

British Society of Gastroenterology

Annual Report and Financial Statements

31 December 2018

Charity Registration Number 1149074

Company Limited by Guarantee

Registration Number 08124892 (England & Wales)

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

Trustees	Professor C Baden-Fuller (resigned 5 June 2018) Mr C Bromfield (resigned 5 June 2018) Mrs S A Dutton Dr J Eaden (resigned June 2017) Dr C Edwards (appointed 15 May 2018) Dr A Emmanuel (appointed 14 December 2018) Ms J Flitcroft (appointed 5 June 2018) Professor W S Gleave (appointed 15 May 2018) Mr N Hoile Mr C Kavanagh (appointed 5 June 2018) Professor M Hull (appointed 5 June 2018) Dr S Hughes (resigned 15 May 2018) Mr R P Lanyon Mr D Loft (resigned 2 July 2018) Dr R Logan (appointed 12 May 2018) Professor M Lombard (resigned 7 June 2018) Dr A McKinlay (appointed 1 June 2018) Professor C S J Probert (resigned 11 June 2018) Dr N Thompson (appointed 5 June 2018) Dr G Webster (appointed 5 June 2018)
Chief Executive	Mr M Hacker
Executive Secretary	Mr J D Hayward (resigned June 2018)
Registered/Principal office	3 St Andrews Place Regent's Park London NW1 4LB
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website	www.bsg.org.uk
Charity registration number	1149074
Company registration number	08124892 (England and Wales)

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

Auditor	Buzzacott LLP 130 Wood Street London EC2V 6DL
Solicitors	Druces LLP Salisbury House London Wall London EC2M 5PS
Bankers	National Westminster Bank Plc PO Box 2021 10 Marylebone High Street London W1A 2AS
Investment managers	Investec 2 Gresham Street London EC2V 7QP

The trustees are pleased to present their annual report with the financial statements of the British Society of Gastroenterology (the 'Society' or BSG) and its subsidiary companies BSG Limited and DDF Conference Limited (together the 'Group' or 'consolidated') for the year ended 31 December 2018.

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

The financial statements have been prepared in accordance with the accounting policies set out on pages 25 to 29 of the attached financial statements and comply with the charitable company's Memorandum and Articles of Association, applicable laws and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102).

Governance, structure and management

The British Society of Gastroenterology is a charitable company limited by guarantee (Company Number 08124892 (England and Wales), Charity Number 1149074). The Memorandum and Articles of Association is BSG's governing document.

The charity controls the subsidiary entity, BSG Limited (Company Number 3021266 (England and Wales)). The subsidiary entity DDF Conference Limited (Company Number 07542232 (England and Wales)) has been wound up and was struck off the Company house register on 2 April 2019.

Trustees

Governance is overseen by a Board of Trustees who have responsibility for the identification and management of risks to the Society. The Board of Trustees consists of six independent trustees, two elected members of Council and five Society officers. It is chaired by the BSG President. The trustees who served in the year are listed on page 1.

No trustee received any remuneration for services as a member of the Council. Twelve trustees were reimbursed expenses totalling £16,642 (2017 - Ten trustees received expenses totalling £19,341). All expenses were incurred on Society business. No trustee had any beneficial interest in any contract with the Society whilst serving on the Board.

New trustees receive an induction pack. This includes the BSG's Memorandum and Articles, last audited annual report and financial statements, Charity Commission guidance on the responsibilities of charity trustees, and a copy of *the Good Trustee Guide*, published by the National Council of Voluntary Organisations, for their reference. Trustees are also required to attend training sessions on various topics relevant to trustees' duties and responsibilities.

Governance, structure and management (continued)

Risk management

The trustees of the Society have overall responsibility for risk management within the Society. An investment sub-committee (consisting of the BSG Treasurer as Chair, two of the Society's independent trustees, the President and the Chief Executive) reviews the financial activities of the Society including investment decisions in order to mitigate the risk of loss of income. This Committee reports to the trustees at each meeting. The trustees also annually review the Society's formal risk register, implementing mitigation strategies where required.

Key risks identified by the Society are as follows:

- ♦ **Premises** - The Society currently enjoys a favourable lease on its office space, but there is no guarantee that the lease will be renewed on similar terms when it expires in December 2021, nor is it certain that the current office will still be suitable for the BSG's purposes by that date. This presents a risk, given the high cost of business premises in Central London. In order to minimise this risk, the Society is progressively increasing its designated property fund, with a target that the fund should contain at least 80% of the freehold price of a suitable premises by 2021. Since August 2017, the Society has been conducting a staged options appraisal exercise in order to prepare in good time for the eventuality of its leaving the current premises. The Society is continuously reassessing the balance required to facilitate a move in premises and are formulating a risk management approach to any new purchase of property. The Society has set aside resources in 2019 to continue this project with specialist guidance.
- ♦ **Failure of Annual Meeting** - The Annual Meeting is the main event in the BSG's calendar. As well as being a major source of revenue, it is key to maintaining and enhancing the reputation of the Society. The risk to the Society should the meeting be cancelled, go ahead without an optimal programme, fail to attract sufficient numbers or sufficient sponsorship, is therefore substantial. The Society minimises these risks principally by an assiduous planning process, led by both staff and appointed officers at the most senior level and project managed by our professional conference organisers, Conference Partners International. The Society also keeps, as part of its free reserves, the sum of £1,000,000 to cover the expenses which would occur should a meeting fail to go ahead or fail to meet the desired expectations of the Society.

Governance, structure and management (continued)

Risk management (continued)

- ◆ **UK IBD Registry** – The Society has since 2012 supported the operation of the UK Inflammatory Bowel Disease Registry (IBDR), a project that aims to support patients with IBD and their clinical teams. The IBDR is recognised as having potential to support major advances in patient care, service quality improvement and research in IBD, but it is both a financial and reputational risk to the Society should it not reach its stated goals. The Society has invested resources into setting up an independent company which now owns and runs the IBDR, IBD Registry Limited (see note 21). The Society is a partner to the new organisation, along with other interested charitable organisations, Crohn's and Colitis UK and the Royal College of Physicians of London. The transfer to a new organisation will enable the IBDR to fulfil its aims and develop its business model, while at the same time limiting the risk to the Society in the unlikely event of adverse financial or reputational events.
- ◆ **Data Protection** – The Society has maintained and implemented a strong data protection policy for many years. However, with the increasing public interest in the protection of personal data – particularly with reference to the charitable sector, along with the strengthening of law represented by the General Data Protection Regulation, the trustees have identified this as an area of increased risk, and designated additional resources to ensuring staff and officers are sufficiently trained and that administrative and management systems are structured to ensure compliance.

The Council

The professional activities of the Society are directed by a Council consisting of eleven officers and eight elected members. Four key committees, their chairs being members of Council, carry out the directions of Council and seek decisions from it in accordance with the regulations of the Society. The eight elected Council members are direct representatives of the membership. In addition, Council has eleven ex-officio members who represent organisations with similar interests in GI, relating to surgery for example. This is in accordance with the regulations – to encourage collaboration with all those who share the aim of promoting gastroenterology.

New Council members are welcomed officially by the President at their first meeting. Four of the elected members of Council are elected by Council to membership of the Clinical Services and Standards Committee (CSSC) and two to the Education Committee on which they serve until the end of their term of office on Council.

Governance, structure and management (continued)

The Council (continued)

The members of the Council of the BSG are as follows:

Members of Council

<i>Dr C Edwards</i>	<i>(President 2018-2020)</i>
<i>Dr A McKinlay</i>	<i>(President-elect 2018-2020)</i>
<i>Dr George Webster</i>	<i>(Vice-President Endoscopy 2017-2019)</i>
<i>Professor P Newsome</i>	<i>(Vice President Hepatology 2018-2021)</i>
<i>Dr A Emmanuel</i>	<i>(Treasurer 2019-2022)</i>
<i>Dr N Thompson</i>	<i>(Senior Secretary 2017-2019)</i>
<i>Dr S McPherson</i>	<i>(Secretary 2017-2019)</i>
<i>Dr T Tham</i>	<i>(Chair, CSSC 2018-2020)</i>
<i>Dr A Akbar</i>	<i>(Chair, Education Committee 2018-2021)</i>
<i>Professor Ramesh Arasaradnam</i>	<i>(Chair, Research Committee 2019-2022)</i>
<i>Dr B Oates</i>	<i>(Chair, Training Committee 2018-2020)</i>
<i>Professor D Sanders</i>	<i>(Elected member 2016-2019)</i>
<i>Dr A F Muller</i>	<i>(Elected member 2017-2020)</i>
<i>Dr P Neild</i>	<i>(Elected member 2016-2019)</i>
<i>Dr B Hawthorne</i>	<i>(Elected member 2018-2021)</i>
<i>Professor M Hull</i>	<i>(Elected member 2017-2020)</i>
<i>Professor Y Mahida</i>	<i>(Elected member 2016-2019)</i>
<i>Dr M Pritchard</i>	<i>(Elected member 2017-2020)</i>
<i>Dr R Logan</i>	<i>(Elected member 2016-2019)</i>
<i>Dr E Taylor</i>	<i>(Chair, Trainee Section 2018-2019)</i>
<i>Ms L Dwyer</i>	<i>(Chair, BSG Nurses Association 2017-2019)</i>

Ex-officio members

<i>Professor E El-Omar</i>	<i>(Editor, GUT)</i>
<i>Professor M Beattie</i>	<i>(Editor, Frontline Gastroenterology)</i>
<i>Professor C Hawkey</i>	<i>(Chair, Guts UK)</i>
<i>Mr Brendan Moran</i>	<i>(ACPGBI)</i>
<i>Professor G Toogood</i>	<i>(AUGIS)</i>
<i>Dr T Smith</i>	<i>(BAPEN)</i>
<i>Professor M Cramp</i>	<i>(BASL)</i>
<i>Dr Nick Croft</i>	<i>(BSPGHAN)</i>
<i>Dr K Barrett</i>	<i>(PCSG)</i>
<i>Dr A Hart</i>	<i>(PSGBI)</i>
<i>Dr I Gee</i>	<i>(Chair, SAC)</i>

The President serves two years, having previously served two years as President Elect. The Vice President (Endoscopy) and The Vice President (Hepatology) also serve for three years. The Secretaries of the Society serve for two years as Secretary and two years as Senior Secretary. The Treasurer serves for three years. The Chairs of the Education, Research and Training Committees serve for three years. The Chair of the Clinical Services and Standards Committee serves for two years.

Governance, structure and management (continued)

The Council (continued)

The chairs of the four key committees are members of Council for their term of office. The policies of Council are carried out by the following key committees:

- ◆ Education and Programme Committee – responsible for the scientific and educational content of meetings held by the Society and for nominations for appropriate fellowships and awards. Also badging of external meetings.
- ◆ Clinical Services and Standards Committee – responsible for compiling and disseminating good practice in gastroenterology services.
- ◆ Research Committee – responsible for assisting in formulating policy on gastrointestinal research and the Society's research agenda.
- ◆ Training Committee – responsible for ensuring that the curriculum for training in gastroenterology is delivered uniformly throughout the UK.

The Society is represented at regional level by regional leads within the Clinical Services and Standards Committee who promote the clinical activities of the Society within each health service region. In addition, there are sections for the academic and professional advancement of particular specialist interests. These sections are: Endoscopy, Gastroduodenal, Inflammatory Bowel Disease, Liver, Neurogastroenterology/Motility, Oesophageal, Adolescent & Young Persons, Pancreatic, Pathology, Radiology, Small Bowel/Nutrition, Colorectal, Trainees, Nurses Association, Gastrointestinal Physiology Associates and Primary Care. Section representatives sit on the Clinical Services and Standards, Education and Programme and Research Committees.

Organisation

The Society is administered from an office in London, staffed by eight FTE employees. The Society also maintains a number of contracts for specialist professional services, including HR, accountancy and web development. The staff support the trustees, the activities of the Council and the key committees.

Key management personnel

In addition to the trustees, there were four key management positions within the Society's workforce: Chief Executive, Executive Secretary, Head of Research & Learning, and Head of Sections & Clinical Services. Remuneration for key management personnel is set by benchmarking exercise, which is carried out by the Society's external HR Consultants, Hanson-Chase Consulting Limited, and annual performance review, which is carried out by employees' line managers, or in the case of the Chief Executive, by the President and or President Elect. During 2018 there was a major change in Staff. The Executive Secretary and Head of Sections & Clinical Services both resigned in June 2018. The Chief Executive resigned in August and an external consultant was tasked with leading the operations. In June the HR consultants Buzzacott LLP were replaced with Hanson-Chase Consulting Limited. A permanent Chief Executive was appointed in January 2019 who is undertaking a reorganisation of the office.

Objectives, activities and relevant policies

Activities and specific objectives

The objectives of the Society are the promotion of good health by providing a high standard of patient care, clinical services, research and education in gastrointestinal and liver disease in the United Kingdom and internationally. These objectives shall be pursued by meetings and discussion and such other means as shall from time to time be agreed.

1. Education and Training (Annual Scientific Meeting, postgraduate training, clinical update meetings).
2. Supporting GI research (platform for new research at Annual Scientific Meeting, supporting the development of academic networks and the publication of the co-owned leading journals GUT and Frontline Gastroenterology).
3. Enhancing clinical practice standard and the production of Guidelines pertaining to best practice.
4. Supporting the GI community (membership, newsletter and public affairs).
5. Promoting awareness of Gastroenterology.

When considering the objectives and planning the work of the charity for the year, the trustees have given careful consideration to the Charity Commission's general guidance on public benefit.

Fundraising

The charity does not actively solicit donations and therefore is not registered with the Fundraising Regulator and does not subscribe to any fundraising codes of practice. On occasion, when donations from individuals are received, the charity aims to protect personal data and never sells data or swaps data with other organisations. During 2018, the charity received no complaints about fundraising activities.

Achievements and performance

Membership

In December 2018 the numbers in different membership categories were as follows:

	2018 No.	2017 No.
Honorary	117	120
Full	1,401	1,395
International	128	140
Trainee	634	579
Senior	98	106
Associate	765	786
Taster	319	239
	3,347	3,365

Achievements and performance (continued)

Membership (continued)

The trustees are pleased to note that the total number of members has remained stable over the period, though some variations in individual membership categories show a need to improve the membership benefits and value proposition on an ongoing basis. During 2017, the Society engaged an external consultant to review the membership offer and make recommendations for improvement. These were presented to a joint session of Council and trustees in February 2018. The Society has also invested in a new website and Customer Relationship Management system, which will enhance membership engagement through greater responsiveness and segmentation.

Review of activities in 2018 and plans for 2019

In relation to the Society's principal activities, the following paragraphs outline the main achievements during the year and the plans to develop them during the next.

Education and training

The BSG Annual Meeting took place in June 2018 in Liverpool. With 2,600 attendees (this included exhibitors and people attending for free), it was the highest attended Meeting in the Society's history. And the use of a different conference organiser resulted in a significantly higher net surplus for the event.

The Society is working towards delivering the 2019 BSG Annual Meeting, which will take place in Glasgow in June 2019. The programme includes 60 basic science and clinical symposia including state-of-the-art lectures, free paper sessions and clinical updates over four days.

Endoscopy Live, the biennial event took place in March 2019 in Gateshead. The event brought together the UK's leading specialists to deliver a mixture of live case demonstrations and state of the art talks, with satellite links to two of the UK's premier endoscopic centres, Freeman Hospital, Newcastle and University College Hospital, London.

The Trainees' Section has been active in producing valuable content and events for trainee gastroenterologists. Highlights of the year include the Management Weekend in Leamington Spa in March and the Education Weekend in Leeds in October. The Taster Course in Gastroenterology, now in its sixth year, continues to attract bright and ambitious young doctors who have not yet chosen their specialty, as well as promoting the introductory 'Taster' level of BSG membership, an important gateway to long term engagement with UK gastroenterological community.

Achievements and performance (continued)

Review of activities in 2018 and plans for 2019 (continued)

Education and training (continued)

The Society continues to support education overseas and in the devolved nations. The BSG also supports the educational efforts of United European Gastroenterology (UEG) and promotes their courses to BSG members, providing nominations or endorsements when requested.

The guidance for BSG support of education and training meetings has been publicised on the website and in e-newsletters. Requests for endorsement for a variety of meetings across the country are slightly down, with 21 meetings endorsed during 2018, compared to 24 in 2017.

Research

The Society's Research Strategy, presented at the 2018 BSG Annual Meeting, is a major step towards increasing the quantity of high-quality clinical gastrointestinal and hepatology research performed nationally. There are two principal aims for this strategy:

1. To align with the BSG's strategic objective to set "a collaborative and pioneering agenda and priorities in scientific and clinical research that will benefit patients and clinical practice nationally and internationally".
2. To redress the imbalance between research spend and activity compared with the burden of GI and liver disease in the UK.

Clinical Research Groups (CRGs)

The Society has four Clinical Research Groups, for Food & Function, Liver, IBD and Endoscopy. Three of these groups have been active during 2018. The Food & Function group has become active again during 2019 and there is also a proposal to set up a fifth group for Pancreas. Following the launch of the 2018 Research Strategy an agreed implementation plan is being actively managed.

Achievements and performance (continued)

Review of activities in 2018 and plans for 2019 (continued)

Enhancing service standards

The three pillars of the Clinical Services & Standards Committee (CSSC) are: service delivery, quality improvement and guidelines.

Service delivery

The BSG has 14 regional representatives representing 11 English regions as well as Scotland, Wales and Northern Ireland. They attend CSSC meetings and produce reports detailing the main issues in each region thereby giving a highly valuable insight into service issues. Our regional representatives are tasked to develop networks of clinical representatives in each hospital in their region with the aim of establishing links and regular forums so that information can be exchanged regarding what is happening locally, the dissemination of good practice, guidelines and quality improvement from our society and members. A series of endorsed BSG events around the country permits the Society to work through local Gut clubs and meetings to deliver against this charitable objective. We are planning a program of BSG Regional Events organised by our regional representatives to engage with the clinical workforce UK wide and commissioners or equivalent in the home nations. Objectives include sharing good practice, developing business cases together and opportunity for senior BSG officers to engage with the regions.

The annual CSSC survey is sent out to all gastroenterology units – this provides a snapshot of clinical services around the country on an annual basis to provide longitudinal data, hopefully showing improvements with time. This survey is combined with the workforce survey. A new process to improve data quality in this area is under discussion.

The Society is publicising service success stories on our website as a tool to help members to improve their services.

The Society is developing a new BSG Service Development Prize. This is for an individual or team that has made a demonstrable impact on patient care by innovative service improvement. The winner will receive an award at the plenary session of the BSG meeting in 2019. The winning submission could be developed into a publication in *Frontline Gastroenterology*, subject to peer review. It will also be published on the BSG website as a service success story.

Workforce is a major priority for the CSSC. There is a potential for many clinicians to take early retirement further exacerbating the workforce crisis where slightly over 50% of advertised Consultant posts are unfilled. As the burden of night time on call is cited as one of the major reasons for gastroenterologists to consider early retirement, our committee is working with the Royal College of Physicians to consider a recommendation that Consultants need not do on call after the age of 60.

Achievements and performance (continued)

Review of activities in 2018 and plans for 2019 (continued)

Service delivery (continued)

Workload is the main cause of stress among gastroenterologists based on a recent CSSC survey. We are establishing two workstreams to address this issue. One workstream is to work out how many gastroenterologists/hepatologists are required per 250,000 of people, based on our current ways of working and an increasingly elderly population. Another workstream is to quantify the amount and the type of work that a gastroenterologist does. The data obtained will provide valuable information for future planning and helping with workload issues. We are working with Alastair McKinlay to explore the feasibility of an app to document what we do.

The Four Nations Committee reports to the CSSC.

Quality improvement program

The draft framework for what a good gastroenterology and liver service should look like is a work in progress with the intention of piloting it in various sites around the UK next year.

At the annual BSG meeting in Glasgow 2019, there will be a half day symposium dedicated to quality improvement. The first session will introduce the BSG quality standards framework. Keynote speakers will provide an update on QI, Quality Standards and include progress with the GIRFT project. The second session will describe BSG Quality Standards and give examples of their implementation from around the UK. The learning objectives are:

- ◆ To provide an understanding of the key BSG quality standards;
- ◆ To give examples of Quality Improvement projects in the UK; and
- ◆ To report on the implementation of the BSG Quality Standards framework from a pilot site in the UK.

Guidelines

The Society continues to be a world leader in producing and promoting high quality clinical guidelines. The BSG guidelines are a very much valued resource for our members, highly regarded internationally and are one of the most highly cited publications in Gut which has led to its highest ever impact factor at 17.016. The BSG currently has around 33 current guidelines, guidance and position statement documents; with another 27 in development.

The current Editor in Chief of Gut, Emad El Omar, has undertaken in-depth analysis of Gut published papers that increase the Impact Factor (IF) of Gut. BSG Clinical Guidelines have the highest contributing influence to the overall IF with the Abnormal LFTs Guidelines and the Chronic Diarrhoea Guidelines currently the most widely read articles in Gut. Gut's Editor in Chief is keen to work closely with the BSG to continue publishing high quality Clinical Guidelines and discussions are underway to prioritise Guidelines that will be most relevant for Gut publication. The role of Position Statements has been discussed at length and the current Gut Editorial Board considers that Position Statements are more suitable for publication in Frontline Gastroenterology.

Achievements and performance (continued)

Review of activities in 2018 and plans for 2019 (continued)

Guidelines (continued)

Accreditation by NICE for the BSG's guidelines production process has been successfully renewed for another five years until 2023.

As part of the accreditation renewal process, NICE reviewed three sets of recently produced BSG clinical guidelines. Whilst the process is generally strong, there are some suggestions for improvement that were supported by their external advisers:

- ◆ The inclusion of the source of funding of BSG guidelines and the scope of funding for GDGs is in a publicly available process manual or on the BSG website;
- ◆ The inclusion of at least two patient or lay representatives in the guideline development process as part of the GDG is mandatory;
- ◆ Consistency in the amount of detail provided in the search strategy of guidelines; and
- ◆ Ensuring review dates are included in all guidance and can be easily found.

The BSG Guidelines Advice document is reviewed annually and reflects the areas for improvement highlighted by NICE. It is on the BSG website and is sent to section guideline leads and all guidelines groups.

BSG/NICE guidelines collaborations - BSG will be working with Dr Paul Chrisp, Director, Centre for Guidelines at NICE to take this forward.

Guidelines leads - Guidelines leads for each BSG Section have been identified. The list of duties for each lead includes producing a 5-year guideline plan, updating guidelines in a timely fashion and requesting archiving when appropriate.

Guidelines literature support - the pilot use of external providers to help support guideline development is on-going and final costs are to be confirmed. The feedback on the utilisation of the online guidelines development platform is very positive. Alternative literature search providers are being investigated including utilising the Royal College of Physicians.

2018 draft and recently published guidelines

Published

- ◆ The use of FMT as treatment for recurrent or refractory *Clostridium difficile* infection and other potential indications: joint BSG/HIS guidelines;
- ◆ UK Guidelines on Oesophageal Dilatation in Clinical Practice – published Gut;
- ◆ BSG Guidelines for the Investigation of Chronic Diarrhoea in Adults – published Gut;
- ◆ The BSG/UK-PBC Treatment and Management Guidelines – published Gut;
- ◆ UK Consensus on non-medical staffing required to deliver safe, QA care for adult patients undergoing GI endoscopy – published Frontline Gastroenterology; and
- ◆ Proton pump inhibitors (PPIs) and the risk of gastric cancer – Position Statement.

Achievements and performance (continued)

Review of activities in 2018 and plans for 2019 (continued)

Guidelines (continued)

Final draft and/or submission to GUT stage

- ◆ Large Volume Paracentesis - Safety Toolkit;
- ◆ UK guidelines for the Management of Pre-malignant Epithelial Gastric Lesions;
- ◆ Patient experience of GI endoscopy – position statement;
- ◆ BSG guidelines for the diagnosis of PSC;
- ◆ BSG guidelines for Oesophageal Manometry and Reflux Monitoring;
- ◆ The management of Acute Lower GI Bleeding BSGE/ ACP; and
- ◆ Guidelines for the Management of IBD in Adults.

In development

- ◆ Position Statement on Opioid induced Constipation;
- ◆ Guidelines for the Diagnosis and Treatment in High Risk Groups of Cholangiocarcinoma;
- ◆ Position Statement related to anaesthetist-administered sedation/ GA for endoscopy;
- ◆ Position statement of the joint BSG IBD and antenatal working group on the provision of care for pregnant women with IBD;
- ◆ ADSUR Post polyp/ adenoma surveillance;
- ◆ Management of Hereditary GI Cancer Risk Colonoscopic Surveillance;
- ◆ Guidelines for the Management of Iron Deficiency Anaemia;
- ◆ Position statement on checkpoint inhibitor-induced colitis;
- ◆ TIPSS in the management of portal hypertension;
- ◆ Adult Liver Transplantation: A Clinical Guideline;
- ◆ BAPEN/BSG consensus statements about home parenteral nutrition;
- ◆ Guidelines on the Management of Osteoporosis Associated with Chronic Liver Disease;
- ◆ Guidelines for the Management of Autoimmune Hepatitis;
- ◆ Guidelines on the use of Liver Biopsy in Clinical Practice;
- ◆ Guidelines for the Diagnosis and Treatment of Hepatocellular Carcinoma (HCC) in Adults;
- ◆ Guidelines on the Management of Ascites in Cirrhosis (TBC); and
- ◆ The British Guidelines for diagnosis, investigation and treatment of Eosinophilic Oesophagitis in Adults and Children.

RCP Medical Care update

Karen Porter Editor of the RCP Medical Care website has been updating the information on the RCP website giving a general overview of the services and careers in each speciality. The website is also public-facing and therefore the information is provided at a lay person level but does give good detail of Gastroenterology and Hepatology. A number of BSG members helped with the update and a new section on Bowel Cancer screening has been included. Other updates were developments in Endoscopy and also Research opportunities in Gastroenterology and Hepatology.

Achievements and performance (continued)

Review of activities in 2018 and plans for 2019 (continued)

Consultations

The Society has reviewed the way in which consultation requests are handled and have a more predictable and reliable process co-ordinated through a single point of access. Most responses form part of an RCP response mechanism but significant consultation responses are made independently. Requests made by higher legal authorities (i.e. Coroner) or of major national importance (i.e. the Dame Clare Marx enquiry) are handled by the President and President Elect on behalf of the Society. .

PHIN and Private Practice data

The CMA has announced its final decision on the timing of the implementation of Article 22, which covers the provision of consultants' fee information to PHIN and patients.

PHIN (Private Healthcare Information Network) have therefore begun publishing data on all Consultant activity in both the Private Sector and the NHS, which will be accessible to patients in addition to the general public The BSG aims to work with PHIN to produce meaningful activity data BSG Consultations -

Governance

The risk register has been revised and is reviewed annually. In 2018 the Society undertook a cycle of governance reviews of organisational IT and Finance. For quarter 3 and quarter 4 2018, the role of Honorary Treasurer was taken by a financially qualified Trustee. This was agreed in advance and was pending the appointment of a doctor (medic) as Honorary Treasurer and member of the Trustee Board in January 2019.

Financial report for the year

Results for the year

The consolidated statement of financial activities is shown on page 22 of the annual report and financial statements.

Income for the year was £2,928,230 (2017 - £3,635,072). The £706,842 reduction in income primarily relates to £385,000 of Endolive income received in 2017, this event occurs every other year and therefore no income or costs relating to this event occurred in 2018. Income of £334,774 in 2017 related to IBD Registry activities which, as detailed in note 21 to the financial statements were transferred to an independent company in 2018.

The Society incurred expenditure of £3,003,865 (2017 - £3,395,831). Included in this figure is the transfer out of net assets relating to IBD Registry activities of £247,792. The decrease in expenditure arises from no costs being incurred in relation to Endolive (2017 - £342,345) and a reduction in costs of the annual meeting by £141,114 to £981,091 (2017 - £1,122,205).

Financial report for the year (continued)

Results for the year (continued)

The results for the year show an overall decrease in funds of £432,824 (2017 – increase of £583,309). This includes unrealised losses on investments of £412,031 (2017 – unrealised gains of £347,642) (see note 13) and realised gains on investments of £54,842 (2017 – realised losses of £3,574). Net expenditure before investment gains and losses for the year was £75,635 (2017 – net income of £239,241).

The profit within BSG Ltd amounted to £251,694 (2017 – profit of £170,372). This includes the net profit from the Annual Meeting, income from the journals and the income from the trainees' meetings. The journals continue to do well; income from Gut and Frontline Gastroenterology totalled £908,888 (2017 – £948,453).

Due to the nature of the income streams there will inevitably be variance year-on-year with various events and learning opportunities taking place at different size and scale. The Society aims to ensure that any surpluses are reinvested to further aid Society's charitable objects.

Investment policy and performance

The Society's investment portfolio is managed by Investec. The Society's investment strategy is medium risk and aimed at protecting the funds from depreciation in the short to medium term. The policy takes account of ethical considerations such as restrictions on tobacco and alcohol-related investment. In addition the trustees agreed that whilst supporting companies involved in drug development is desirable, all such investments should be held at "arms length" (i.e. in funds). Details of the Society's investments are set out in note 13 to the financial statements.

The trustees consider the fund to have performed adequately during 2018.

The purchase of a new office property has been deferred for the moment but the Society is accumulating reserves towards this end in the long term. A total of £4,000,000 has been designated by the Society for this purpose.

Reserves and financial position

The trustees continue to actively address the issue of reserves in the context of future plans and requirements of the Society. The cash needs of the Society are well within the assets it holds and the income it generates.

The trustees' policy in relation to free reserves is to maintain sufficient funds to support the key activities of the Society for one calendar year. This includes the annual meeting, requiring approximately £1,000,000, 12 months' staff costs approximating £480,000, and funds sufficient to discharge essential operating expenses estimated at £120,000, giving a total minimum required free reserve of approximately £1,600,000. The general funds, or free reserves, of the group at the year end were £1,778,895 (2017 – £1,906,725) and this is broadly in line with the target set out above. The level of free reserves is continually reviewed by trustees.

Reserves and financial position (continued)

Total funds of the charity at the year end were £6,697,830 (2017 - £7,130,654). This included restricted funds of £66,487 (2017 - £266,864) and designated funds at the year end totalled £4,852,448 (2016 - £4,957,065).

Details of the designated funds are given in note 16 to the financial statements.

Statement of trustees' responsibilities

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

Company law requires the trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and the group and of the incoming resources and application of resources, including the income and expenditure, of the group for that period.

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

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

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

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

Statement of trustees' responsibilities (continued)

Each of the trustees confirms that:

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

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

Approved by the trustees and signed on their behalf by:



Trustee

Approved by the trustees on: 19.6.19

Independent auditor's report to the members of British Society of Gastroenterology

Opinion

We have audited the financial statements of British Society of Gastroenterology (the 'charitable parent company') and its subsidiaries (the 'group') for the year ended 31 December 2018, which comprise the group statement of financial activities, the group and charitable parent company balance sheets and statements of cash flows, the principal accounting policies and notes to the financial statements. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- ◆ give a true and fair view of the state of the group's and of the charitable parent company's affairs as at 31 December 2018 and of the group's income and expenditure for the year then ended;
- ◆ have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- ◆ have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the group 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 the charitable parent 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.

Independent auditor's report 31 December 2018

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.

Opinions on other matters prescribed by the Companies Act 2006

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

- ◆ the information given in the trustees' report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- ◆ the trustees' report has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and the charitable parent company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' report.

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

- ◆ adequate accounting records have not been kept by the charitable parent company; or
- ◆ the charitable parent 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; or
- ◆ the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the trustees' report and from the requirement to prepare a strategic report.

Responsibilities of trustees

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

In preparing the financial statements, the trustees are responsible for assessing the group's and the charitable parent 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 charitable parent company or to cease operations, or have no realistic alternative but to do so.

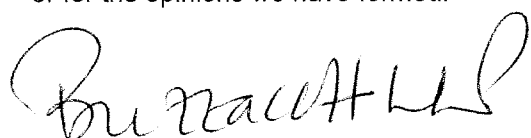
Auditor's responsibilities for the audit of the financial statements

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 www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

 26 September 2019

Shachi Blakemore (Senior Statutory Auditor)

For and on behalf of Buzzacott LLP, Statutory Auditor
130 Wood Street
London
EC2V 6DL

Consolidated statement of financial activities Year to 31 December 2018

	Notes	Unrestricted £	Restricted £	2018 Total funds £	2017 Total funds £
Income					
Donations and legacies					
. Membership subscription	1	391,978	—	391,978	390,817
Investment income	2	160,704	—	160,704	172,190
Other		46,374	—	46,374	21,805
Charitable activities	3				
. Education and training		1,205,032	174,340	1,405,352	2,095,913
. GI research		910,117	—	910,117	948,603
. Service standards		—	13,705	13,705	5,744
Total income		2,740,185	188,045	2,928,230	3,635,072
Expenditure					
Cost of raising funds	4	89,739	—	89,739	84,452
Cost of charitable activities	5				
. Education and training		1,409,584	137,779	1,547,363	2,268,580
. GI research		679,786	—	679,786	694,593
. Service standards		335,769	10,768	346,537	245,265
. International		92,648	—	92,648	102,941
. Transfer of IBD Registry	21	7,917	239,875	247,792	—
Total expenditure		2,615,443	388,422	3,003,865	3,395,831
Net income (expenditure) before (losses) gains on investments		124,742	(200,377)	(75,635)	239,241
Gains and losses on investments	13				
Realised gains (losses) on investments		54,842	—	54,842	(3,574)
Unrealised (losses) gains on investments		(412,031)	—	(412,031)	347,642
		(357,189)	—	(357,189)	344,068
Net (expenditure) income and net movement in funds for the year		(232,447)	(200,377)	(432,824)	583,309
Reconciliation of funds					
Fund balances brought forward at 1 January		6,863,790	266,864	7,130,654	6,547,345
Fund balances carried forward at 31 December		6,631,343	66,487	6,697,830	7,130,654

All of the charity's activities derived from continuing operations during the above financial year.

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

A comparative statement of financial activities for the previous year is included in the notes to the financial statements.

Balance sheets 31 December 2018

	Notes	Group		Charity	
		2018 £	2017 £	2018 £	2017 £
Fixed assets					
Intangible assets	12	121,925	143,696	121,925	143,696
Tangible assets	12	30,101	51,409	30,101	51,409
Investments	13	5,432,146	5,819,819	5,432,147	5,819,821
		5,584,172	6,014,924	5,584,173	6,014,926
Current assets					
Debtors	14	1,824,132	1,560,505	1,198,990	1,306,319
Cash at bank and in hand		322,390	688,568	151,923	448,688
		2,146,522	2,249,073	1,350,913	1,755,007
Liabilities:					
Creditors: amounts falling due within one year	15	(1,032,864)	(1,133,343)	(237,256)	(639,283)
Net current assets		1,113,658	1,115,730	1,113,657	1,115,724
Total net assets		6,697,830	7,130,654	6,697,830	7,130,650
The funds of the charity:					
Unrestricted funds:					
. General funds		1,778,895	1,906,725	1,778,895	1,906,721
. Designated funds	16	4,852,448	4,957,065	4,852,448	4,957,065
Restricted funds	17	66,487	266,864	66,487	266,864
	18	6,697,830	7,130,654	6,697,830	7,130,650

Approved by the trustees
and signed on their behalf by:



Trustee

Approved on: 19.6.19

British Society of Gastroenterology
Registered Company Number: 08124892 (England and Wales)

Statement of cash flows 31 December 2018

	Notes	2018 £	2017 £
Cash flow from operating activities:			
Net cash (used in) provided by operating activities	A	(544,282)	323,223
Cash flow from investing activities:			
Dividends and interest from investments		160,704	172,190
Purchase of tangible fixed assets		(4,374)	(1,136)
Purchase of intangible fixed assets		(8,710)	(143,696)
Proceeds from the disposal of investments		591,281	274,807
Purchase of investments		(620,965)	(392,824)
Net cash provided by (used in) investing activities		117,936	(90,659)
Change in cash and cash equivalents in the year		(426,346)	232,564
Cash and cash equivalents at 1 January	B	872,025	639,461
Cash and cash equivalents at 31 December	B	445,679	872,025

Notes to the statement of cash flows for the year to 31 December

A Reconciliation of net movement in funds to net cash flow from operating activities

	2018 £	2017 £
Net movement in funds (as per the statement of financial activities)	(432,824)	583,309
Adjustments for:		
Depreciation and amortisation charge	56,163	22,704
(Losses) gains on investments	357,189	(344,068)
Dividends and interest from investments	(160,704)	(172,190)
(Increase) decrease in debtors	(263,627)	40,738
(Decrease) increase in creditors	(100,479)	192,730
Net cash (used in) provided by operating activities	(544,282)	323,223

B Analysis of cash and cash equivalents

	2018 £	2017 £
Cash at bank and in hand	322,390	688,568
Cash held by investment managers	123,289	183,457
Total cash and cash equivalents	445,679	872,025

Principal accounting policies 31 December 2018

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

Basis of preparation

These financial statements have been prepared for the year to 31 December 2018, with comparative information for the year to 31 December 2017, and are presented in sterling and rounded to the nearest pound.

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 accounting policies below or the notes to these financial statements.

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (Charities SORP FRS 102) issued on 16 July 2014, the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

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

Critical accounting estimates and areas of judgement

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

The items in the financial statements where these judgements and estimates have been made include estimating the useful economic life of tangible fixed assets for the purposes of determining the annual depreciation charge.

Assessment of going concern

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

The trustees of the charity have concluded that there are no material uncertainties related to events or conditions that may cast significant doubt on the ability of the group and the charity to continue as a going concern. They are of the opinion that the group and the charity will have sufficient resources to meet its liabilities as they fall due. With regard to the next accounting period, the year ending 31 December 2019, the most significant areas that affect the carrying value of the assets held by the charity are the level of investment return and the performance of the investment markets.

Principal accounting policies 31 December 2018

Basis of consolidation

The consolidated financial statements of the group incorporate the financial statements of the Society and the trading subsidiaries it controls, BSG Limited and, until the dissolution date of 15 March 2018, DDF Conference Limited. These have been consolidated on a line by line basis. A separate statement of financial activities and income and expenditure account are not represented for the charity itself following the exemption afforded by section 4 of the Companies Act 2006.

Income recognition

Income is recognised in the period in which the group and the charity have entitlement to the income, the amount of income can be measured reliably and it is probable that the income will be received.

Subscription income

Subscription income is accounted for in the financial period for which it is due.

Publication income

The Society has a contract with BMJ Publications for the publication of the journals, which gives 50% of any surplus made to 31 December each year to the Society. The Society also receives advertising income from the publications, via BSG Limited. All publication income is accounted for on a receivable basis.

Scientific meetings

The income arising from scientific meetings is recognised on a receivable basis.

Donations

Donations are credited to the statement of financial activities in the year in which they are received.

Investment income

Dividends are recognised once the dividend has been declared and notification has been received of the dividend due.

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

Expenditure recognition

Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the group and the charity to make a payment to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably.

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

Expenditure recognition (continued)

- a) Cost of raising funds includes investment managers fees and an allocation of staff time.
- b) Expenditure on charitable activities comprise expenditure on the Society's primary charitable purposes as described in the trustees' report. The costs for each activity include grants payable, other direct costs and support costs, which are apportioned on the level of activity in each area.
- c) Grants payable are included in the statement of financial activities when approved and when the intended recipient has either received the funds or been informed of the decision to make the grant, and has satisfied all relevant conditions. Grants approved but not paid at the end of the financial year are accrued for. Grants where the beneficiary has not been informed or has to meet certain conditions before the grant is released are not accrued for but are noted as financial commitments in the notes to the financial statements.

All expenditure is stated inclusive of irrecoverable VAT.

Allocation of support and governance costs

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

Governance costs comprises the costs directly attributable to the governance of the charity, including audit costs and the necessary legal procedures for compliance with statutory requirements.

Support costs and governance costs are allocated between activities with the allocation based on staff time use.

Pension costs

The charity operates a defined contribution scheme on behalf of its employees. The assets are held in separately administered funds. Costs are charged to the statement of financial activities in the period to which they relate.

Tangible fixed assets

Depreciation is provided at the following annual rates in order to write off the cost of each asset over its estimated useful life:

- ◆ Office furniture, fittings and equipment - 5 years
- ◆ Leasehold building - 25 years

Items used in the day to day running of the Society and with a cost in excess of £500 are capitalised, and are stated at cost less accumulated depreciation.

Intangible fixed assets

Amortisation is provided at the following annual rates in order to write off the cost of each asset over its estimated useful life, amortisation is charged from the date the asset comes into use:

- ♦ Database and website - 5 years

Debtors

Debtors are recognised at their settlement amount, less any provision for non-recoverability. Prepayments are valued at the amount prepaid.

Cash at bank and in hand

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

Creditors and provisions

Creditors and provisions are recognised when there is an obligation at the balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Creditors and provisions are recognised at the amount the group and the charity anticipates it will pay to settle the debt.

Fund structure

The Society has various types of funds for which it is responsible, and which require separate disclosure. These are as follows:

General funds

Funds which are expendable at the discretion of the trustees in furtherance of the objects of the Society.

Designated funds

Funds which are set aside as part of the Society's unrestricted funds for particular purposes in the future.

Restricted funds

Funds raised for, and their use restricted to, a specific purpose, or donations subject to donor imposed conditions.

Investments

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

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

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

Financial instruments

The charity only holds basic financial instruments as defined in FRS 102. The financial assets and financial liabilities of the charity and their measurement basis are as follows:

Financial assets – other debtors are basic financial instruments and are debt instruments measured at amortised cost. Listed investments are a basic financial instrument as detailed above. Prepayments are not financial instruments.

Cash at bank – classified as a basic financial instrument and is measured at face value.

Financial liabilities – accruals and other creditors are financial instruments, and are measured at amortised cost.

Taxation

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

Notes to the financial statements 31 December 2018

1 Subscriptions

	Unrestricted funds	
	2018 £	2017 £
Membership subscription	391,978	390,817
Total funds	391,978	390,817

2 Investment income

	Unrestricted funds	
	2018 £	2017 £
Income from listed investments	149,521	160,084
Interest receivable	11,183	12,106
Total funds	160,704	172,190

3 Income from charitable activities

	Un- restricted funds £	Restricted funds £	Total funds 2018 £	Un- restricted funds £	Restricted funds £	Total funds 2017 £
Education and training						
. Income from scientific meetings	1,200,782	77,625	1,278,407	1,614,824	73,609	1,688,433
. Sponsorship income	23,875	96,715	120,590	130,625	276,855	407,480
. Other income	6,355	—	6,355	—	—	—
	1,231,012	174,340	1,405,352	1,745,449	350,464	2,095,913
GI Research						
. 'GUT' and Frontline Gastroenterology journals	908,888	—	908,888	948,453	—	948,453
. Other income	1,229	—	1,229	150	—	150
	910,117	—	910,117	948,603	—	948,603
Service standards						
. Advertising income	—	3,175	3,175	—	4,294	4,294
. Other income	—	10,530	10,530	—	1,450	1,450
	—	13,705	13,705	—	5,744	5,744
Total funds	2,141,129	188,045	2,329,174	2,694,052	356,208	3,050,260

4 Cost of raising funds

	Unrestricted Funds	
	2018 £	2017 £
Investment manager's fees	25,035	24,587
Staff costs (note 9)	64,704	59,865
Total funds	89,739	84,452

5 Expenditure on charitable activities

	Un- restricted funds £	Restricted funds £	Total funds 2018 £	Un- restricted funds £	Restricted funds £	Total funds 2017 £
Education and training						
Direct costs						
. Scientific meetings	959,258	119,934	1,079,192	1,470,468	136,671	1,607,139
. Section meetings	41,938	67	42,005	57,093	23	57,116
. IBD registry costs	36,572	(7,353)	29,219	194,973	97,313	292,286
. IBD registry staff costs	—	1,793	1,793	—	33,791	33,791
. Supporting Women in Gastro	1,523	2,917	4,440	4,521	—	4,521
. Mentoring	19,867	—	19,867	—	—	—
. Website costs	4,942	—	4,942	2,039	—	2,039
. Staff costs (note 9)	47,195	9,243	56,438	74,384	—	74,384
. Bursaries & prizes	10,216	11,178	21,394	—	19,350	19,350
Support costs (note 6)	288,073	—	288,073	177,954	—	177,954
	1,409,584	137,779	1,547,363	1,981,432	287,148	2,268,580
GI research						
Direct costs						
. 'GUT' journal	262,099	—	262,099	261,704	—	261,704
. Frontline Gastroenterology journal	117,116	—	117,116	122,808	—	122,808
. Section meetings	18,393	—	18,393	15,180	—	15,180
. Website costs	2,664	—	2,664	845	—	845
. Bursaries & prizes	7,132	—	7,132	7,892	—	7,892
. Clinical Research Groups	1,745	—	1,745	7,005	—	7,005
. Research Workshops	15,635	—	15,635	18,200	—	18,200
. Staff costs (note 9)	48,506	—	48,506	43,949	—	43,949
Subvention to Guts UK	78,396	—	78,396	78,163	—	78,163
Other grants to Guts UK	5,000	—	5,000	65,000	—	65,000
Support costs (note 6)	123,100	—	123,100	73,847	—	73,847
	679,786	—	679,786	694,593	—	694,593
Service standards						
Direct costs						
. Guidelines	44,159	—	44,159	14,870	—	14,870
. EQUIP	10,001	—	10,001	—	—	—
. Newsletter	3,200	—	3,200	1,800	—	1,800
. E-Newsletter	137	—	137	819	—	819
. Meeting and other costs	36,850	10,768	47,618	25,785	9,004	34,789
. Marketing & Comms	16,693	—	16,693	—	—	—
. Membership Development	2,506	—	2,506	—	—	—
. Public Relations	2,500	—	2,500	30,919	—	30,919
. Website costs	5,878	—	5,878	1,430	—	1,430
. Staff costs (note 9)	59,970	—	59,970	68,328	—	68,328
Support costs (note 6)	153,875	—	153,875	92,310	—	92,310
	335,769	10,768	346,537	236,261	9,004	245,265
Total carried forward	2,425,139	148,547	2,573,686	2,912,286	296,152	3,208,438

5 Expenditure on charitable activities (continued)

	Un-restricted funds £	Restricted funds £	Total funds 2018 £	Un-restricted funds £	Restricted funds £	Total funds 2017 £
Total brought forward	2,425,139	148,547	2,573,686	2,912,286	296,152	3,208,438
International						
Direct costs						
. Staff costs (note 9)	9,668	—	9,668	14,262	—	14,262
. Other costs	490	—	490	1,535	—	1,535
Sponsorship	20,940	—	20,940	50,221	—	50,221
Support costs (note 6)	61,550	—	61,550	36,923	—	36,923
	<u>92,648</u>	<u>—</u>	<u>92,648</u>	<u>102,941</u>	<u>—</u>	<u>102,941</u>
Transfer of IBD Registry						
. Transfer of the IBD Registry to IBD Registry Ltd	7,917	239,875	247,792	—	—	—
	<u>7,917</u>	<u>239,875</u>	<u>247,792</u>	<u>—</u>	<u>—</u>	<u>—</u>
Total funds	<u>2,525,704</u>	<u>388,422</u>	<u>2,914,126</u>	<u>3,015,227</u>	<u>296,152</u>	<u>3,311,379</u>

During the year the IBD Registry was transferred to a separate company IBD Registry Limited. The transfer included the balance on the IBD Registry restricted fund together with net income received for the registry in previous years.

6 Support costs

	Unrestricted funds	
	2018 £	2017 £
Premises expenses	34,969	25,878
Administration and office expenses	52,463	64,180
Legal and professional fees	11,514	12,360
Human Resources	25,007	16,500
Consultancy	78,451	—
Accountancy and bookkeeping	29,904	24,475
Subscriptions	9,868	3,806
Staff costs (note 9)	233,086	153,426
Recruitment	2,593	5,104
Marketing	6,561	2,380
Write back of provision	(1,193)	—
Bank charges and interest payable	3,230	3,838
Depreciation and loss on disposal of assets	56,163	22,704
Sundry expenses	570	86
Irrecoverable VAT	44,417	11,187
Governance costs (note 7)	38,995	35,110
Total funds	<u>626,598</u>	<u>381,034</u>

Notes to the financial statements 31 December 2018

6 Support costs (continued)

	Education and training £	GI research £	Service standards £	Inter-national £	2018 Total £
Premises expenses	15,736	6,994	8,742	3,497	34,969
Administration and office expenses	23,608	10,493	13,116	5,246	52,463
Legal and professional fees	6,254	1,913	2,391	956	11,514
Human Resources	11,253	5,001	6,252	2,501	25,007
Consultancy	35,303	15,690	19,613	7,845	78,451
Accountancy and bookkeeping	13,457	5,981	7,476	2,990	29,904
Subscriptions	4,441	1,974	2,466	987	9,868
Staff costs	104,889	46,616	58,272	23,309	233,086
Recruitment	1,167	519	648	259	2,593
Marketing	4,273	832	1,040	416	6,561
Write back of provision	(1,193)	—	—	—	(1,193)
Bank charges and interest payable	1,552	610	763	305	3,230
Depreciation	25,273	11,233	14,041	5,616	56,163
Sundry expenses	510	22	27	11	570
Irrecoverable VAT	19,988	8,883	11,104	4,442	44,417
Governance costs (note 7)	21,562	6,339	7,924	3,170	38,995
2018 Total	288,073	123,101	153,876	61,550	626,598

	Education and training £	GI research £	Service standards £	Inter-national £	2017 Total £
Premises expenses	11,645	5,176	6,470	2,587	25,878
Administration and office expenses	28,881	12,836	16,045	6,418	64,180
Legal and professional fees	15,448	4,877	6,096	2,439	28,860
Accountancy and bookkeeping	11,014	4,895	6,119	2,447	24,475
Subscriptions	1,713	761	951	381	3,806
Staff costs	69,042	30,685	38,357	15,342	153,426
Recruitment	2,297	1,021	1,276	510	5,104
Marketing	1,071	476	595	238	2,380
Bank charges and interest payable	1,874	714	893	357	3,838
Depreciation	10,217	4,541	5,676	2,270	22,704
Sundry expenses	39	17	21	9	86
Irrecoverable VAT	5,033	2,237	2,797	1,120	11,187
Governance costs (note 7)	19,680	5,611	7,014	2,805	35,110
2017 Total	177,954	73,847	92,310	36,923	381,034

7 Governance

	Unrestricted funds	
	2018 £	2017 £
Council meetings	19,105	17,243
Trustees' expenses	3,390	1,952
Audit and accountancy fees	16,500	15,915
Total funds	38,995	35,110

None of the trustees received remuneration from the charity in respect of their services as trustees (2017 - none).

Notes to the financial statements 31 December 2018

8 Net income (expenditure) before (losses) gains on investments

This is stated after charging:

	2018 Total funds £	2017 Total funds £
Staff costs (note 9)	530,065	448,005
Depreciation	56,163	22,704
Auditors' remuneration (group basis)		
. Audit fees – current year	16,080	15,915
. Non-audit fees	15,630	24,075

9 Staff costs, remuneration of key management and trustees' remuneration

	2018 Total funds £	2017 Total funds £
Wages and salaries	384,336	390,895
Social security cost	39,196	39,605
Pension cost	18,985	17,505
	442,517	448,005
Agency costs	10,528	—
Consultancy costs	55,900	—
Restructuring costs	21,120	—
	530,065	448,005

Staff costs analysed by activities:

	2018 Total funds £	2017 Total funds £
Cost of raising funds	64,704	59,865
Charitable activities		
. Education and training	56,438	74,384
. Education and training (IBD Registry)	1,793	33,791
. GI research	48,506	43,949
. Service standards	59,970	68,328
. International	9,668	14,262
Support costs	288,986	153,426
	530,065	448,005

The average number of employees, excluding agency and self-employed consultant staff, during the year was:

	2018 No.	2017 No.
Employees	9	10

9 Staff costs, remuneration of key management and trustees' remuneration
(continued)

The number of employees who earned £60,000 or more per annum (including taxable benefits but excluding employer pension contributions) during the period was as follows:

	2018 No	2017 No
£80,001 - £90,000	—	1
£90,001 - £100,000	1	—

Pension contributions for these employees totalled £4,928 (2017 – £4,141).

The key management personnel of the charity in charge of directing and controlling, running and operating the charity on a day to day basis comprise the trustees, the CEO (resigned August 2018), Executive Secretary (resigned June 2018) and Head of Sections & Clinical Services (resigned June 2018). From August 2018, a consultant was engaged to take on the role of COO and their consultancy costs for the period from August 2018 to December 2018 have therefore been included in the key management personnel costs. The total remuneration (including taxable benefits and employer's pension contributions) of the key management personnel for the year was £207,897 (2017 – £225,653). Post year end, following restructuring, this cost is expected to decrease.

No trustee received any remuneration from the Society in their ongoing role as a trustee. Travelling and subsistence expenses were reimbursed to 12 trustees amounting to a total of £16,642 (2017 – £19,341 to 10 trustees). At the year end a balance of £1,185 (2017 – £43) was owed to trustees.

10 Net income from subsidiaries

The Society has one wholly-owned subsidiary, BSG Limited, which is incorporated in England and Wales (Company Registration Number 03021266). BSG Limited conducts scientific meetings on behalf of the Society. A summary of BSG Limited's results is shown below:

Statement of income	2018 £	2017 £
Turnover	1,339,134	1,750,731
Cost of sales	(1,078,297)	(1,571,287)
Gross profit	260,837	179,444
Administration	(9,429)	(9,121)
Interest receivable	286	49
Net profit	251,694	170,372
Gift Aid to BSG	(251,694)	(170,372)
Profit for the period	—	—

10 Net income from subsidiaries (continued)

The Society also controlled DDF Conference Limited. DDF Conference Limited was formed in association with The Association of Upper Gastrointestinal Surgeons (AUGIS), The British Association for Parenteral and Enteral Nutrition (BAPEN) and The British Association for the Study of the Liver (BASL) in order to organise a joint scientific meeting on a triennial basis. Each of the societies owned one share in the company. The Society acted as host organisation for DDF, providing back office functions and managed the company on a day to day basis. A application was made to have the company struck off and the company was removed from the register and the company was dissolved on 2 April 2019.

DDF Conference did not hold a scientific meeting in 2018 or 2017 and its results are as follows:

Statement of income	2018 £	2017 £
Turnover	1,296	229
Cost of sales	—	—
Gross profit	1,296	229
Administration	1,193	(2,675)
Net profit (loss) for period	2,489	(2,446)
Retained loss brought forward	(2,489)	(43)
Result for the period	—	(2,489)

11 Comparative Statement of Financial Activities for the year ended 31 December 2017

	Notes	Unrestricted £	Restricted £	2017 Total funds £
Income				
<i>Donations and legacies</i>				
. Membership subscription	1	390,817	—	390,817
<i>Investment income</i>	2	172,190	—	172,190
<i>Other</i>		21,805	—	21,805
<i>Charitable activities</i>	3			
. Education and training		1,745,449	350,464	2,095,913
. GI research		948,603	—	948,603
. Service standards		—	5,744	5,744
Total income		<u>3,278,864</u>	<u>356,208</u>	<u>3,635,072</u>
Expenditure				
<i>Cost of raising funds</i>	4	84,452	—	84,452
<i>Cost of charitable activities</i>	5			
. Education and training		1,981,432	287,148	2,268,580
. GI research		694,593	—	694,593
. Service standards		236,261	9,004	245,265
. International		102,941	—	102,941
Total expenditure		<u>3,099,679</u>	<u>296,152</u>	<u>3,395,831</u>
Net (expenditure) income before gains on investments		179,185	60,056	239,241
<i>Net gains on investments</i>	13	344,068	—	344,068
Net income and net movement in funds for the year		<u>523,253</u>	<u>60,056</u>	<u>583,309</u>

12 Fixed assets

Intangible fixed assets

Group and charity	Database & website £
Cost	
At 1 January 2018	215,766
Additions	8,710
Disposals	(72,070)
At 31 December 2018	<u>152,406</u>
Amortisation	
At 1 January 2018	72,070
Charge for the year	30,481
Eliminated on disposal	(72,070)
At 31 December 2018	<u>30,481</u>
Net book values	
At 31 December 2018	<u>121,925</u>
At 31 December 2017	<u>143,696</u>

12 Fixed assets (continued)

Tangible fixed assets

Group and charity	Leasehold buildings £	Office equipment, fixtures and fittings £	Total £
Cost			
At 1 January 2018	165,000	86,822	251,822
Additions	—	4,374	4,374
At 31 December 2018	<u>165,000</u>	<u>91,196</u>	<u>256,196</u>
Depreciation			
At 1 January 2018	141,900	58,513	200,413
Charge for the year	6,600	19,082	25,682
At 31 December 2018	<u>148,500</u>	<u>77,595</u>	<u>226,095</u>
Net book values			
At 31 December 2018	<u>16,500</u>	<u>13,601</u>	<u>30,101</u>
At 31 December 2017	<u>23,100</u>	<u>28,309</u>	<u>51,409</u>

13 Investments

	Total funds 2018 £	Total funds 2017 £
Market value at 1 January	5,636,362	5,174,277
Disposals at opening market value (proceeds: £591,281; realised gains: £54,842)	(536,439)	(278,381)
Additions at cost	620,965	392,824
Unrealised (losses) gains	(412,031)	347,642
Market value at 31 December	5,308,857	5,636,362
Cash held by investment manager	123,289	183,457
Group	5,432,146	5,819,819
Investment in BSG Limited	1	1
Investment in DDF Conference Limited	—	1
Society	5,432,147	5,819,821

At 31 December, the Group and Society's listed investments comprised the following:

	2018 £	2017 £
UK fixed interest investments	759,108	758,817
Overseas fixed interest investments	71,195	68,294
Overseas listed equities	2,055,510	1,962,679
UK equities	1,852,641	2,268,580
Alternative investments	226,178	222,879
Property	344,225	355,113
	<u>5,308,857</u>	<u>5,636,352</u>
Historical cost of investments (excluding cash held with investment managers)	<u>4,502,805</u>	<u>4,373,036</u>

Notes to the financial statements 31 December 2018

13 Investments (continued)

There were no individual investments amounting to over 5% of the portfolio at 31 December 2018 (2017 – none).

The total unrealised gains as at 31 December constitutes movements on revaluation and are as follows:

	2018 £	2017 £
Unrealised gains included above:		
On investments	806,052	1,263,326
Total unrealised gains at 31 December	806,052	1,263,326
Reconciliation of movements in unrealised gains		
Unrealised gains at 1 January	1,263,326	897,337
In respect to disposals in the year	(45,243)	18,347
	1,218,083	915,684
Net (losses) gains arising on revaluation arising in the year	(412,031)	347,642
Total unrealised gains at 31 December	806,052	1,263,326

14 Debtors

	Group		Charity	
	2018 £	2017 £	2018 £	2017 £
Trade debtors	547,687	494,546	16,368	106,794
Other debtors	23,672	3,905	20,239	473
VAT	—	—	6,519	21,990
Amount due from subsidiaries	—	—	251,694	230,573
Prepayments and accrued income	1,252,773	1,062,054	904,170	946,489
	1,824,132	1,560,505	1,198,990	1,306,319

15 Creditors: amounts falling due within one year

	Group		Charity	
	2018 £	2017 £	2018 £	2017 £
Trade creditors	346,872	192,527	118,386	130,394
Accruals and deferred income	649,496	884,840	95,548	484,580
Social security & other taxation	23,169	43,235	9,995	13,068
Other creditors	13,327	12,741	13,327	11,241
	1,032,864	1,133,343	237,256	639,283

Included within the above is deferred income as set out below:

	2018 £
Deferred income brought forward at 1 January	525,079
Additional income deferred during the year	531,044
Brought forward funds released in the year	(525,079)
Deferred income carried forward at 31 December	531,044

16 Designated funds

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

	At 1 January 2018 £	New designations/ (released) £	Utilised in year £	At 31 December 2018 £
Research	83,600	9,796	(83,396)	10,000
Training and Education	45,837	36,972	(21,390)	61,419
Clinical Services	211,812	40,000	(54,160)	197,652
IBD Registry	28,337	16,152	(44,489)	—
International	66,950	(4,060)	(20,940)	41,950
Refurbishment of offices	116,824	(16,824)	—	100,000
Membership development	208,600	—	(19,199)	189,401
Property	4,000,000	—	—	4,000,000
Restructuring	—	100,000	—	100,000
Tangible and intangible assets	195,105	13,084	(56,163)	152,026
	4,957,065	195,120	(299,737)	4,852,448

	At 1 January 2017 £	New designations/ (released) £	Utilised in year £	At 31 December 2017 £
<i>Research</i>	124,620	102,143	(143,163)	83,600
<i>Training and Education</i>	30,358	20,000	(4,521)	45,837
<i>Clinical Services</i>	156,682	70,000	(14,870)	211,812
<i>IBD Registry</i>	92,685	130,625	(194,973)	28,337
<i>International</i>	85,724	31,447	(50,221)	66,950
<i>Refurbishment of offices</i>	68,426	59,772	(11,374)	116,824
<i>Membership development</i>	200,000	25,000	(16,400)	208,600
<i>Property</i>	4,000,000	—	—	4,000,000
<i>Tangible and intangible assets</i>	—	195,105	—	195,105
	4,758,495	634,092	(435,522)	4,957,065

Research

An amount has been designated for research grants.

Training and Education

Funds have been set aside for a number of earmarked projects identified by the Council and supported during 2018, including a mentoring project.

Clinical Services

Funds have been set aside for a number of worthy projects identified by Council such as audit and guidelines including open access for guidelines. We expect to incur further expenditure on producing and updating guidelines during 2019.

IBD Registry

The IBD Registry fund was to support the ongoing project. During the year, £44,489 (2017 – £194,973) of the designated fund was utilised. The IBD Registry was transferred to a separate company during the year (Note 21) and consequently no further designation has been made.

Notes to the financial statements 31 December 2018

16 Designated funds (continued)

Refurbishment of office

A sum of money has been designated to fund the necessary refurbishment of the new office. The unspent fund will be utilised in 2019.

Membership development

A balance of £189,401 has been designated in the year for membership development. This fund will be utilised in 2019.

Property fund

A sum of money has been designated to secure alternative office accommodation for the Society. The Society needs to ensure that they have at least 80% of the purchase price of a new property, this money will be used towards that purchase.

Restructuring

A sum of money has been designated for restructuring costs anticipated in the forthcoming financial year.

Tangible and intangible assets

This fund represents the net book value of the tangible and intangible assets of the Society.

17 Restricted funds

	At 1 January 2018 £	Income £	Expenditure and transfers £	At 31 December 2018 £
Endoscopy fund	1,966	—	—	1,966
Endoscopy – Paul Brown travelling fund	3,540	—	—	3,540
Pathologists Group fund	2,603	—	—	2,603
IBD Registry fund	194,315	40,000	(234,315)	—
Section funds				
. Oesophageal Section	2,694	8,620	(7,322)	3,992
. IBD Section	1,300	—	—	1,300
. Clinical Measurement	2,290	13,705	(10,768)	5,227
. NGM	13,700	30,000	(35,940)	7,760
. Education	12,243	8,178	(20,421)	—
. Trainees in Gastro	28,531	77,625	(76,739)	29,417
. SWiG	—	2,917	(2,917)	—
. Mentoring	—	7,000	—	7,000
Other	3,682	—	—	3,682
	<u>266,864</u>	<u>188,045</u>	<u>(388,422)</u>	<u>66,487</u>

Notes to the financial statements 31 December 2018

17 Restricted funds (continued)

	At 1 January 2017 £	Income £	Expenditure and transfers £	At 31 December 2017 £
<i>Endoscopy fund</i>	1,966	—	—	1,966
<i>Endoscopy – Paul Brown travelling fund</i>	3,540	—	—	3,540
<i>Pathologists Group fund</i>	2,603	—	—	2,603
<i>IBD Registry fund</i>	120,470	204,949	(131,104)	194,315
<i>Section funds</i>				
. <i>Oesophageal Section</i>	3,625	—	(931)	2,694
. <i>IBD Section</i>	2,100	(800)	—	1,300
. <i>Clinical Measurement</i>	5,550	5,744	(9,004)	2,290
. <i>NGM</i>	8,047	45,756	(40,103)	13,700
. <i>Education</i>	4,643	26,950	(19,450)	12,243
. <i>Trainees in Gastro</i>	50,582	73,609	(95,660)	28,531
<i>Other</i>	3,682	—	—	3,682
	<u>206,808</u>	<u>356,208</u>	<u>(296,152)</u>	<u>266,864</u>

Restricted funds are as follows:

The Endoscopy fund represents monies transferred from the British Society for Digestive Endoscopy for endoscopy related expenditure.

The Paul Brown travelling fund represents a donation received from Keymed for small travel grants to UK doctors to visit Endoscopy Centres abroad to enable them to learn specific techniques.

The Pathologists Group fund is a donation to support the annual Basil Morson Lecture.

The IBD Registry fund represented income received from various sources to support the establishment of the IBD Registry. The balance on the fund was transferred to a separate company during the year.

The Section funds represent the income and expenditure in relation to the activities of these sections of the Society.

18 Analysis of net assets between funds

Group	Unrestricted funds		Restricted funds £	Total funds £
	General fund £	Designated funds £		
Fund balances at 31 December 2018				
are represented by:				
Intangible fixed assets	—	121,925	—	121,925
Tangible fixed assets	—	30,101	—	30,101
Investments	1,332,146	4,100,000	—	5,432,146
Current assets	1,380,690	658,524	107,308	2,146,522
Current liabilities	(933,941)	(58,102)	(40,821)	(1,032,864)
Total net assets	<u>1,778,895</u>	<u>4,852,448</u>	<u>66,487</u>	<u>6,697,830</u>

18 Analysis of net assets between funds (continued)

Group	<i>Unrestricted funds</i>		<i>Restricted funds</i>	<i>Total funds</i>
	<i>General fund</i>	<i>Designated funds</i>		
	£	£	£	£
Fund balances at 31 December 2017 are represented by:				
<i>Intangible fixed assets</i>	—	143,696	—	143,696
<i>Tangible fixed assets</i>	—	51,409	—	51,409
<i>Investments</i>	1,719,819	4,100,000	—	5,819,819
<i>Current assets</i>	1,043,659	791,548	413,866	2,249,073
<i>Current liabilities</i>	(856,753)	(129,588)	(147,002)	(1,133,343)
Total net assets	1,906,725	4,957,065	266,864	7,130,654

Charity	<i>Unrestricted funds</i>		<i>Restricted funds</i>	<i>Total funds</i>
	<i>General fund</i>	<i>Designated funds</i>		
	£	£	£	£
Fund balances at 31 December 2018 are represented by:				
<i>Intangible fixed assets</i>	—	121,925	—	121,925
<i>Tangible fixed assets</i>	—	30,101	—	30,101
<i>Investments</i>	1,332,147	4,100,000	—	5,432,147
<i>Current assets</i>	607,548	658,524	84,841	1,350,913
<i>Current liabilities</i>	(160,800)	(58,102)	(18,354)	(237,256)
Total net assets	1,778,895	4,852,448	66,487	6,697,830

Charity	<i>Unrestricted funds</i>		<i>Restricted funds</i>	<i>Total funds</i>
	<i>General fund</i>	<i>Designated funds</i>		
	£	£	£	£
Fund balances at 31 December 2017 are represented by:				
<i>Intangible fixed assets</i>	—	143,696	—	143,696
<i>Tangible fixed assets</i>	—	51,409	—	51,409
<i>Investments</i>	1,719,821	4,100,000	—	5,819,821
<i>Current assets</i>	549,593	791,548	413,866	1,755,007
<i>Current liabilities</i>	(362,693)	(129,588)	(147,002)	(639,283)
Total net assets	1,906,721	4,957,065	266,864	7,130,650

19 Ultimate control and related party transactions

The charity has no ultimate controlling party.

No trustee received remuneration from the group and charity in respect of their services as trustees.

20 Guts UK Charity

The Society works closely with Guts UK Charity (previously known as Core – The Digestive Disorders Foundation) (Charity Registration No 1137029 and Company Registration No 07274105 (England and Wales)) to support Guts UK's mission to support research training for young doctors and scientists, the application of new knowledge to practice and the provision of patient information to the public; Guts UK is the only charity dedicated to the whole of gastrointestinal diseases. The Chairman of the Research Committee of the BSG is a trustee of Guts UK. The President of Guts UK is an ex-officio member of the BSG Council.

Transactions between the two charities during the year were as follows:

The Society continued to subvent 20% of its membership income, amounting to £78,396 (2017 – £78,163), which was paid partly in cash £56,856 and partly in services £21,540. The Society gave one grant of £5,000 to Guts UK during the year (2017 – two grants of £50,000 and £15,000) and is due to give a further grant of £10,000 to Guts UK during 2019.

21 Transfer of IBD Registry

Activities relating to the IBD registry database developed by the charitable company were transferred to a separate, independent company IBD Registry Limited (company number 11197749) which was incorporated on 9 February 2018. BSG is one of three members of IBD Registry Limited but is not represented on the board of directors.

In the year ended 31 December 2018 net assets held by BSG relating to IBD Registry were transferred to IBD Registry Limited on 8 November 2018.

	2018 £
Designated funds transferred to IBD Registry Limited	7,917
Restricted funds transferred to IBD Registry Limited	234,315
	<u>247,792</u>

Net assets transferred comprised:

	2018 £
Cash at bank and in hand	<u>247,792</u>