

**REPORT OF THE TRUSTEES AND
FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2022
FOR
THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

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**THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

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FOR THE YEAR ENDED 31 DECEMBER 2022**

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THE ASSOCIATION OF COLOPROCTOLOGY OF GREAT BRITAIN AND IRELAND

REPORT OF THE TRUSTEES FOR THE YEAR ENDED 31 DECEMBER 2022

The trustees who are also directors of the charity for the purposes of the Companies Act 2006, present their report with the financial statements of the charity for the year ended 31 December 2022. The trustees have adopted the provisions of Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019).

PUBLIC BENEFIT STATEMENT

The Association of Coloproctology's (ACPGBI) activities include promoting education and research in all matters appertaining to the science, art and treatment of patients with coloproctological disease.

The objectives are to provide specialized knowledge and advanced training, education, research and scholarship in science and technology in cooperation with other bodies to its members to benefit their patients.

In addition, the ACPGBI aims to be a complete resource of knowledge and help to patients with colorectal disease, empowering and ensuring the best treatments are available to all who seek them.

The ACPGBI's mission is derived from these objectives. The Trustees of ACPGBI are responsible for defining its strategic aims and directing its Executive's activities to further these objectives. The Council has had due regard to the Charity Commission's guidance on reporting public benefit.

Strategic aims

- " To promote clinical and basic research into colorectal disease of the highest quality
- " To promote the best possible treatments for patients with colorectal disease
- " To extend the frontiers of knowledge within and beyond existing research disciplines
- " To bring together research expertise within and beyond the ACPGBI to address the scientific challenges of today and the future
- " To identify, attract and develop trainee surgeons of the highest ability to provide research-led teaching and information sharing
- " To offer an educational experience that empowers members to be leaders in their chosen careers and contribute to the long-term needs of society
- " To engage with similar organisations around the world to understand, identify and lead emerging scientific challenges and solutions
- " To maximize the social and economic value of our education and research through the transfer of both talent and technology
- " To find innovative ways to extend the reach and impact of all our work
- " To maintain excellence by being efficient, effective, adaptable and integrated
- " To build mutually beneficial relationships with appropriate organisations in the UK and worldwide
- " To anticipate, understand and shape the thinking of stakeholders and policymakers in the UK and worldwide, including those in government, academia and industry

The report on ACPGBI's activities during the year 2022, which forms a significant part of this Annual Report, provides further information on our progress and achievements against these and other objectives.

THE ASSOCIATION OF COLOPROCTOLOGY OF GREAT BRITAIN AND IRELAND

REPORT OF THE TRUSTEES FOR THE YEAR ENDED 31 DECEMBER 2022

The ACPGBI business, organizational structure and working practices are governed by its constitution. This document is updated yearly, and any changes are approved at the AGM. ACPGBI is led by an Executive Committee and guided by a representative Council. Administration and marketing are carried out by its Secretariat. The Executive formulates policy and considers all matters concerning the Association. All decisions are notified to Council regularly for approval. Posts for Council, chapter representatives and major positions (President, Secretary, Treasurer etc.) are advertised on the website and ballots are held where appropriate.

Along with the ACPGBI office bearers (President, Honorary Secretary and Honorary Treasurer), the Executive Committee includes chairs of the Education and Training, External Affairs, Multidisciplinary Clinical and Research and Audit committees.

The executive appointments are made as either 'Assistant' (e.g., secretary and treasurer) or in waiting/elect (e.g., President). This gives appointees sufficient time (2 years) to become thoroughly acquainted with the roles they are due to take up at the Annual Meeting.

The Board of Trustees comprises the Executive members (President, Honorary Secretary and Honorary Treasurer) and non-executive members who include medical (at least five medical trustees and ideally will include one nurse) and lay members. The medical trustees are members with previous experience in holding office in the Association, none of whom currently sit on committees of the Association. The lay members would include a minimum of two patient representatives, a lawyer, a trustee from a financial background and a non-medical academic. Additional or replacement Trustees will be appointed by the Board of Trustees as they see fit, as there are no formal policies for inducting new Trustees.

ACPGBI has undergone a formal risk assessment process to help identify areas of concern and formulate suitable action plans. ACPGBI's short, medium and long-term priorities and goals are discussed in the annual strategy meetings, and appropriate action plans are finalized.

The following Trustees served the charity from 1st January 2022 to 31st December 2022.

President:
Mr Charles Maxwell-Armstrong (appointed 4 July 2022)
Professor Peter Sagar (resigned 4 July 2022)

Honorary Secretary:
Mr G Branagan (appointed 04 July 2022)
Mr J Wheeler (resigned 4 July 2022)

Honorary Treasurer:
Mr Athur Hari Krishnan

Non-Executive Trustees
Mr J Bell
Mrs M Bentley
Ms J Bradbury
Mrs A Demick
Prof P Finan (resigned January 2022)
Prof J Northover
Miss K Nugent
Mr P Rowbottom
Mrs J Sanders (appointed January 2022)
Mr N Scott
Mr G Williams (Chair)
Mr H Young

REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 DECEMBER 2022

OBJECTIVES AND ACTIVITIES
RESEARCH & AUDIT COMMITTEE

The Research and Audit Committee is currently chaired by Jim Tiernan, having taken over from Austin Acheson in July 2020. Elected members consist of Jared Torkington, Tom Pinkney, Frank McDermott and Sarah Duff; The ACPGBI/RCS Surgical Specialty Leads (SSLs) are Susan Moug and Dale Vimalachandran, supported by Associate SSLs Nick Heywood and Abigail Vallance; Ed Dickinson replaced Mohamed Rabie as the Duke's Club Representative; Gabby Thorpe is Nursing representative and Sue Blackwell joined us as patient representative, giving a total of 13 members. Andrew Beggs resigned during the year as he was unable to fulfil the required time commitment and Elaine Burns was elected into the vacant slot.

Edinburgh 2022

The Research Plenary featured a talk by Nicola Fearnhead, Chair of Bowel Research UK Scientific Committee, highlighting the impressive work funded by BRUK. There was a breaking trials session followed by a new initiative: a live, interactive audience participation event to evaluate the potential for studying two areas of unmet need. We explored two potential study topics: anastomotic leak salvage and sigmoid volvulus management.

R&A Longer Term Strategy

The role of the R&A Committee has changed hugely since the charity merger, as we no longer administer a grants process directly. Over the last two years we have worked to establish ourselves as a 'research consultancy', serving our membership to enable them to be research-active even if they have no access to local academic infrastructure. This has culminated in an agreement to select, develop and joint fund (ACPGBI/BRUK) official ACPGBI research projects. This brings together both the Research MDT and the audience-participation ideas trialled at Harrogate and Edinburgh AGMs respectively, as a process by which ideas from the membership are developed into fully backed, collaborative studies. Birmingham and Sheffield Clinical Trials Units have agreed to help run the ACPGBI research projects.

Bowel Research UK

As a trustee of BRUK, I have worked to strengthen the relationship between the charity and the Association. The BRUK CEO and/or Chair will attend an ACPGBI exec meeting twice per year to update them and BRUK are committed to distributing at least half of their grant funding to projects with an ACPGBI member as a PI.

EXTERNAL AFFAIRS COMMITTEE

Chair S Siddiqi

Members A Siddika, N Sengupta, K Adams, R Brady, N Chandratreya

Newsletter

The committee continues to deliver a weekly ACPGBI newsletter each Friday covering the topic of courses, conferences, guidelines, chapter meetings and news. We ensure equality, diversity and inclusion within this and the newsletter is directed to medical students, trainees, nurses, non-consultant and consultant grades equally. The format of the newsletter is changing to accommodate new technology and viewing needs of members.

REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 DECEMBER 2022

Website

The website continues to be updated as new guidelines, research and news becomes available. The committee is engaging with other committees to ensure information reaches the website and in a manner the committee wishes. This is time consuming and needs a dedicated individual from other committees to be proactive and look at the website with a critical eye then engage with the external affairs committee to enact change. A few committees have engaged and we look forward to the others too. The committee aims to start changing photos from stock photos to those of ACPGNI members. Also, to add videos for patient explanation of outcome data.

Social media

Our Twitter profile remains active especially during conference and courses. Equally, our LinkedIn profile is used in a similar manner. We realise trainees and other use other platforms. We are investigating other platforms but are concerned about the risks of not being in control of messaging. The key aspect of our social media is to avoid reputational damage to ACPGNI and promote equality, diversity and inclusion.

International Affairs

With the success of ACC in getting an international audience, the external affairs is trying to network with surgical societies in lower and middle income countries to foster education and training in those countries. We would highlight, access would be free to health care practitioners in those countries.

Council meetings for sister organisations

Post COVID, these seem to have stopped and we are trying to revive this practice.

Future

The role of the external affairs has changed and needs defining. We are planning a focus group with executive to start this process.

EARLY YEARS CONSULTANT NETWORK (EYCN)

The EYCN is chaired by Katie Adams and supported by a team of enthusiastic committee members.

Committee:
Early Years Consultant Network

Role of committee:
To establish and maintain a mentorship programme for early years consultants
To offer peer support to those consultants within their first 5 years of service

Goals set out for the year

1. Recruit to this year's mentoring programme
2. Formal accreditation for mentors
3. Run Peer support events throughout year

Activity for the year:

1. Recruited 16 new mentees- October 2022
2. 4 webinars conducted with Medtronic- Feb-April 2022
3. Peer support event (Medtronic)- Sterling, Scotland Jan 2022
4. ACP conference session - Edinburgh 2022

Future plans:
1. Webinar series - April 2023

2. Mentor recruitment October 2023
3. ACP conference session- Manchester 2023
4. Welcome packs for new consultants (Ethicon)

EQUALITY, DIVERSITY AND INCLUSION (EDI) COMMITTEE

Role of Committee

EDI for ACPGBI - striving to make colorectal surgery a level playing field for everyone (Mission Statement)
Through the EDI steering group, we aim to increase engagement with the wider colorectal surgical community/allied healthcare professionals and support their professional growth, simultaneously leading to growth of organisation as well. Our key objective is to support and improve equal representation and career/training progression of healthcare professionals in colorectal surgery.

Goals set out for the year

- o For ACPGBI's leadership and EDI committee to be 'EDI compliant'
- o Equality, Diversity and Unconscious Bias workshop for the executive committee and council members as a one off session (one hour duration)
- o Half a day session for the EDI committee and the steering group
- o Collaboration with EDI platforms of other societies and work on projects of common interest
- o Survey to gauge detailed demographics of our membership so as to improve representation in the leadership
- o Aiming for at least 2 EDI centric webinars per year
- o Aiming for a national collaborative for the SAS doctors

Activity during the year

- " EDI training for the EDI steering group (May 2022)
- " EDI workshop with invited speakers (May 2022)
- " EDI training for the ACPGBI Council (October 2022)
- " Collaborative efforts in advisory role for surgical societies in way of establishing their EDI committees/groups (BOMSS, ESCP)
- " Two webinars (SAS doctors and LGBTQ+)
- " Demographic survey at the ACPGBI annual conference in Edinburgh. Data to be presented at this year's annual meeting
- " Collaborative project with Dukes' Club regarding perception of SAS posts by trainees. Has been submitted for presentation at the ACPGBI annual conference. Manuscript in progress
- " Two citations for EDI committee - BJS and BMJ (Rapid response)
- " Comment on: Factors influencing resilience to postoperative delirium in adults undergoing elective orthopaedic surgery.
Br J Surg. 2023 Jan 10;110(2):281. Tokidis E, Mallappa S, Altaf K.

" Medical schools: More UK students are choosing eastern Europe
BMJ 2022; 378 doi: <https://doi.org/10.1136/bmj.o2248> (Published 20 September 2022)

Plans for the future

- o To establish and take forward the SAS initiative by ACPGBI (Most of the members of the SAS initiative are EDI committee members)
- o Mentorship programme to be undertaken with EYCN
- o Development of the EDI section on the ACPGBI website
- o Collation of resources for less than full time training and IMGs under one easy-to-navigate tool on the website
- o Increased representation and integration of colorectal ANPs into the ACPN (currently consists largely specialist colorectal nurses)
- o Joint EDI oriented fellowships with other societies
- o Webinars

PELVIC FLOOR SOCIETY

The Pelvic Floor Society (TPFS) was formed in 2012 and is an affiliate of ACPGBI. The Executive Committee is currently made up of the following members: C.Vaizey (Chair), T. Dudding (Chair in waiting), J. Cornish (Hon Sec), C. Hoh (Treasurer), W. Lai (Hon Membership Sec), J Randall (Chair Accreditation, Q&A), E. Carrington (Chair R&D), J. Grainger (Chair Education & Training), M. Chapman (ACPGBI Representative), W. Lai (Membership Secretary), K. Gorrison (Chair Programme Committee), P. Chaichanavichkij (Dukes Club Rep), K. Walsh (Chair Physiotherapy Committee), S. Fourie (Chair Specialist Nurse Committee), E. Jones (Chair Clinical Scientist Committee Chair), S. Squires (Patient Rep), S. Shaikh (Chapter Rep Scotland), R. Griffiths (Chapter Rep Wales), R. McBride (Chapter Rep Ireland including NI), A. Farmer (BSG Rep). Our membership numbers grow year on year, and we currently have over 430 members (compared to 384 in 2021). Approximately two thirds of our members are consultants, mainly colorectal consultants but we also have consultants from gastroenterology, gynaecology, urology, pain specialty and radiology. Allied health professional members (nurses, physiotherapists, and clinical scientists) form the second largest group within the society. All these members have voting rights within our society, creating an inclusive membership. We have approximately 20 non-voting members, made up of trainees, overseas specialists and honorary members.

In November 2022 we held our 13th annual conference in the historic Winstanley House in Leicester, a well-attended face to face meeting with a gala dinner at The National Space Centre. We are much indebted to all the hard work by Carmen Hoh who was the local organiser and Kim Gorrison, our Program Committee Chair, for all their hard work in making the event so successful with a program of lectures that entertained and enlightened even the most seasoned pelvic floor surgeons. A selection of Masterclasses (Endoanal Ultrasonography and Sacral Neuromodulation) took place the day before as well as an Allied Health Professional full study day.

TPFs also working with NHSE's Outcome Registries Program which will build a Registry including procedures used to treat of SUI, POP and Rectal Prolapse. It is anticipated that all implantables will eventually be on a Registry. There is an imminent plan for mesh excision following rectopexy to be included in the Specialist Mesh Centres Service Specification of the Mesh Centres that have opened in England.

Further projects for 2023 include a new website, already designed and a survey on the training of emergency and colorectal surgeons on the management of acute obstetric injury.

Our treasurer has reported a healthy balance going forward into 2023, enabling us to continue to support courses and education, including funded places to Cardiff Pelvic Floor Masterclass and Dundee Cadaveric Course, providing speakers and access to the Athens meeting in April 2022 and we have supported regional groups including the Southern Pelvic Floor Group meeting in South Wales in January 2023.

Finally, TPFS introduced Unit Accreditation five years ago, a process of voluntary submission of evidence from Pelvic Floor MDTs in order to identify units that provide high quality care for patients with pelvic floor disorders. PF units awarded unit accreditation also have TPFS approval for their clinical fellowships. So far nine sites in the UK have successfully achieved Unit Accreditations, with one already re-accredited and one more in the process of application. TPFS encourages all units to submit data to this peer review process. Accreditation details and how to apply are available on our website.

ASSOCIATION OF COLOPROCTOLOGY NURSES (ACPN)

The Association of Coloproctology Nurses currently has 99 active members and 15 Committee members, with Committee vacancies for Northern, Northern Ireland, North East Thames, North Western, Trent and West Midlands. Three Committee members have stepped down, including Carol Katte, who retired from the Committee this year after more than 15 years of committed contribution to ACPN and was sent a card and gift from the Association in thanks for her support and commitment. We have welcomed new Committee members Chelsea Owen (N Wales), Cheryl Hides (Yorkshire), Emma Jenkins (South Western), Esme Steer (South Western), Linnet McGeever (Scotland), Samantha Gayle (North West Thames), who join Gabrielle Thorpe (Chair), Jay Bradbury, Jane McCulloch, Jane Turner, Samantha Seeker, Julie Lane, Oonagh Staunton, Tracey Becker, Lisa Gibb. In 2022, the ACPGBI confirmed that the subscription fee for ACPN members would remain at £25 per annum and that they would continue to offer 50 free places at the Annual Meeting per year for ACPN members. The ACPN are extremely grateful for this generous concession for its members, which is an ongoing incentive for new ACPN membership.

During 2022-23, the ACPN Committee have focussed on gaining ACPN representation on the ACPGBI Clinical Sub-Committees to provide a valuable nursing perspective on the work of these Committees in addition to development and networking opportunities for these members. Representatives must be ACPN members, but do not have to serve on the ACPN Committee and have been asked to apply through expression of interest open to all members. We have now appointed ACPN members to the following Clinical Sub-Committees: Advanced Malignancy - Claire Taylor, Amanda Coop; Endoscopy - Maria Pettman; Inflammatory Bowel Disease - Paula Harrison; Peritoneal Malignancy - Oonagh Staunton; Robotics - Dolly Dowsett. We will ask for expressions of interest again for the remaining vacancies after the ACPN Annual Meeting in Manchester on 4 July 2023.

The 2022 Annual General Meeting of the ACPN took place on Tuesday 5 July 2022 at the Annual Meeting of the ACPGBI in Edinburgh. At the AGM, members of the Committee currently holding key positions were voted in by the members, with Gabrielle Thorpe as Chair and ACPN representative on the Research & Audit Committee, Carol Katte as ACPN representative on the Multidisciplinary Clinical Committee and Lisa Gibb as ACPN Representative on the Education Committee. At the time there was no Deputy Chair in post and no ACPN representation on the External Affairs or EDI Committees. Since the AGM, we have appointed Linnet McGeever as Deputy Chair, Samantha Gayle as ACPN Representative on the External Affairs Committee and, following the resignation of Carol Katte, Tracey Becker as the ACPN Representative on the Multidisciplinary Clinical Committee.

The ACPN sessions at the ACPGBI Annual Meeting in July 2022 comprised a plenary session on pre-habilitation in coloproctology, plus a combined AGM, oral short-paper session of accepted abstracts and an interactive workshop on stratified follow-up. All sessions were well-attended by both ACPN and general members and evaluations good. As many ACPN members attend as the only representative from their Trust, we introduced a half-hour coffee/tea break half-way through each session to allow for networking opportunities, which was a great success.

In 2022, ACPN came to an arrangement with the journal Gastrointestinal Nursing (GIN) that ACPN members could have a 25% reduction in journal costs as part of their membership and that ACPN could submit a regular paper or advert for publication in the journal, which is published every two months. Over the past year, in addition to adverts for ACPN, we have published two papers relating to the plenary session and workshop at the 2022 Annual Meeting, written by members of the Committee, plus a paper by Maria Pettman about the work of the Endoscopy Clinical Sub-Committee. We have a full plan for the year ahead, with papers to include an overview of the plenary session and workshop at the forthcoming Annual Meeting in Manchester, papers on Lynch Syndrome and the Research Pillar of Practice, and one or two papers written by ACPN representatives on the Clinical Sub-Committees about the work of the Committee. All papers start and end with information about ACPN and details of how to become a member. Copies of the papers published are available on the ACPN pages on the website.

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Continuing the collaboration with GIN and filling the remaining vacancies on the Clinical Sub-Committees remain key priorities for the ACPN Committee in 2023-24. The Chair of ACPN will move to Linnet McGeever for two years at the 2023 Annual Meeting, who will develop her own strategic direction for the group.

DUKES' CLUB

The Dukes' Club is the official training arm of the Association of Coloproctology of Great Britain and Ireland. The society is run by elected colorectal surgery trainees to represent the views of trainees across the UK and Ireland on education and training. The Dukes' Club committee is currently led by Mr Mohamed Rabie, with Miss Panchali Sarmah as the immediate past president (2021/22). Miss Lillian Reza is the president-in-waiting with a wider executive committee and several regional representatives to ensure full representation and dissemination across the UK and Ireland.

As the official training arm of the Association of Coloproctology of Great Britain and Ireland, we believe that The Dukes' Club has strongly supported and represented trainees throughout the year. Here, we review our activities during 2022.

Dukes' Educational Strategy

Throughout the year we worked hard to deliver high-quality educational content.

We ran webinars on:

- " IBD - Navigating the Surgical Management of UC.
- " Pelvic floor essentials: anorectal physiology and SNS for trainees.
- " Anatomy of the rectum and its application in TME and beyond TME surgery.
- " Applied embryology and anatomy for colon cancer surgery
- " Emergency colorectal surgery webinars

EGS and Trauma Symposium

The inaugural EGS and trauma symposium was held on 7-8 December 2021. This unique event, hosted by The Dukes' Club, Roux Group, Moynihan Academy, and ASiT, covered syllabus topics to MRCS and FRCS levels and was attended by more than 550 delegates.

Proctology Day

18 March 2022, Northern General Hospital in Sheffield

A face-to-face educational day was held in Sheffield covering the management of anorectal disorders, led by Mr Phil Tozer and supported by the ACPGBI Proctology subcommittee.

Introduction to Endoscopy course

Our inaugural Introduction to Endoscopy course, providing an overview of safe endoscopy and hands-on simulation training. The course was aimed at ST3-4 trainees with limited or no endoscopy experience.

Fundamentals of Colorectal Surgery video series

We published two more instructional operative video published on the Colorectal Disease YouTube channel on TME and laparoscopic right hemicolectomy video. We are grateful to our consultant trainers for allowing us to record and submit these videos.

ACPGBI conference Dukes' Programme

In July, the Dukes' Club enjoyed a successful and integrated programme at the ACPGBI conference. We ran a preconference Basic Robotics Course supported by faculty from the ACPGBI Robotics.

On Monday, We had a fascinating session 'Hot Seat Experts' symposium, with experts responding to training concerns across topics including the introduction of training hubs, training in robotic surgery and careers in emergency general surgery. After a break of several years, our ever-popular Fellowship Speed Dating was back. We are grateful to Dr Judith Johnson, a lecturer at the University of Leeds, with a background in research into healthcare workforce wellbeing, for speaking on the topic of Burnout.

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Cadaveric AWR and TME Courses

Getting hands-on and hands in to the abdominal wall, Colorectal trainees up and down the country helped us celebrate the 25th Anniversary of the Dukes' Club this year. In the run-up to the annual weekend, cadaveric courses were run with great feedback.

We ran the cadaveric AWR Course, held on 14th September 2022. The one-day course held at St Mark's Hospital in London was held for senior colorectal trainees with a subspecialty interest in AWR. The highly experienced and friendly faculty of Colorectal and Plastic Surgery AWR specialists took the delegates through an intense day of hands-on training covering the basics from anatomy to step-by-step advanced techniques utilised in the sphere of abdominal wall reconstruction and closure.

A TME cadaveric course was successfully run with great feedback. We had a stellar faculty with delegates from across the UK.

Dukes' Educational Weekend

Our 25th Anniversary Dukes' Club Weekend was attended by trainees from the UK and Ireland, with members attending across all levels of training, from Foundation doctors to Registrars. Feedback has been overwhelmingly positive, with all sessions rated as good/very good by >90% of attendees and 90% saying they would recommend our weekend to a colleague.

Dukes' Research Strategy

The collaborative continues to support national projects including Damascus and IMPACT. We also ran the Essentials of Surgical Research event in collaboration with Roux Group and BASO. This was a 1-day face-to-face event covering all essentials for surgical research. The day was suited for those at an early stage in their research pathway, those planning to undertake out of programme.

EDI

We continue to be proud of the diversity within our executive committee, regional representatives and membership. This year we delivered a fully anonymized executive committee and regional representative vote, which encouraged a wider range of applications from across the UK and Ireland and published a new set of Dukes' Club EDI guidelines. We also invited attendees of our educational weekend to vote for the new Dukes' Vice president for the first time. This used to be elected by executive members only in the past.

Industry Partnership

Our platinum industry sponsor during 2022 has been Ethicon. Our expansion in portfolio has been generously supported by several industry partners including Ethicon, 3M, Cook Medical, Gore, Medtronic and Corza medical. We have strengthened our relationships with all industry partners over the last 12 months which has enabled us to provide a range of high-quality teaching and educational opportunities to our membership.

Future Plans

Overall, we have enjoyed a very successful year despite continuing disruption due to the pandemic. We continue to see a significant expansion of our membership alongside our portfolio activities on a regional and national scale. We will continue to build on our successes over the last 12 months to deliver high-quality, innovative educational and research opportunities to our membership. We hope to contribute fully to the ACPGBI Annual Meeting in Manchester in July and our face-to-face residential course in September 2023. We are also developing a national robotic training program with Intuitive which is supported by ACPGBI and HEE. We are developing the Fundamentals of colorectal surgery course with ACPGBI and the Dukes Surgical Podcast.

THE JOURNAL- COLORECTAL DISEASE

Colorectal Disease journal continued to perform well in 2022. Colorectal Disease journal is the flagship organ of the association and remains a jewel in its crown.

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Samantha Davies took over as Wiley's Senior Journal Publishing Manager in November 2022. Neil Smart is the current editor of the journal and has a strategic plan for the journal with collaboration with the association. The publishing agreement between the ACPGBI and Wiley for Colorectal Disease journal was renewed in December 2022.

Total revenues for 2022 were £565,326, of which non-subscription revenue was £306,664. These values are 25% more than 2021 revenues due to enhanced open access revenue of £193,416. The total shared profit was £397,524, with a net royalty payable to ACPGBI of £198,762. This royalty was 50% up from 2021 figure of £132,643.

The journal is officially recognised by Index Medicus and is listed on Medline. The journal's 2-year Impact Factor stands at 3.917 for 2021, an increase from the previous year highlighted on the journal's web page.

ACPGBI PATIENT LIAISON GROUP

Role of Group

The Patient Liaison Group represents the perspective of the lived experience of patients who have been treated for bowel disease, including cancer, inflammatory bowel diseases and functional bowel disorders. Together with the ACPGBI, the PLG is committed to improving the experience and outcomes of all patients with colorectal disease by pursuing constructive dialogue between clinicians and patients. Composed of eight lay people from diverse backgrounds, the PLG is entirely voluntary and unpaid, meeting monthly via Zoom and face-to-face once a year at the ACPGBI Annual Meeting.

Goals set out for the year

- " Attendance at ACPGBI Council meetings
- " Membership of ACPGBI committees which set standards of care
- " Involvement in the Annual Meeting, by organising a PLG Session
- " Preparing guidelines and other documents, by invitation to other groups
- " Participating in relevant PPI activities

Activity during the year

- " ACPGBI 2022 - Edinburgh. PLG Session: We Are Not Just a Piece of Meat: the role of patients in bowel surgery. Looking at all elements of the patient journey from diagnosis to their final discharge from hospital
- " Acute Presentation of colorectal cancer - an international snapshot (APOLLO) study. Patient representative
- " Integrated Technologies for Improved Polyp Surveillance (INCISE). PPI representative
- " UK Cohort study to Investigate the prevention of Parastomal Hernia (CIPHER). Study Steering Committee
- " Transforming the treatment of fistula-in-ano: A novel bioresorbable Seton-Scaffold. Study Steering Committee
- " Reduction Of Surgical Site Infection using a Novel Intervention (ROSSINI 2). Trial Steering Committee
- " An international multicentre randomised controlled trial to assess the effect of Appendectomy on the Clinical Course of Ulcerative colitis (AUCCURE 2). Trial Steering Committee
- " A multicentre, randomised controlled trial of Laparoscopic versus Open Colorectal Surgery in the Acute Setting (LaCeS2). Trial Management Committee
- " Development of a Patient Reported Outcome Measure for Gastrointestinal Recovery (PRO-digi). Steering Group
- " East midland cancer alliance (ECAG) for colorectal cancer
- " NHS Specialised Colorectal Clinical Reference Group PPI member
- " The National Gastro-Intestinal Cancer Audit Programme (GICAP). Board member
- " National Bowel Cancer Audit (NBOCA). Clinical Advisory Group Members and Chair of their Patient and Carer Panel
- " Emergency General Surgery webinar panel member.
- " Reviewing/updating patient leaflets - Bowel Cancer UK
- " Leading local stoma support group
- " Leading local bowel cancer support group
- " Bowel cancer awareness talks

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- " Promotion of PPI in other settings
- " Building of social media presence
- " Requests for nominations for various research groups etc outside of ACPGBI

Plans for the future

- " Representing the interests of patients at all levels update work of the ACPGBI
- " Continue to facilitate patient representation across the range of ACPGBI committees
- " Update PLG Terms of Reference
- " Review PLG membership and highlight gaps in the experience of current PLG members to expand in a structured manner. Consider EDI in the recruitment of new members as we appreciate we do not reflect cultural diversity
- " Build on relationships with ACPGBI members and relevant outside organisations to encourage collaboration
- " Leading the patient and carer activities of the National Bowel Cancer Audit (NBOCA)

STRATEGIC REPORT

FINANCIAL REVIEW

Financial results 1st January to 31st December 2022

The income to ACPGBI was primarily from direct membership subscriptions and from the Annual General Meeting. Additionally, ACPGBI received a small amount of interest on deposited reserves. Additional income was derived from the Pelvic Floor Society and the Dukes' Club. ACPGBI also received revenue from a profit share arrangement with Wiley, the publisher of the journal Colorectal Disease. The Trustees are confident that all tax liabilities have been recognised and administered.

Expenditure relates to the running costs of the Association, the expenses of running the Annual Meeting and the cost of providing Colorectal Disease to Ordinary Surgical Members and wages and salaries.

Total income from all sources for the period ending 31st December 2022 was £1,180,571. The total expenditure in the period ending 31st December 2022 was £1,018,396. The net income in the period ending 31st December 2022 was £162,175. The total funds on 31st December 2022 in all accounts held by the Association were £1,161,173.

Cash books were traditionally maintained on MS Excel sheets. This imposed extra workload for our administrative team and auditors. We have now signed up for cash book management using Xero on online platform for a seamless and integrated cash flow accounting. The process was initiated in October 2022 to start the accounting process from January 2023.

The annual ACPGBI strategy meeting was held 13 and 14th November 2022. The financial strategy for the next financial year was discussed and debated. It was noted that for the first time the total cash balance of the two index accounts (business and annual meeting) had crossed the 1 million mark due to increased cash flow from subscriptions and sponsorships while delivering core activities, signifying the resourceful level of activity in the association and financial diligence.

REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 DECEMBER 2022

STRATEGIC REPORT

Financial review

Investment Policy

It was evident that over the years, the Association has accumulated surplus cash balances in these two accounts totalling about 800-1000K. The current nominal interest rate earned by the two accounts is 0.01%, which is well below prevailing inflation rates. The rising inflation in the latter half of 2022 exaggerated this depreciation and loss of value in such accounts.

The net loss over successive years perpetrates a substantial loss of value for the accumulated capital. This net loss is a substandard and unacceptable value to the members' subscriptions and does not stand in good stead for the Association's long-term worth. Depreciation of the reserve cash reduces the capacity of the Association to weather the losses in challenging times such as those imposed by unexpected global occurrences such as the Covid-19 pandemic.

The Honorary Treasurer proposed a framework to mitigate the current depreciation of the Association's surplus cash reserves. Initial enquiries led to a series of deliberations which revealed how similar professional associations manage their excess funds. The case for safe investment of surplus funds was discussed in the ACPGBI executive meeting on 20/09/2021. With the concurrence of the Executive and the Trustees, an effort to explore safe investment by a team of Trustees. A series of virtual meetings with potential stakeholders were conducted. The Honorary Treasurer proposed a framework to mitigate the current depreciation of the Association's surplus cash reserves. Initial enquiries led to a series of deliberations which revealed how similar professional associations manage their excess funds. The case for safe investment of surplus funds was discussed in the ACPGBI executive meeting on 20/09/2021. With the concurrence of the Executive and the Trustees, an effort to explore safe investment by a team of Trustees. A series of virtual meetings with potential stakeholders were conducted.

Ten financial organisations were contacted with request for proposals (RFP). Six of the ten responded of which four were shortlisted based on stringent criteria for more detailed discussions. A dedicated virtual presentation meeting with them was attended by key trustees and executives on 5th July 2022. Further deliberations based on company profile, charitable and overall assets under management, environmental and social governance, risk management, access to funds at short notice and assurance on capital preservation were some of the categories analysed for each of the providers. The final choice of Ruffer was ratified in December 2022. The ACPGBI's investment policy statement (IPS) was drafted in December 2022 and debated elaborately with the stakeholder and the ACPGBI panel before it was finalised in early 2023.

The final sign off and transfer of funds will happen in the FY 2023.

STRATEGIC REPORT

Risk analysis

ACPGBI recognises the financial risks inherent with the funding of the Annual Meeting. The Annual Meeting's financial success depends on the number of delegate registrations, exhibition income and sponsorship, which may vary from year to year.

Currently, the estimated funds required for hosting an Annual Meeting are in the region of £450,000. For this reason, the ACPGBI retains funds of over £450,000 to cover the costs of an Annual Meeting, which may fail due to factors outside the Association's control. Although ACPGBI takes out routine insurance in this respect, including anti-terrorism cover, this would not protect against the general financial reserves and running costs of ACPGBI. In the current pandemic environment, no insurance policy will cover the loss of capital or revenue from a cancellation or disruption due to a pandemic. The incorporation of ACPGBI has removed the personal financial risk born by the Trustees.

The adoption of virtual meeting platforms enabled the Association to educational events in the pandemic environment, albeit at a considerable additional expense. In 2022, the association decided to keep the advanced coloproctology course (ACC) as a virtual event and the annual meeting as a face-to-face event. The registrations in all events were appreciable and substantial and were worth all the extra effort to organise these events.

We have noticed a reduced appetite for sponsoring online virtual events by the industry. The changes in the post-pandemic landscape that affect meetings and events will be closely monitored, and appropriate measures will be adopted to mitigate the loss of revenue from such matters.

In the later half of 2022, inflation gradually increased and this started affecting the costs of running events.

Whilst building up the capital reserve, the investment policy of ACPGBI remains to maintain the current accounts at zero at the end of each working day with automatic transfer of any reserves through the business reserve account for the two main accounts, namely the general account and the Annual Meeting account. The policy has been to keep the Association's resources in risk-free accounts rather than invest in other ways, which might bring a higher rate of return, but would carry a risk which could result in a loss of capital and jeopardise both the charity's funds and the Trustees.

For these reasons, ACPGBI chose to incorporate as a charity so that any financial risk would be removed from the Trustees and become the responsibility of a company limited by guarantee.

ACPGBI is incorporated as a charity, and appropriate funds can now be disbursed without personal financial risk to its Trustees.

REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 DECEMBER 2022

STRATEGIC REPORT

Future Financial Strategy

The plans, priorities and actions for the next 12 months are outlined below under principal strategic themes.

Operations

- " Balance income and outgoings within the principal business account
- " Fund future initiatives based on the annual strategy plan using profits from the Annual Meeting and the agreed capital allocation
- " Maintain cost centres for identified entities (ACC, EYCN, EDI) to make them self sufficient
- " Ensure profitability and sustainability of our organisation's events

Revenue stream

- " Retain current membership base
- " Attract new members through reduced subscription rates for the first year
- " Offer membership benefits, offers and discounts with industry partnership
- " Make it expensive for non-members to attend the Annual Meeting. It will be cheaper to become a member of ACPGBI

Investments

- " Initiate transfer of funds and implement the investment strategy to protect cash reserve from inflationary loss

Funding fellowships

- " Continue to fund two Dukes' Club travelling fellowships
- " Continue to fund the South African Fellow together with the American, Australasian and European Fellows (there is a reciprocal arrangement with the Americans and Australasians)
- " Continue to fund the 8 ACPGBI/RCS badged fellowships
- " Finalise new fellowship sponsorship/partnership funding with respective committees, e.g., robotic surgery

Regional activity and initiatives

- " Continue limited (max £1,000 per year) funding to facilitate Chapters to run meetings during the year
- " Audit chapter bank accounts

Annual Meeting

- " Continue to provide 50 free places at the Annual Meeting to nurse members
- " Continue to allow medical students free registration for the Annual Meeting and reimburse their travelling expenses if they are presenting at the conference, but not their accommodation costs

Industry partnership

- " Meet key players to discuss and plan collaboration details

Colorectal disease

- " Colorectal Disease strategy and financial planning meeting with Wiley

Staff

- " Provide annual appraisal and salary scale review for our staff
- " Explore restructuring staff activities and job configuration to support our organisation's functioning to improve outcomes, satisfaction and cost-effectiveness

**THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

**REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 DECEMBER 2022**

STRATEGIC REPORT

STRUCTURE, GOVERNANCE AND MANAGEMENT

The ACPGBI, established in 1990, was registered with the Charity Commissioners. The charity was an unincorporated Association (registration number 1013924) until 30th June 2007. All the assets of the former charity were transferred to the Association of Coloproctology of Great Britain and Ireland, a company limited by guarantee (company number 05962281) and registered as a charity with the Charity Commission (charity number 1118063).

STRUCTURE, GOVERNANCE AND MANAGEMENT

Structure, Governance and Management

The charity is controlled by its governing document, a deed of trust, and constitutes a limited company, limited by guarantee, as defined by the Companies Act 2006.

REFERENCE AND ADMINISTRATIVE DETAILS

Registered Company number

05962281 (England and Wales)

Registered Charity number

1118063

Registered office

Royal College of Surgeons
35-43 Lincolns Inn Fields
London
WC2A 3PE

Trustees

Mr A D N Scott
Mr J G Williams
Prof R J C Steele (resigned 31/12/2022)
Mr P Sagar (resigned 6/7/2022)
Mr P Finan (resigned 1/1/2022)
Mrs J Bradbury
Prof J Wheeler (resigned 6/7/2022)
Mr J P Bell
Mrs M Bentley
Mrs M A Demick
Mr H Young
Mr P J Rowbottom
Dr K P Nugent
Mrs J Sanders (appointed 1/1/2022)
Mr A B Harikrishnan (appointed 7/7/2022) (resigned 3/7/2023)
Mr C Maxwell-Armstrong (appointed 6/7/2022) (resigned 4/7/2023)
Mr T A Cook (appointed 1/1/2023)
Mr J Northover (resigned 31/12/2022)
Mr D McArthur (appointed 4/7/2023)
Professor J Torkington (appointed 4/7/2023)

Company Secretary

Mrs A Sutton

Senior Statutory Auditor

Mr Keith Adrian Ford

REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 DECEMBER 2022

REFERENCE AND ADMINISTRATIVE DETAILS

Auditors

Ford Bentall LLP
Statutory Auditor
60 High Street
Chobham
Surrey
GU24 8AA

STATEMENT OF TRUSTEES' RESPONSIBILITIES

The trustees (who are also the directors of The Association of Coloproctology of Great Britain and Ireland for the purposes of company law) are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

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

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

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

In so far as the trustees are aware:

- there is no relevant audit information of which the charitable company's auditors are unaware; and
- the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information.

STATEMENT OF TRUSTEES' RESPONSIBILITIES - continued
TRUSTEES' RESPONSIBILITIES

The Board of Trustees were set up to add oversight to the governance of ACPGBI, separate from the Executive.

The Trustees (who are also directors of The Association of Coloproctology of Great Britain and Ireland for the purposes of company law) are responsible for preparing the Trustees' Annual Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Trustees to prepare financial statements for each financial year, which give an accurate and fair view of the charitable company's state of affairs and the incoming resources and application of resources, including the income and expenditure of the charitable company for that period. In preparing these financial statements, the Trustees are required to:

- " Select suitable accounting policies and then apply them consistently.
- " Observe the methods and principles in the Charities SORP.
- " Make judgements and estimates that are reasonable and prudent.
- " State whether UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements.
- " Prepare the financial statements on a going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

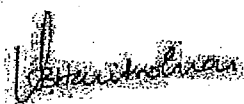
The Trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding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

In so far as the Trustees are aware:

- " There is no relevant audit information of which the charitable company's auditor is unaware; and
- " The Trustees have taken all steps they ought to have taken to make themselves aware of any relevant audit information and establish that the auditor is aware of that information.

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

Approved by the Trustees and signed on their behalf by



Athur Harikrishnan
Honorary Treasurer
Association of Coloproctology of Great Britain and Ireland

Dated 27 October 2023


**THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

**REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 DECEMBER 2022**

AUDITORS

The auditors, Ford Bentall LLP, will be proposed for re-appointment at the forthcoming Annual General Meeting.

Report of the trustees, incorporating a strategic report, approved by order of the board of trustees, as the company directors, on²¹.....October 2023 and signed on the board's behalf by:



.....
Mr A B Harikrishnan - Trustee

**REPORT OF THE INDEPENDENT AUDITORS TO THE MEMBERS OF
THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

Opinion

We have audited the financial statements of The Association of Coloproctology of Great Britain and Ireland (the 'charitable company') for the year ended 31 December 2022 which comprise the Statement of Financial Activities, the Balance Sheet, the Cash Flow Statement 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 (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 December 2022 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the 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 Auditors' responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the trustees with respect to going concern are described in the relevant sections of this report.

In auditing the financial statements, we have concluded that the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Group's or the parent charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Trustees with respect to going concern are described in the relevant sections of this report.

**REPORT OF THE INDEPENDENT AUDITORS TO THE MEMBERS OF
THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

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 Report of the Independent Auditors 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 this gives rise to a material misstatement in the financial statements themselves. 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 Report of the Trustees for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Report of the Trustees has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Report of the Trustees.

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

- adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of trustees

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

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

Our 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 a Report of the Independent Auditors 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.

Extent to which the audit was considered capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We identified and assessed the risks of material misstatement of the financial statements from irregularities, whether due to fraud or error, and discussed these between our audit team members. We then designed and performed audit procedures responsive to those risks, including obtaining audit evidence sufficient and appropriate to provide a basis for our opinion.

We obtained an understanding of the legal and regulatory frameworks within which the charitable company, focusing on those laws and regulations that have a direct effect on the determination of material amounts and disclosures in the financial statements. The laws and regulations we considered in this context were the Companies Act 2006, the Charities Act 2011 together with the Charities SORP (FRS 102). We assessed the required compliance with these laws and regulations as part of our audit procedures on the related financial statement items.

In addition, we considered provisions of other laws and regulations that do not have a direct effect on the financial statements but compliance with which might be fundamental to the charitable company's ability to operate or avoid a material penalty. We also considered the opportunities and incentives that may exist within the charitable company for fraud. The laws and regulations we considered in this context were General Data Protection Regulation (GDPR). Health and safety legislation.

Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence, if any.

We identified the greatest risk of material impact on the financial statements from irregularities, including fraud, to be within the timing of recognition of Independent Medical Education income, congress income from exhibition and sponsorship, publishing income, provisions and the override of controls by management. Our audit procedures respond to these risks included enquiries of management, and the Trustees about their own identification and assessment of the risks of irregularities, sample testing on the posting of journals, designing audit procedures to test the timing of income, reviewing the calculations of provisions, reviewing accounting estimates for biases, reviewing regulatory correspondence with the Charity Commission and reading minutes of meetings of those charged with governance.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations (irregularities) is from events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it. In addition, as with any audit, there remained a higher risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. We are not responsible for preventing non-compliance and cannot be expected to detect non-compliance with all laws and regulations.

**REPORT OF THE INDEPENDENT AUDITORS TO THE MEMBERS OF
THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

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 Auditors report 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 its members, as a body, for our audit work, for this report, or for the opinions we have formed.



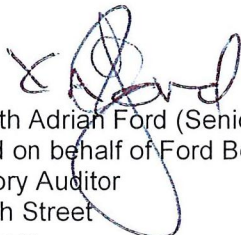
Keith A Ford (Senior Partner)
For and on behalf of
Ford Bentall LLP
60 High Street
Chobham
Surrey
GU24 8AA

Date 27 October 2023

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 Report of the Independent Auditors. ABC

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 auditors' 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.



Mr Keith Adrian Ford (Senior Statutory Auditor)
for and on behalf of Ford Bentall LLP
Statutory Auditor
60 High Street
Chobham
Surrey
GU24 8AA

Date: ²⁷.....October 2023

**THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

**STATEMENT OF FINANCIAL ACTIVITIES
FOR THE YEAR ENDED 31 DECEMBER 2022**

	Notes	Unrestricted fund £	Restricted funds £	2022 Total funds £	2021 Total funds £
INCOME AND ENDOWMENTS FROM					
Charitable activities	3				
Education		218,082	-	218,082	135,429
Annual General Meeting		465,582	-	465,582	218,833
Publication Income		198,762	-	198,762	132,643
Other trading activities	2	298,145	-	298,145	291,538
Total		<u>1,180,571</u>	<u>-</u>	<u>1,180,571</u>	<u>778,443</u>
EXPENDITURE ON					
Charitable activities	4				
Education		135,808	-	135,808	115,701
Provision of Publications		62,748	-	62,748	59,526
Governance Costs		223,496	-	223,496	180,183
Annual General Meeting		596,344	-	596,344	268,092
Total		<u>1,018,396</u>	<u>-</u>	<u>1,018,396</u>	<u>623,502</u>
NET INCOME		162,175	-	162,175	154,941
RECONCILIATION OF FUNDS					
Total funds brought forward		1,382,686	8,532	1,391,218	1,236,277
TOTAL FUNDS CARRIED FORWARD		<u>1,544,861</u>	<u>8,532</u>	<u>1,553,393</u>	<u>1,391,218</u>

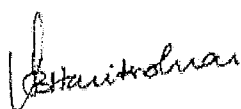
The notes form part of these financial statements

**THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

**BALANCE SHEET
31 DECEMBER 2022**

	Notes	2022 £	2021 £
FIXED ASSETS			
Intangible assets	10	49,158	54,802
Tangible assets	11	<u>1,378</u>	<u>1,493</u>
		50,536	56,295
CURRENT ASSETS			
Stocks	12	-	479
Debtors: amounts falling due within one year	13	460,825	505,426
Cash at bank		<u>1,161,173</u>	<u>969,808</u>
		1,621,998	1,475,713
CREDITORS			
Amounts falling due within one year	14	(119,141)	(140,790)
NET CURRENT ASSETS		<u>1,502,857</u>	<u>1,334,923</u>
TOTAL ASSETS LESS CURRENT LIABILITIES		<u>1,553,393</u>	<u>1,391,218</u>
NET ASSETS		<u>1,553,393</u>	<u>1,391,218</u>
FUNDS	16		
Unrestricted funds		1,544,861	1,382,686
Restricted funds		<u>8,532</u>	<u>8,532</u>
TOTAL FUNDS		<u>1,553,393</u>	<u>1,391,218</u>

The financial statements were approved by the Board of Trustees and authorised for issue on27.....October 2023 and were signed on its behalf by:



...
Mr A B Harikrishnan - Trustee

The notes form part of these financial statements

**THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

**CASH FLOW STATEMENT
FOR THE YEAR ENDED 31 DECEMBER 2022**

	Notes	2022 £	2021 £
Cash flows from operating activities			
Cash generated from operations reconciling	1	199,255 <u>1</u>	46,643 <u>-</u>
Net cash provided by operating activities		<u>199,256</u>	<u>46,643</u>
Cash flows from investing activities			
Purchase of intangible fixed assets		<u>(7,891)</u>	<u>(59,784)</u>
Net cash used in investing activities		<u>(7,891)</u>	<u>(59,784)</u>
		<u> </u>	<u> </u>
Change in cash and cash equivalents in the reporting period		191,365	(13,141)
Cash and cash equivalents at the beginning of the reporting period		<u>969,808</u>	<u>982,949</u>
Cash and cash equivalents at the end of the reporting period		<u><u>1,161,173</u></u>	<u><u>969,808</u></u>

The notes form part of these financial statements

**THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

**NOTES TO THE CASH FLOW STATEMENT
FOR THE YEAR ENDED 31 DECEMBER 2022**

1. RECONCILIATION OF NET INCOME TO NET CASH FLOW FROM OPERATING ACTIVITIES

	2022	2021
	£	£
Net income for the reporting period (as per the Statement of Financial Activities)	162,175	154,941
Adjustments for:		
Depreciation charges	13,649	7,649
Loss on disposal of fixed assets	-	2,520
Decrease in stocks	479	-
Decrease/(increase) in debtors	44,601	(165,813)
(Decrease)/increase in creditors	<u>(21,649)</u>	<u>47,346</u>
Net cash provided by operations	<u>199,255</u>	<u>46,643</u>

2. ANALYSIS OF CHANGES IN NET FUNDS

	At 1/1/22	Cash flow	At 31/12/22
	£	£	£
Net cash			
Cash at bank	<u>969,808</u>	<u>191,365</u>	<u>1,161,173</u>
	<u>969,808</u>	<u>191,365</u>	<u>1,161,173</u>
Total	<u>969,808</u>	<u>191,365</u>	<u>1,161,173</u>

The notes form part of these financial statements

1. ACCOUNTING POLICIES

Basis of preparing the financial statements

The financial statements of the charitable company, which is a public benefit entity under FRS 102, have been prepared in accordance with the Charities SORP (FRS 102) 'Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)', Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' and the Companies Act 2006. The financial statements have been prepared under the historical cost convention.

Income

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

Expenditure

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 a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

Allocation and apportionment of costs

Expenditure is allocated to the relevant activity categories on a basis that is consistent with the use of that resource.

- Costs of generating funds includes all cost relating to activities where the primary aim is to raise funds.
- Charitable activities includes all costs relating to activities where the primary aim is part of the objects of the Charity
- Governance costs includes audit fees, travel and meeting costs and legal and professional costs.

Tangible fixed assets

All fixed assets are initially recorded at cost.

Depreciation is calculated so as to write off the cost of an asset, less its estimated residual value, over the useful economic life of that asset as follows:

Computer equipment - 25% reducing balance
Office equipment - 15% reducing balance
Exhibition stand - 15% reducing balance
Chain of Office & Medal Dies - 20% straight line

Stocks

Stocks are valued at the lower of cost and net realisable value, after making due allowance for obsolete and slow moving items.

Taxation

The charity is exempt from corporation tax on its charitable activities.

Fund accounting

Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

**THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2022**

1. ACCOUNTING POLICIES - continued

Fund accounting

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

Pension costs and other post-retirement benefits

The charitable parent company participates in the Superannuation Arrangements of the University of London, which is a defined benefit scheme. The scheme is contracted out of the State Earnings-Related Pension scheme. The scheme is valued formally every three years by professionally qualified and independent actuaries. Reviews of the scheme's positions are carried out in between valuations. The expected costs to the Company of providing pensions is charged to the accounts so as to spread the cost over the service lives of employees involved in such a way that the pension cost equals the annualised long-term cash outlay to the scheme.

2. OTHER TRADING ACTIVITIES

	2022	2021
	£	£
Subscriptions	295,825	291,444
Interest Receivable	<u>2,320</u>	<u>94</u>
	<u>298,145</u>	<u>291,538</u>

3. INCOME FROM CHARITABLE ACTIVITIES

		2022	2021
	Activity	£	£
Pelvic Floor Society	Education	71,851	42,023
Coloproctology motorway course	Education	89,592	22,644
Dukes' Club	Education	38,898	35,356
Other meetings	Education	17,741	35,406
Publication income	Publication Income	<u>198,762</u>	<u>132,643</u>
		<u>882,426</u>	<u>486,905</u>

**THE ASSOCIATION OF COLOPROCTOLOGY OF
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**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2022**

4. CHARITABLE ACTIVITIES COSTS

	Direct Costs £	Support costs (see note 5) £	Totals £
Education	135,808	-	135,808
Provision of Publications	62,748	-	62,748
Governance Costs	-	223,496	223,496
Annual General Meeting	596,344	-	596,344
	<u>794,900</u>	<u>223,496</u>	<u>1,018,396</u>

5. SUPPORT COSTS

	Management £	Governance costs £	Totals £
Governance Costs	<u>668</u>	<u>222,828</u>	<u>223,496</u>

6. NET INCOME/(EXPENDITURE)

Net income/(expenditure) is stated after charging/(crediting):

	2022 £	2021 £
Auditors' remuneration	15,331	14,125
Depreciation - owned assets	115	147
Deficit on disposal of fixed assets	-	2,520
Computer software amortisation	<u>13,535</u>	<u>7,502</u>

7. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 December 2022 nor for the year ended 31 December 2021.

Trustees' expenses

There were £-nil expenses paid to trustees for the year ended 31 December 2022. (£-nil expenses paid to trustees for the year ended 31 December 2021).

THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND

NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2022

8. STAFF COSTS

	2022 £	2021 £
Wages and salaries	78,998	73,329
Social security costs	3,807	3,840
Other pension costs	<u>14,354</u>	<u>11,915</u>
	<u>97,159</u>	<u>89,084</u>

The average monthly number of employees during the year was as follows:

	2022	2021
Administration	<u>2</u>	<u>2</u>

No employees received emoluments in excess of £60,000.

9. COMPARATIVES FOR THE STATEMENT OF FINANCIAL ACTIVITIES

	Unrestricted fund £	Restricted funds £	Total funds £
INCOME AND ENDOWMENTS FROM			
Charitable activities			
Education	135,429	-	135,429
Annual General Meeting	218,833	-	218,833
Publication Income	132,643	-	132,643
Other trading activities	<u>291,538</u>	<u>-</u>	<u>291,538</u>
Total	<u>778,443</u>	<u>-</u>	<u>778,443</u>
EXPENDITURE ON			
Charitable activities			
Education	115,701	-	115,701
Provision of Publications	59,526	-	59,526
Governance Costs	180,183	-	180,183
Annual General Meeting	<u>268,092</u>	<u>-</u>	<u>268,092</u>
Total	<u>623,502</u>	<u>-</u>	<u>623,502</u>
NET INCOME	154,941	-	154,941
RECONCILIATION OF FUNDS			
Total funds brought forward	<u>1,227,745</u>	<u>8,532</u>	<u>1,236,277</u>
TOTAL FUNDS CARRIED FORWARD	<u>1,382,686</u>	<u>8,532</u>	<u>1,391,218</u>

**THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2022**

10. INTANGIBLE FIXED ASSETS

	Computer software £
COST	
At 1 January 2022	59,784
Additions	<u>7,891</u>
At 31 December 2022	<u>67,675</u>
AMORTISATION	
At 1 January 2022	4,982
Charge for year	<u>13,535</u>
At 31 December 2022	<u>18,517</u>
NET BOOK VALUE	
At 31 December 2022	<u>49,158</u>
At 31 December 2021	<u>54,802</u>

11. TANGIBLE FIXED ASSETS

	Fixtures and fittings £	Chain of Office £	Computer equipment £	Totals £
COST				
At 1 January 2022 and 31 December 2022	<u>2,329</u>	<u>4,064</u>	<u>889</u>	<u>7,282</u>
DEPRECIATION				
At 1 January 2022	2,109	3,116	564	5,789
Charge for year	<u>34</u>	<u>-</u>	<u>81</u>	<u>115</u>
At 31 December 2022	<u>2,143</u>	<u>3,116</u>	<u>645</u>	<u>5,904</u>
NET BOOK VALUE				
At 31 December 2022	<u>186</u>	<u>948</u>	<u>244</u>	<u>1,378</u>
At 31 December 2021	<u>220</u>	<u>948</u>	<u>325</u>	<u>1,493</u>

**THE ASSOCIATION OF COLOPROCTOLOGY OF
GREAT BRITAIN AND IRELAND**

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2022**

12. STOCKS

	2022	2021
	£	£
Stocks	<u>-</u>	<u>479</u>

13. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2022	2021
	£	£
Trade debtors	66,052	24,776
Other debtors	198,762	132,643
Accrued income	10,603	20,683
Prepayments	<u>185,408</u>	<u>327,324</u>
	<u>460,825</u>	<u>505,426</u>

14. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2022	2021
	£	£
Trade creditors	9,299	73,846
VAT	43,366	15,075
Accrued expenses	<u>66,476</u>	<u>51,869</u>
	<u>119,141</u>	<u>140,790</u>

15. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Unrestricted fund	Restricted funds	2022 Total funds	2021 Total funds
	£	£	£	£
Fixed assets	50,536	-	50,536	56,295
Current assets	1,613,466	8,532	1,621,998	1,475,713
Current liabilities	<u>(119,141)</u>	<u>-</u>	<u>(119,141)</u>	<u>(140,790)</u>
	<u>1,544,861</u>	<u>8,532</u>	<u>1,553,393</u>	<u>1,391,218</u>

THE ASSOCIATION OF COLOPROCTOLOGY OF
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NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2022

16. MOVEMENT IN FUNDS

	At 1/1/22 £	Net movement in funds £	At 31/12/22 £
Unrestricted funds			
General fund	1,382,686	162,175	1,544,861
Restricted funds			
Laparoscopic Colorectal Surgery	7,532	-	7,532
Busarries	1,000	-	1,000
Scottish Chapter			
	<u>8,532</u>	<u>-</u>	<u>8,532</u>
TOTAL FUNDS	<u>1,391,218</u>	<u>162,175</u>	<u>1,553,393</u>

Net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General fund	1,180,571	(1,018,396)	162,175
TOTAL FUNDS	<u>1,180,571</u>	<u>(1,018,396)</u>	<u>162,175</u>

Comparatives for movement in funds

	At 1/1/21 £	Net movement in funds £	At 31/12/21 £
Unrestricted funds			
General fund	1,227,745	154,941	1,382,686
Restricted funds			
Laparoscopic Colorectal Surgery	7,532	-	7,532
Busarries	1,000	-	1,000
Scottish Chapter			
	<u>8,532</u>	<u>-</u>	<u>8,532</u>
TOTAL FUNDS	<u>1,236,277</u>	<u>154,941</u>	<u>1,391,218</u>

NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2022

16. MOVEMENT IN FUNDS - continued

Comparative net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General fund	778,443	(623,502)	154,941
TOTAL FUNDS	<u>778,443</u>	<u>(623,502)</u>	<u>154,941</u>

A current year 12 months and prior year 12 months combined position is as follows:

	At 1/1/21 £	Net movement in funds £	At 31/12/22 £
Unrestricted funds			
General fund	1,227,745	317,116	1,544,861
Restricted funds			
Laparoscopic Colorectal Surgery			
Bursaries	7,532	-	7,532
Scottish Chapter	1,000	-	1,000
	<u>8,532</u>	<u>-</u>	<u>8,532</u>
TOTAL FUNDS	<u>1,236,277</u>	<u>317,116</u>	<u>1,553,393</u>

A current year 12 months and prior year 12 months combined net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General fund	1,959,014	(1,641,898)	317,116
TOTAL FUNDS	<u>1,959,014</u>	<u>(1,641,898)</u>	<u>317,116</u>

Covidien historically provided an educational grant of £25,000 to provide travelling bursaries for consultants and colorectal surgeons in training that are members of the ACPGBI to obtain experience of laparoscopic colorectal surgery in the UK and Europe. During 2022, £nil of these bursaries were utilised. £7,532 remains available.

The Scottish Chapter restricted fund relates to a donation received for the benefit of the Scottish Chapter. £1,000 remains available.

NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 DECEMBER 2022

17. EMPLOYEE BENEFIT OBLIGATIONS

The company participates in the Superannuation Arrangements of the University of London (SAUL), a centralised defined benefit scheme within the United Kingdom for all qualified employees with assets held in separate Trustee administered funds. The Company has adopted FRS17 for accounting for pension costs. It is not possible to identify the Company's share of the underlying assets and liabilities of SAUL. Therefore, contributions are accounted for as if SAUL were a defined contributions scheme and pension costs are based on the amounts actually paid (i.e. cash amount). In accordance with paragraphs 28.11 of FRS102. The total cost of pension contributions on behalf of employees of the Company during the period was £14,354 (2021: £119,615).

The scheme is subject to triennial valuation by professionally qualified independent actuaries. The last available valuation was carried out at 31 March 2021 using the projected credit method in which the actuarial liability makes allowance for projected earnings.

The following assumptions were used to assets the past service funding position and future service liabilities.

Projected Unit

Technical	Future		method
Valuation			
Provisions	Service		
Investment	return	-	pre-retirement
2.45% pa	3.62%		
Investment	return	-	post-retirement
0.35% pa	2.37%		
Price Inflation (RPI) - Full unadjusted market implied RPI Curve less 1%			
Price Inflation (CPI) - Full curve derived as RPI Curve less 1% pa			
before 2030 and no deduction thereafter			
General salary increase - Full curve derived as RPI Curve less 1%			

The actuarial method applies to the scheme as a whole and does not identify surpluses or deficits applicable to individual employers. In a mini health-check as a whole the market value of the scheme's assets was £4,564 million, the present value of the scheme's liabilities was £3,948 million and the resulting surplus was £616 million.

18. CAPITAL COMMITMENTS AND CONTINGENT LIABILITIES

There were no capital commitments or contingent liabilities as at 31 December 2022.

19. RELATED PARTY DISCLOSURES

There were no related party transactions for the year ended 31 December 2022.