Contingent rentals arising under operating leases are recognised as an expense in the period in which they are incurred.
2. **Education income**
   Conference and course income
   - DIPC Development Programme 4,920
   - Trainee Education Programme 200
   - Engineering Aspects 34,250
   - Foundation Course 21,720
   **Total** 61,090

3. **Communication income**
   Income from Society journal 526,161 720,593

4. **Investment income**
   Interest and dividends from investments 304,890 143,496
   Interest on cash deposits 1,362 2,697
   **Total** 306,252 146,193

5. **Expenditure on charitable activities**
   (a) **Awards and grants**
      - Training and research grants (see note 8) 224,609 224,627
      - Travel grants 1,422 22,944
      - Bursaries - -
      - Wages and salaries 53,364 24,912
      - Support costs 40,655 46,943
      **Total** 320,050 319,426
   (b) **Education**
      - Educational courses and events 94,062 80,074
      - Other direct education expenditure 929 553
      - Wages and salaries 32,325 31,139
      - Support costs 25,206 58,679
      **Total** 152,522 170,445
   (c) **Communication**
      - Direct journal expenditure 32,450 45,216
      - Conferences 37,828 49,231
      - Wages and salaries 223,584 66,803
      - Support costs 185,931 58,679
      **Total** 479,793 219,929
(d) **Support costs**

Support costs are allocated on the basis of staff time and comprise the following:

<table>
<thead>
<tr>
<th>Cost Category</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Repairs and premises costs</td>
<td>10,607</td>
<td>12,595</td>
</tr>
<tr>
<td>Bank charges</td>
<td>1,960</td>
<td>1,318</td>
</tr>
<tr>
<td>Depreciation</td>
<td>17,448</td>
<td>14,930</td>
</tr>
<tr>
<td>Office, accountancy, legal and administrative expenses</td>
<td>135,007</td>
<td>152,881</td>
</tr>
<tr>
<td>Governance costs (see (e) below)</td>
<td>106,014</td>
<td>52,992</td>
</tr>
<tr>
<td><strong>Total Support costs</strong></td>
<td>271,036</td>
<td>234,716</td>
</tr>
</tbody>
</table>

(e) **Governance costs**

<table>
<thead>
<tr>
<th>Cost Category</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Council expenditure</td>
<td>93,764</td>
<td>42,992</td>
</tr>
<tr>
<td>Audit</td>
<td>12,250</td>
<td>10,000</td>
</tr>
<tr>
<td><strong>Total Governance costs</strong></td>
<td>106,014</td>
<td>52,992</td>
</tr>
</tbody>
</table>

6. **Other charitable activities**

<table>
<thead>
<tr>
<th>Activity</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Working parties expenditure</td>
<td>17,702</td>
<td>899</td>
</tr>
<tr>
<td>Wages and salaries</td>
<td>40,595</td>
<td>37,367</td>
</tr>
<tr>
<td>Support costs</td>
<td>19,244</td>
<td>70,415</td>
</tr>
<tr>
<td><strong>Total Other charitable activities</strong></td>
<td>77,541</td>
<td>108,681</td>
</tr>
</tbody>
</table>

7. **Net investment gains / (losses)**

<table>
<thead>
<tr>
<th>Category</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Realised</td>
<td>260,490</td>
<td>60,337</td>
</tr>
<tr>
<td>Unrealised</td>
<td>(488,745)</td>
<td>815,086</td>
</tr>
<tr>
<td><strong>Total net investment gains / (losses)</strong></td>
<td>(228,255)</td>
<td>875,423</td>
</tr>
</tbody>
</table>

8. **Grants awarded**

<table>
<thead>
<tr>
<th>Recipient</th>
<th>Type</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Caroline Chilton</td>
<td>Research</td>
<td>138,768</td>
</tr>
<tr>
<td>Professor Jean-Yves Maillard</td>
<td>Research</td>
<td>9,951</td>
</tr>
<tr>
<td>Dr Matthew Scarborough</td>
<td>Research</td>
<td>10,000</td>
</tr>
<tr>
<td>Dr Shanom Ali</td>
<td>Research</td>
<td>10,000</td>
</tr>
<tr>
<td>Dr Emma Wiley</td>
<td>Research</td>
<td>65,600</td>
</tr>
<tr>
<td>Dr George Trafford</td>
<td>Research</td>
<td>7,200</td>
</tr>
<tr>
<td>Dr Nicola Irwin</td>
<td>Research</td>
<td>95,488</td>
</tr>
<tr>
<td>Dr Ginny Moore</td>
<td>Research</td>
<td>32,985</td>
</tr>
<tr>
<td>Dr Beatrice Jimenez</td>
<td>Research</td>
<td>10,000</td>
</tr>
<tr>
<td>Dr Katie Hardy</td>
<td>Research</td>
<td>9,760</td>
</tr>
<tr>
<td>Dr Emma Wiley (additional funding)</td>
<td>Research</td>
<td>3,625</td>
</tr>
<tr>
<td>Dr Bozena Poller</td>
<td>Research</td>
<td>63,000</td>
</tr>
<tr>
<td>Dr Cristina Suraz</td>
<td>Research</td>
<td>9,751</td>
</tr>
<tr>
<td>Unclaimed grants and other adjustments</td>
<td>Research</td>
<td>(16,892)</td>
</tr>
<tr>
<td><strong>Total grants awarded</strong></td>
<td></td>
<td>224,609</td>
</tr>
</tbody>
</table>

**Notes to the financial statements for the year ended 31 March 2018**
9. **Employees’ remuneration**

The average number of persons employed by the charity during the year for the purpose of charitable activities was 5 (2017: 4).

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wages and salaries</td>
<td>236,712</td>
<td>142,074</td>
</tr>
<tr>
<td>Redundancy and termination</td>
<td>39,823</td>
<td>30,000</td>
</tr>
<tr>
<td>Employer pension contributions</td>
<td>8,422</td>
<td>6,039</td>
</tr>
<tr>
<td>Social security</td>
<td>24,444</td>
<td>12,109</td>
</tr>
<tr>
<td><strong>Aggregate payroll costs</strong></td>
<td><strong>309,401</strong></td>
<td><strong>190,222</strong></td>
</tr>
</tbody>
</table>

One employee received total employee benefits (excluding pension contributions) of more than £60,000 in the year under review (2017: £nil).

The number of employees receiving salaries within the following bands:

<table>
<thead>
<tr>
<th>Salary Band</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>£60,001 to £70,000</td>
<td>1</td>
<td>-</td>
</tr>
</tbody>
</table>

The Society considers its key management personnel comprises the Chief Executive Officer, Kay Miller, and the Trustees. Kay Miller received salary and pension contributions within this period of £69,550.

No trustee received any remuneration or other employee benefits for their role as trustee during the year. However, the employers of the trustees have invoiced the charity for additional services performed as follows:

- Dr Elisabeth Ridgway became Chair of the Society in November 2015. Payments due during the year to her employer, Sheffield Teaching Hospitals NHS Trust, amounted to £16,587 (2017: £14,712).

- Dr Peter Jenks became Secretary of the Society in November 2015. Payment due during the year to his employer, Plymouth Hospitals NHS Trust, amounted to £18,687. In addition to this, payments were made during the year relating to prior year periods for 2017: £18,502 and 2016: £6,474.

- Dr Alaric Colville completed his term of office as Treasurer of the Society in December 2017. Payments due during the year to his employer, Royal Devon and Exeter NHS Foundation, amounted to £8,981 (2017: £15,396).

- Dr Richard Cunningham became Treasurer of the Society in December 2017. Payment due during the year to his employer, Plymouth Hospitals NHS Trust, amounted to £7,500. (2017: £nil).

- Dr Jim Gray has been the Society’s journal editor since February 2015. During the year payments due for his services amounted to £10,400 (2017: £10,400).
## 10. Tangible fixed assets

<table>
<thead>
<tr>
<th></th>
<th>Fixtures and fittings</th>
<th>Computer equipment</th>
<th>Freehold land and buildings</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cost:</strong></td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>At 1 April 2017</td>
<td>15,354</td>
<td>9,402</td>
<td>412,153</td>
<td>436,909</td>
</tr>
<tr>
<td>Additions</td>
<td>2,533</td>
<td>6,414</td>
<td>-</td>
<td>8,947</td>
</tr>
<tr>
<td>Disposals</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>At 31 March 2018</strong></td>
<td>17,887</td>
<td>15,816</td>
<td>412,153</td>
<td>445,856</td>
</tr>
</tbody>
</table>

### Depreciation:

<table>
<thead>
<tr>
<th></th>
<th>£</th>
<th>£</th>
<th>£</th>
<th>£</th>
</tr>
</thead>
<tbody>
<tr>
<td>At 1 April 2017</td>
<td>4,469</td>
<td>7,048</td>
<td>28,627</td>
<td>40,144</td>
</tr>
<tr>
<td>Provision in year</td>
<td>2,683</td>
<td>3,314</td>
<td>11,451</td>
<td>17,448</td>
</tr>
<tr>
<td>Disposals</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>At 31 March 2018</strong></td>
<td>7,152</td>
<td>10,362</td>
<td>40,078</td>
<td>57,592</td>
</tr>
</tbody>
</table>

### Net book value

<table>
<thead>
<tr>
<th></th>
<th>£</th>
<th>£</th>
<th>£</th>
<th>£</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>At 31 March 2018</strong></td>
<td>10,735</td>
<td>5,454</td>
<td>372,075</td>
<td>388,264</td>
</tr>
<tr>
<td><strong>At 31 March 2017</strong></td>
<td>10,885</td>
<td>2,354</td>
<td>383,526</td>
<td>396,765</td>
</tr>
</tbody>
</table>
11. **Quoted investments**

At 1 April 2017 7,299,138 6,268,813
Additions 1,871,913 1,696,685
Disposals at market value (1,482,764) (1,541,783)
(Losses) / gains in the period (228,255) 875,423

**Market value as at 31 March 2018**

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Historic cost</td>
<td>5,993,581</td>
<td>5,343,946</td>
</tr>
</tbody>
</table>

**Quoted investments analysis:**

<table>
<thead>
<tr>
<th>Investment Type</th>
<th>2018 Cost</th>
<th>2018 Market Value</th>
<th>2017 Cost</th>
<th>2017 Market Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>UK fixed interest securities</td>
<td>1,074,751</td>
<td>1,160,315</td>
<td>925,492</td>
<td>1,024,298</td>
</tr>
<tr>
<td>Equity UK</td>
<td>2,313,640</td>
<td>2,837,524</td>
<td>1,674,950</td>
<td>2,488,659</td>
</tr>
<tr>
<td>Equity overseas</td>
<td>2,002,381</td>
<td>2,806,180</td>
<td>1,863,925</td>
<td>2,507,366</td>
</tr>
<tr>
<td>Overseas unit trusts</td>
<td>493,139</td>
<td>519,078</td>
<td>769,909</td>
<td>1,124,657</td>
</tr>
<tr>
<td>Overseas fixed interest</td>
<td>109,670</td>
<td>136,935</td>
<td>109,670</td>
<td>154,158</td>
</tr>
</tbody>
</table>

**Market value as at 31 March 2018**

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Historic cost</td>
<td>5,993,581</td>
<td>5,343,946</td>
</tr>
</tbody>
</table>

All investments are carried at their fair value. Investments in bonds, equities, property and alternative investments are all traded in quoted public markets, primarily the London Stock Exchange. The basis of fair value for quoted investments is equivalent to the market value, using mid-market price. Asset sales and purchases are recognised at the date of trade at cost (i.e. their transaction value).

The significance of financial instruments to the ongoing financial sustainability of the Society is considered in the financial review and investment policy and performance sections of the Trustees’ Report.

The main risk to the Society from financial instruments lies in the combination of uncertain investment markets and volatility in yield. The Society is reliant on dividend yield in part to finance its work and this leads to greater exposure to international companies, the values of which, together with their yield are exposed to exchange rate risk when converting the holdings into sterling.

The Society manages these investment risks by retaining expert advisers and operating an investment policy that provides for a high degree of diversification of holdings within investment asset classes that are quoted on recognised stock exchanges. The Society does not make use of derivatives and similar complex financial instruments as it takes the view that investments are held for their longer term yield total return.
12. **Debtors**

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade debtors</td>
<td>195,783</td>
<td>267,338</td>
</tr>
<tr>
<td>Other debtors</td>
<td>59,311</td>
<td>17,524</td>
</tr>
<tr>
<td>Prepayments and accrued income</td>
<td>176,022</td>
<td>149,567</td>
</tr>
<tr>
<td></td>
<td><strong>431,116</strong></td>
<td><strong>434,429</strong></td>
</tr>
</tbody>
</table>

13. **Creditors – amounts falling due within one year**

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade creditors</td>
<td>26,471</td>
<td>38,113</td>
</tr>
<tr>
<td>Accruals</td>
<td>72,031</td>
<td>27,456</td>
</tr>
<tr>
<td>Grants</td>
<td>184,653</td>
<td>162,246</td>
</tr>
<tr>
<td>Taxes and social security</td>
<td>30,720</td>
<td>33,802</td>
</tr>
<tr>
<td>Deferred income</td>
<td>54,280</td>
<td>36,641</td>
</tr>
<tr>
<td>Other creditors</td>
<td>1,753</td>
<td>131</td>
</tr>
<tr>
<td></td>
<td><strong>369,908</strong></td>
<td><strong>298,389</strong></td>
</tr>
</tbody>
</table>

Creditors – amounts falling due after more than one year relate to grants payable of £188,000 (2017: £139,361)

**Reconciliation of deferred income**

<table>
<thead>
<tr>
<th></th>
<th>£</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance as at 1 April 2017</td>
<td>36,641</td>
</tr>
<tr>
<td>Amounts released to income earned from charitable activities</td>
<td>(36,641)</td>
</tr>
<tr>
<td>Amounts deferred in the year</td>
<td>54,280</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Balance as at 31 March 2018</strong></td>
<td><strong>54,280</strong></td>
</tr>
</tbody>
</table>

14. **Operating lease arrangements**

At the balance sheet date, the Society had outstanding commitments for future minimum lease payments under non-cancellable operating leases in respect of office equipment, which fall due as follows:

<table>
<thead>
<tr>
<th>For leases expiring:</th>
<th>Within one year</th>
<th>Between two and five years</th>
<th>Over 5 years</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1,490</td>
<td>5,592</td>
<td>167</td>
</tr>
<tr>
<td></td>
<td>1,329</td>
<td>6,916</td>
<td>167</td>
</tr>
<tr>
<td></td>
<td><strong>7,082</strong></td>
<td><strong>8,412</strong></td>
<td></td>
</tr>
</tbody>
</table>

15. **Analysis of net assets between funds**

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Restricted</th>
<th>Total funds</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Tangible fixed assets</td>
<td>388,264</td>
<td>-</td>
<td>388,264</td>
</tr>
<tr>
<td>Investments</td>
<td>7,460,032</td>
<td>-</td>
<td>7,460,032</td>
</tr>
<tr>
<td>Debtors</td>
<td>431,116</td>
<td>-</td>
<td>431,116</td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td>435,024</td>
<td>-</td>
<td>435,024</td>
</tr>
<tr>
<td>Short term deposits</td>
<td>201,357</td>
<td>-</td>
<td>201,357</td>
</tr>
<tr>
<td>Creditors falling due within one year</td>
<td>(369,908)</td>
<td>-</td>
<td>(369,908)</td>
</tr>
<tr>
<td>Creditors falling due more than one year</td>
<td>(188,000)</td>
<td>-</td>
<td>(188,000)</td>
</tr>
<tr>
<td><strong>Net assets at 31 March 2018</strong></td>
<td><strong>8,357,885</strong></td>
<td>-</td>
<td><strong>8,357,885</strong></td>
</tr>
</tbody>
</table>
16. Funds

<table>
<thead>
<tr>
<th></th>
<th>1 April 2017</th>
<th>Income £</th>
<th>Expenditure £</th>
<th>Gains/losses £</th>
<th>Transfers £</th>
<th>31 March 2018 £</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unrestricted Funds</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General</td>
<td>7,361,855</td>
<td>930,650</td>
<td>(722,190)</td>
<td>(228,255)</td>
<td>(5,479,175)</td>
<td>1,862,885</td>
</tr>
<tr>
<td><strong>Designated Funds</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants Reserve</td>
<td>534,000</td>
<td></td>
<td>(226,030)</td>
<td>-</td>
<td>1,145,030</td>
<td>1,453,000</td>
</tr>
<tr>
<td>HIS Conference</td>
<td>50,000</td>
<td></td>
<td>-</td>
<td>-</td>
<td>50,000</td>
<td></td>
</tr>
<tr>
<td>Other Society Activities</td>
<td>-</td>
<td></td>
<td>-</td>
<td>-</td>
<td>333,000</td>
<td>333,000</td>
</tr>
<tr>
<td>Tangible Fixed Assets</td>
<td>397,000</td>
<td></td>
<td>(17,448)</td>
<td>-</td>
<td>8,448</td>
<td>388,000</td>
</tr>
<tr>
<td>JHI Contingency</td>
<td>200,000</td>
<td></td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>200,000</td>
</tr>
<tr>
<td>Relocation</td>
<td>-</td>
<td></td>
<td>-</td>
<td>4,000,000</td>
<td>-</td>
<td>4,000,000</td>
</tr>
<tr>
<td>Website and CRM</td>
<td>50,000</td>
<td></td>
<td>(3,877)</td>
<td>-</td>
<td>18,877</td>
<td>65,000</td>
</tr>
<tr>
<td>Branding</td>
<td>50,000</td>
<td></td>
<td>(47,295)</td>
<td>-</td>
<td>3,295</td>
<td>6,000</td>
</tr>
<tr>
<td>Staffing</td>
<td>50,000</td>
<td></td>
<td>(25,000)</td>
<td>-</td>
<td>(25,000)</td>
<td>-</td>
</tr>
<tr>
<td>Working parties</td>
<td>30,000</td>
<td></td>
<td>(25,525)</td>
<td>-</td>
<td>(4,475)</td>
<td>-</td>
</tr>
<tr>
<td>Total designated funds</td>
<td>1,361,000</td>
<td></td>
<td>(345,175)</td>
<td>-</td>
<td>5,479,175</td>
<td>6,495,000</td>
</tr>
<tr>
<td><strong>Restricted Funds</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total funds</strong></td>
<td>8,722,855</td>
<td>930,650</td>
<td>(1,067,365)</td>
<td>(228,255)</td>
<td>-</td>
<td>8,357,885</td>
</tr>
</tbody>
</table>

The designated funds are set up for the following purposes:

**Grants Reserve:** Represents the balance of grants awarded with stage payments yet to be paid, together with planned awards for the next financial year to ensure the continued funding of Research and other Grants for the forthcoming financial year.

**HIS Conference Fund:** Represents the value at risk from the biennial HIS Conference, and ringfences sufficient funds to meet liabilities accrued over each two year period.

**Other Society Activities:** Represents the value required to protect and enable the ongoing funding of Society Activities for the next financial year, with the exception of the grants and conferences for which funds have been designated separately.

**Tangible Fixed Assets Fund:** Represents the value invested in headquarters and other fixed assets to enable the ongoing operations and activities of the Society, as identified in note 10.

**JHI Contingency Fund:** To recognise the risk of diminishing publishing revenues, to provide a fund for the development of and investment in other revenue generating activities over a 3 to 5 year period as determined within the Society strategy.

**Relocation Fund:** Represents the anticipated net fund requirement for investment in premises suitable both for HIS headquarters and as an investment for the generation of income. This provides sufficient funding to enable to Society to procure appropriate premises and to relocate within the next 12 to 18 months.

**Website and CRM Fund:** For the 2018 implementation of integrated CRM and CMS systems enabling efficiency and security in the administration and management of the Society activities.

**Branding:** To fund the 2018 update and relaunch of the Society branding and its relevance within the sector.
16. Funds (continued)

**Staffing fund:** To provide for potential unplanned staff costs. There is no longer a requirement for this fund as at 31 March 2018.

**Working parties:** This fund was created to ensure funding for working party activities, and has been incorporated within the Other Society Activities Fund.

The undesignated funds are used for the regular Society activities, and the day to day running and maintenance of its headquarter premises.

Transfers between the unrestricted and designated funds during the year represent the changing requirement for funds in line with Society strategy and operations as agreed by the trustees.

17. Related Party transactions

There were no related party transactions during the year.

18. Trustees

The trustees received no remuneration for their role as trustees and were reimbursed expenses incurred in respect of travel and subsistence of 2018: £11,835 to 12 trustees (2017: £10,245 to 9 trustees).
Reference and administrative information

Registered name: Healthcare Infection Society
Registered number: 1158172
Registered office address: 62 King’s Cross Road
London
WC1X 9DH

<table>
<thead>
<tr>
<th>Names of Council members</th>
<th>Appointment</th>
<th>Appointed</th>
<th>Term of office completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professor Gary French</td>
<td>President</td>
<td>November 2014</td>
<td>Current</td>
</tr>
<tr>
<td>Dr Elisabeth Ridgway</td>
<td>Chair</td>
<td>November 2015</td>
<td>Current</td>
</tr>
<tr>
<td>Dr Peter Jenks</td>
<td>Secretary</td>
<td>November 2015</td>
<td>Current</td>
</tr>
<tr>
<td>Dr Alaric Colville</td>
<td>Treasurer</td>
<td>November 2014</td>
<td>December 2017</td>
</tr>
<tr>
<td>Dr Richard Cunningham</td>
<td>Treasurer</td>
<td>December 2017</td>
<td>Current</td>
</tr>
<tr>
<td>Dr Emma Boldock</td>
<td>Ordinary Council Member</td>
<td>November 2016</td>
<td>Current</td>
</tr>
<tr>
<td>Dr Michael Cooper</td>
<td>Chair: Education Committee</td>
<td>November 2015</td>
<td>October 2017</td>
</tr>
<tr>
<td>Dr David Enoch</td>
<td>Ordinary Council Member</td>
<td>April 2016</td>
<td>Current</td>
</tr>
<tr>
<td>Dr Mark Garvey</td>
<td>Ordinary Council Member</td>
<td>November 2014</td>
<td>December 2017</td>
</tr>
<tr>
<td>Dr Mark Garvey **</td>
<td>Chair: Education Committee</td>
<td>February 2018</td>
<td>Current</td>
</tr>
<tr>
<td>Dr Simon Goldenberg</td>
<td>Ordinary Council Member</td>
<td>November 2014</td>
<td>December 2017</td>
</tr>
<tr>
<td>Dr James Gray</td>
<td>Editor-in-Chief</td>
<td>February 2015</td>
<td>Current</td>
</tr>
<tr>
<td>Claire Haill **</td>
<td>Co-opted Infection Control Nurse</td>
<td>March 2018</td>
<td>Current</td>
</tr>
<tr>
<td>Dr David Jenkins</td>
<td>Ordinary Council Member</td>
<td>December 2017</td>
<td>Current</td>
</tr>
<tr>
<td>Dr Manjula Meda</td>
<td>Ordinary Council Member</td>
<td>November 2015</td>
<td>Current</td>
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<tr>
<td>Dr William Newsholme **</td>
<td>Grants Secretary</td>
<td>November 2012</td>
<td>December 2017</td>
</tr>
<tr>
<td>Ms Andrea Parsons</td>
<td>Lay Trustee</td>
<td>February 2018</td>
<td>Current</td>
</tr>
<tr>
<td>Dr James Price **</td>
<td>Chair: Trainee Committee</td>
<td>November 2016</td>
<td>Current</td>
</tr>
<tr>
<td>Dr Chris Settle</td>
<td>Ordinary Council Member</td>
<td>November 2013</td>
<td>Current</td>
</tr>
<tr>
<td>Mrs Karren Staniforth</td>
<td>Ordinary Council Member</td>
<td>December 2017</td>
<td>Current</td>
</tr>
<tr>
<td>Dr Gemma Wheldon</td>
<td>Ordinary Council Member</td>
<td>February 2018</td>
<td>Current</td>
</tr>
<tr>
<td>Professor Peter Wilson **</td>
<td>Chair: Scientific Development Committee</td>
<td>November 2013</td>
<td>Current</td>
</tr>
</tbody>
</table>

** co-opted members of the Council

All Council members are trustees. There are additional members co-opted onto the Council on a discretionary basis as per clause 4(14) of the Constitution. Co-opted Council members are not Trustees and may not vote at Council meetings, but they provide valuable additional expertise from across the healthcare professions.

Chief Executive Officer: Dr Kay Miller
Bank:
Barclays Plc
PO Box 12820
1250 High Road
Whetstone
London
N20 0WE

Auditor:
Moore Stephens LLP
150 Aldersgate Street
London
EC1A 4AB

Investment Fund Manager:
Rathbones
1 Curzon Street
London
W1J 5FB

Solicitors:
Radcliffes Le Brasseur
5 Great College Street
London
SW1P 3SJ

Human Resources and Health and Safety Advisors:
Peninsula Business Services Ltd.
Riverside
New Bailey Street
Manchester
M3 5FS
Inspiring and supporting
generations of healthcare infection professionals
through training, education and collaboration

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