



**The Royal College of  
Emergency Medicine**

## **Annual Report**

**2020**

## ***REPORT OF COUNCIL***

Council submits its annual report together with financial statements of the College for the year ended 31 December 2020.

### ***Reference and administrative details of the charity, its trustees and advisors***

**Status**

The College is a charitable body incorporated by Royal Charter on 12 December 2007. The College is registered with the Charity's Commission (charity no. 1122689) and the Scottish Charity Regulator (number SC044373).

**Registered office**

7 – 9 Bream's Buildings, London EC4A 1DT

**Bankers**

Handelsbanken

1 Kingsway

London

WC2B 6AN

**Solicitors**

Hempsons

Hempsons House, 100 Wood Street, Barbican

London

EC2V 7AN

**Auditors**

Moore Kingston Smith LLP

Devonshire House, 60 Goswell Road

London, EC1M 7AD

**Investment Managers**

Quilter Cheviot

Investment Management

1 Kingsway

London

WC2B 6AN

Flagstone Investment

Management Ltd

26-27 Oxendon

London

SW1Y 4 EL

**Chief Executive**

Gordon Miles

The College Council consists of the following members elected by Fellows and Members of the College, and co-opted members, as required. The elected members of Council are the Trustees of the College.

		<b>From</b>	<b>To</b>
President	Dr Katherine Henderson	2019	2022
Immediate Past President	Dr Tajek Hassan	2019	2020
Vice President	Dr Ian Higginson	2019	2022
Vice President	Dr Lisa Munro - Davies	2016	2022
Vice President - Policy	Dr Adrian Boyle	2019	2022
Vice President - Membership	Dr Carole Gavin	2019	2022
Treasurer	Dr Scott Hepburn	2018	2021
Dean	Dr Jason Long	2014	2020
CPD Director	Professor Simon D. Carley	2019	2022
Chair QECC	Dr Simon M Smith	2019	2022
Chair R&P	Dr Jason E Smith	2019	2022
Chair TSC	Dr Maya Naravi	2018	2021
Chair ACP	Mrs Olivia M Wilson	2019	2022
Chair - Emergency Medicine Trainees Association	Dr Amar Mashru Dr Daniel Darbyshire	2019 2021	2022 2023
President – Forum for Associate Specialist and Staff Grade Doctors in Emergency Medicine	Dr John Burns Dr Stephen Richard Black	2017 2020	2020 2023
Northern Ireland – National Board	Dr Ian Crawford Mr Paul P Kerr	2018 2020	2020 2023
Scotland – National Board	Dr David Chung Dr John Thomson	2017 2020	2020 2023
Wales – National Board	Dr Jo Mower Dr Suresh K Gopala Pillai	2018 2020	2021 2023
East Midlands	Dr Richard Wright	2017	2021
East of England	Dr Sarah J Evans	2019	2022
London	Miss Emma Rowland Dr Shashank Patil	2019 2019	2022 2022
North East	Mr. Sohom Maitra	2019	2022
North West	Dr Stephen Jones	2018	2021
South East Coast	Dr Julian Webb Dr Salwa Malik	2017 2021	2020 2024
South Central Region	Divyansh Gulati	2021	2024

South West	Dr Adam Rueben	2018	2021
West Midlands	Mr. Kalyana S Murali	2019	2022
Yorkshire & Humber	Dr Sundararaj J Manou	2019	2022
Lay Chair	Mr. Derek Prentice Miss Karen Jayne Hidderley	2017 2020	2020 2023

## *Structure, governance and management*

The Royal College of Emergency Medicine was constituted by Royal Charter in 2008. The registered Charity Number is 1122689. The College is also registered with the Office of the Scottish Charity Regulator. The registered Charity Number is SC044373.

The charity is governed by its trustees, who are elected members of the College Council and Officers of the College, supported by a system of Regional Boards in England and National Boards in the devolved nations. Trustees are appointed in accordance with Ordinance 6 of the College's Charter and Ordinances. Any associated election processes are managed by the Electoral Reform Society.

At the Annual General Meeting in October 2020, subject to Privy Council approval the membership voted to agree to some changes in the structure of the College, creating a separate Trustee Board leaving Council to focus on specialty matters. These changes are planned to be implemented in 2021 and have since the end of 2020 been approved by the Privy Council approval.

The College Council has additional support in undertaking its functions from those involved in the standing committees. The Council meets at least four times per year. The Council is constituted by the Officers of the College, elected members, Chair of Emergency Medicine Trainees Association, and Chairs of standing committees, Chair of the College Lay Group, President of Forum for Associate Specialist and Staff Grade Doctors in Emergency Medicine, Chair of Advanced Clinical Practitioners and representatives from other Royal Colleges.

The Officers of the College meet regularly during the periods between each Council meeting.

The College has standing committees relating to Education and Examinations, Training Standards, Professional Standards, Corporate Governance, International aspects of College work, Research, Clinical Effectiveness and Standards, Fellowship and Membership.

The day to day running of the College is undertaken by the Chief Executive and a team of staff supported by the Officers of the College.

The Trustees receive a training programme to ensure they can discharge their duties effectively. Further training is available to meet individual needs. Arrangements are in place for the induction of all newly appointed trustees who receive a formal induction from the President of the College relating to their role and responsibilities as a trustee, prior to their first meeting of Council. The Trustees receive information about their role and responsibilities from a range of sources, including the Charity Commission and professional advisors to the College.

The election of officers and other elected members of the Council are undertaken in accordance with the Royal Charter governing the College, and our Council is chaired by the President, Dr Katherine Henderson. The Council aims to make decisions by developing a consensus but voting by members (simple majority) is the final decision making process. The Council has an Executive

Committee and Corporate Governance Committee that meets (monthly and quarterly respectively) to deal with operational issues and makes recommendations on strategic matters to Council for their consideration.

The Officers of the College have been involved in many national and international initiatives relating to the functions of the College and do so with no remuneration for their roles. They are released by their employers to undertake this work in the wider interests of the NHS and use their own time to assist the College.

We and our membership are honoured that The Princess Royal is our Royal Patron.

### ***Staff policy and remuneration of senior staff***

In relation to its staff, it is the policy of the College to observe equality of opportunity in their recruitment, development, treatment and promotion, to provide benefits superior to the statutory minimum entitlement, to recognise meritorious performance and to encourage development of individual potential by the provision of formal training. The College consults its Staff on significant employment matters via our Employee Forum.

With regards to senior staff, the College has a Remuneration Sub-Committee which reviews their remuneration arrangements periodically and reports to the Corporate Governance Committee. In determining staff remuneration, the College undertook a review of its grading and remuneration arrangements in 2018 with the assistance of an expert in employee remuneration arrangements and its new pay policy has been in place now for 2 years.

### ***Objectives***

The objectives for the Royal College of Emergency Medicine are described in the RCEM Vision 2020 which sets out our corporate strategy. The strategy document is available on our website. As the year turned the strategy is being reviewed and in 2021 a revised strategy is to be published

During 2020, the Royal College of Emergency Medicine had to adapt to the Covid-19 pandemic at the same time as continuing to promote excellence in emergency care. Our activities are focused in four key areas:

- i. Improving patient care
- ii. Support our membership to achieve sustainable satisfying careers
- iii. Advancing the practice of Emergency Medicine through research and engagement in Global Health
- iv. Support our membership with the delivery of high-quality day to day care in Emergency Departments

To achieve our objectives, we undertake a range of activities including:

- working with other healthcare organizations and governments to implement the College's campaign improve the provision of Emergency Medicine for the benefit of patients;
- setting, monitoring and auditing clinical standards, and preparing and disseminating guidelines for Emergency Department patient care and safety;
- improving data quality and the ensuring the effective integration of information technology within Emergency Medicine;
- setting the curriculum and standard of training for doctors in Emergency Medicine;
- providing Continuing Professional Development (CPD) including through an eLearninghub,

known as RCEMlearning;

- working with the General Medical Council to deliver the requirements for revalidation;
- delivering the specialty examinations for doctors pursuing a career in Emergency Medicine and making recommendations relating to the completion of specialist training to the General Medical Council;
- providing a credentialing process for Advanced Clinical Practitioners
- supporting and giving advice on research within the specialty;
- providing advice to other bodies relating to Emergency Medicine, including accident prevention. These bodies include the Departments of Health, other Royal Colleges and Faculties, the Royal Society for the Prevention of Accidents and many other organisations;
- supporting our Members and Fellows including supporting Trainees, Staff grade and Associate Specialist (SAS) doctors in Emergency Medicine.
- encouraging new roles in Emergency Medicine as additions to the medical team;
- dealing with enquiries from the general public concerning Emergency Medicine and acting as an advocate for Emergency Medicine patients.
- developing the employee structure to deliver our operations;
- improving our information systems to reduce risk and enhance our service performance;
- continuing to develop our risk management systems, budgeting and business planning.

## ***Public Benefit***

The College provides public benefit under the Charities Act in two main ways:

- 1) for the Advancement of Education for the Public Benefit to a section of the public and
- 2) a wider benefit to the public.

In terms of public benefit our Royal Charter empowers us to:

- a) advance education and research in Emergency Medicine and to publish the useful results of such research; and
- b) preserve and protect good health and to relieve sickness by improving standards of health care and providing expert guidance and advice on policy to appropriate bodies on matters relating to Emergency Medicine

It also defines what constitutes Emergency Medicine as follows:

“Emergency Medicine: means the branch of medical science which is based on the knowledge and skills required for the prevention, diagnosis and management of acute and urgent aspects of illness and injury affecting patients of all age groups with a full spectrum of undifferentiated physical and behavioural disorders. It further encompasses an understanding of the development of pre-hospital and in-hospital emergency medical systems and the skills necessary for this development. Within such definition, the day to day practice of Emergency Medicine in the United Kingdom encompasses the reception, resuscitation, initial assessment and management of undifferentiated urgent and emergency cases and the timely onward referral of those patients who are considered to require admission under the in-patient specialist teams or further specialist assessment and/or follow up.”

As can be seen from the preceding explanation of our activities a significant amount of our resources are directed for the advancement of education and research in Emergency Medicine and to publish the useful results of such research.

~~In terms of a wider public benefit, taking from our Charter again:~~ we “preserve and protect good health and to relieve sickness by improving standards of health care and providing expert guidance

and advice on policy to appropriate bodies on matters relating to Emergency Medicine".

Our Members and Fellows working with their NHS colleagues provide a clear benefit to over 16 million people through Emergency Departments [1], we also take part in a wide range of other initiatives to support the public; for example, our work on the effects of alcohol amongst others. The College also deals with enquiries from the general public concerning Emergency Medicine and acts as an advocate for Emergency Medicine patients.

The Trustees confirm in accordance with section 17 of the Charities Act 2011 that they have had due regard to guidance issued by the Charity Commission in determining the activities of the charity.

---

<sup>1</sup> Source: Hospital Accident & Emergency Activity 2018-19 data for Major A&E Departments <https://digital.nhs.uk/data-and-information/publications/statistical/hospital-accident--emergency-activity/2018-19>



## ***Fundraising***

During the latter part of 2020 the College engaged a firm of professional fundraising consultants to develop a fundraising strategy to assist it in developing fundraising as a source of income. To date, the College has not actively engaged in any significant fundraising as described in guidance from the Charity Commission "Charity fundraising: a guide to trustee duties (CC20)". We continue to comply with the requirements of the Charities (Protection and Social Investment) Act 2016 and no complaints were received in respect of fundraising activity. Furthermore, the College does not fundraise in any way that could be expected to unreasonably intrude or place undue pressure on vulnerable people and other members of the public to give money or other property to the College. Our approach to fundraising is to approach contacts, stakeholders and our membership for specific appeals, and we also have a Just Giving page. We are registered with the Fundraising Regulator.

## ***Achievements and Performance***

During 2020, the President and Council had to refocus the College efforts significantly to deal with the challenge that Covid-19 presented to the specialty and the College itself. This meant that in addition to the 'business as usual' activities significant new streams of work were tackled. Alongside our work to deal with the impact of the Covid pandemic, work also continued to develop our medium term strategy. The Council reviewed this strategy during the year, finalising it as the year turned ready for publication early in 2021.

As the pandemic arrived in the UK significant input was given at the highest levels in each of the nations of the UK to support the preparation for the pandemic and the subsequent challenges of dealing with Covid-19. This varied from the initial challenges of focusing on the availability and quality of Personal Protection Equipment available to the specialty workforce, to sharing knowledge about best treatment practice and processes. This work continued throughout the year as the specialty had to deal with the different waves of the pandemic. There was significant dislocation to the training of NHS Emergency Medicine workforce, and this meant changes to the programme of training. Our Sustainable Working Practices Committee provided advice and help to the specialty including the provision of a wellbeing App, 87%.

In late February we invoked the Crisis Management Team for the first time in our history, as we decided the threat was sufficient to reach for our Business Recovery Procedures. We upgraded our video conferencing arrangements, reviewed our IT to enable all staff to work from home if need be and started regularly risk assessing the situation. On 17 March the Crisis Management Team decided the COVID situation was such that to protect our employees and preserve our operational capacity to support the specialty they should work from home until further notice. We moved quickly to Pivot our services to deliver in a world where it was not possible to run face to face events, examinations and meetings.

All face-to-face meetings, events and examinations were cancelled for 2020 so we needed to quickly redesign the College services. After a number of years of careful financial management, we had sufficient resources to enable us to plan and budget for some very fast development projects.

The work of the College is a collaborative team effort from our employees and emergency medicine professionals, our membership: "We help those who help the sick and injured." Therefore, we moved quickly to provide information, guidance, re-engineer our operations and make sure our services continued.

Our exams team and examiners have worked flat out to switch the model to online examinations in a few weeks. In normal times such work would take 18 months plus, we have achieved it in a just a few weeks. Now we have created online capabilities successfully, capacity has been an issue and we are working to resource up to deal with that. More than 5,000 candidates successfully sat online examinations with us in 2020.

In the first quarter we ran 12 days of events. And then had cancelled the remaining 44 events we had planned. We organised our first virtual Scientific Conference which was highly acclaimed. We ran other study days online. Significant work has been one communicating RCEM Learning content, CPD conference content from the cancelled conference and CPD Director podcasts.

We acted very quickly to assemble Covid related content and make this available quickly on RCEMlearning. We have had 2.5m page views in the first 8 months of this year (up by 20%)

Trainees have been impacted by Covid and various actions have been taken to mitigate these including minimizing the number of trainees delayed by cancelled exams and the QIP to 34 and 23 respectively. To support trainees with their ACCS - IAC mandatory requirement, trainees have been redeployed in some cases. Our intercollegiate group has worked together to produce updated information, the most recent being IAC Position Statement. To support Recruitment, there have been virtual interviews as with ARCPs. We've also published general guidance for trainees.

In the first 6 months we had 15 doctors join the specialist register via the CESR route which is almost double the number in the same period last year.

We initially cancelled our clinical audits because of the Covid uncertainty and then allowed them to restart. We issued Clinical Guidance issued on Covid for example Infection Control and others Safety Guidance.

The Policy Team have had an exceptionally busy year with the launch of RCEM Cares and engagement in the political arena to set out our case for more support for the specialty. The RCEM CARES campaign provides solutions to address these pressing issues so that ED staff can deliver safe and timely care for patients. The campaign focuses on five key areas: Crowding, Access, Retention, Experience, Safety. There is more information on our website here: [https://www.rcem.ac.uk/RCEM/Quality\\_Policy/Policy/RCEM\\_CARES/RCEM/Quality-Policy/Policy/RCEM\\_CARES.aspx](https://www.rcem.ac.uk/RCEM/Quality_Policy/Policy/RCEM_CARES/RCEM/Quality-Policy/Policy/RCEM_CARES.aspx)

Media coverage - in 2019 in the UK we featured in 3,721 articles. According to our media monitoring from, this is the equivalent of spending £117m on advertising with these websites. While this is not a perfect metric, it is a public relations standard and gives an indication of return on investment.

In our Membership team significant progress has been made on automating and streamline membership processes to make it easier for our membership.

Internationally, notwithstanding the travel bans, the MTI programme re-opened and is actively securing sponsorships. Other highlights included, the Emergency Medicine Foundation Programme project has proved a success and have successfully delivered ARCPs virtually with our Apollo partners across India and Pakistan. For 2021, we will enter Year 2, and trainees are currently being recruited

Guidance and support: We also provide clinical guidance and through our Emergency Medicine Journal, study days, scientific conference, research programme and Continuing Professional Development programme support the development of the emergency medicine profession.

Our internal support arrangements were redesigned as we implemented a new Corporate Services

function looking after our people, buildings, finances and our digital infrastructure. Our HR team have worked improved staff recruitment, retention, development, engagement and wellbeing. We rolled out a new HR App to keep Colleagues up to date, implemented a new HR information system and launched our employee forum. We have supported our employee wellbeing with the 87% App, mental health first aiders, virtual coffee mornings and lots of communication.

Our Facilities have been temporarily mothballed, with steps taken to check they are secure and employee efforts redirected to support our other teams. We allow teams access for essential tasks, for example when running an online examination it helps for our staff to be together but socially distanced.

## Financial Review

The Trustees are pleased to report that total incoming resources for 2020 were £6.891 m. (2019: £7.920m)

The income was as follows

<b>Incoming Resources</b>	<b>2020</b>	<b>%</b>	<b>2019</b>	<b>%</b>
Donations & Grants	167,907	2%	259,825	3%
Other Income	232,139	3%	431,534	5%
Investment Income	19,888	0.3%	52,034	1%
Emergency Medicine Journal	311,187	5%	250,000	3%
Subscriptions	3,329,049	48%	3,049,861	39%
Conferences & CPD	329,815	5%	841,080	11%
Examinations	2,242,692	33%	2,702,996	34%
Training	98,591	1.4%	120,512	1.5%
Clinical Audit	159,692	2.3%	173,012	2%
Invited Service Reviews	-	0%	39,000	0.5%
<b>Total</b>	<b>6,890,961</b>	<b>100%</b>	<b>7,919,854</b>	<b>100%</b>

The principle funding sources for the College remain membership subscriptions and examinations income. These funding sources are in line with the main educational activities and charitable aims of the College.

At the end of 2020 the total membership rose to 10,163, an increase in 11.5% from 2019. The membership category with the largest increase was in Associate member (training/Eportfolio) which increased by 34% with there also being a large increase in Associate member (ACP) of 24%. Our numbers of Fellows by Examination also saw significant increase by 9.8% with our overall number of Fellows increasing by 8%.

Total resources expended during 2020 were £ 6.233m (2019 £7.107m). This report has highlighted earlier the key activities that account for the expenditure.

Major areas of expenditure were as follows:

<b>Resources Expended</b>	<b>2020</b>	<b>%</b>	<b>2019</b>	<b>%</b>
Raising funds	11,292	0.2%	19,247	0%

Emergency Medicine Journal	580,163	9%	532,522	7%
Research & Publications	203,510	3%	99,396	1%
Education & Examinations	2,328,092	37%	2,662,839	37%
Training Standards Committee and general training	1,163,880	18.7%	1,011,324	14%
Conferences & CPD	614,492	10%	1,241,723	17%
Membership Services	308,751	5%	324,868	5%
Quality In Emergency Care	433,327	7%	482,622	7%
Policy & Professional Affairs	468,125	8%	532,746	8%
NHS Project Expenditure	112,283	2%	198,914	3%
RCEM Foundation	8,640	0.1%	670	0%
<b>Total</b>	<b>6,232,555</b>	<b>100%</b>	<b>7,106,871</b>	<b>100%</b>

### *Investment policies and returns:*

The Trustees have the power to invest funds and have used this power to invest in a range of investments (See note 10). The College invests in ethical areas only wherever reasonably possible.

The Trustees have engaged Quilter Cheviot Asset Management to provide them with professional investment management advice. However, in the immediate aftermath of the Covid-19 outbreak, our trustees took the decision to liquidate this investment portfolio to reinforce the funds available to the College and to mitigate against further downside risk. Fortunately, the College has not had to drawdown on these funds and they remain on deposit with Flagstone Investment Management Limited on their cash Investment platform.

### *Risk management, and principal risks and uncertainties*

The College has a risk register maintained by the Vice President – Membership. The register is reviewed on a regular basis at the meetings of Officers and by the Corporate Governance Committee and Council.

The College's risk register sets out the most significant risks classified by governance, operation (business continuity), finance, environment, regulatory compliance and reputation. Each risk within the classification is detailed and scored against a matrix of impact and likelihood. In 2020, further analysis took place to identify risks that the organisation may be exposed to as a result of Covid-19, this led to the creation of an annex register, "issues list".

The College has put systems and procedures in place to monitor, manage and mitigate risks. Trustees ensure risks are considered as an integral element of all decision making and identify appropriate procedures to ensure that risk levels are acceptable in each case.

Our risk management process complies with the best practice as set out in the latest guidance from the Charity Commission.

Significant risks for the College include:

- 1) Operation/Finance: COVID-19 has had a significant impact on College's operational activity and finances since March 2020. The College has mitigated the impact of COVID-19 by continuing to deliver services to our membership and the specialty whilst working remotely. Mitigation: Having cancelled examinations and events earlier in the year we have

developed our digital offering and are hopeful a future blended mix of digital and face to face delivery will appeal to our membership. Governance and oversight by the trustees is being delivered remotely. This oversight has been enhanced by additional reporting on organisational performance.

- 2) Operation: There are several risks that are being run associated with our examinations, including that there is a real risk that there are sufficient examiners available to hold an examination. In part this reflects the pressure on the specialty and the difficulty of emergency physicians to be released from their duties to examine. Mitigation: The examinations risks are regularly monitored, and management action taken to mitigate them. We are continuing to work to expand the number of examiners and the education Committee is closely managing this area led by the Dean and the Deputy Chief Executive. The Corporate Governance Committee is receiving regular updates and monitoring this closely.
- 3) Operation: There is a risk that ongoing investment into our IT systems is unlikely to continue to deal with the level of change being experienced by the College. Mitigation: A revised digital transformation strategy (and an annual work programme) has been developed with defined deliverables aimed at keeping developments in line with trends.
- 4) Operation: Having access to an effective and secure digital infrastructure is crucial to enabling the College to function efficiently post the Covid-19 outbreak, especially with cyber-attacks and cyber enabled crime on the rise. Mitigation: Our digital transformation strategy provides a plan for managing any interruption or potential risks to our digital environment.
- 5) Reputation/Operation: There is a reputational and operational risk to the College that the required development of a new ePortfolio platform, will result in an inferior experience for users and/or loss of functionality/access to data. Mitigation: This project is being closely managed through a Project Board.

The Corporate Governance Committee keeps the corporate risk register under regular review. It is satisfied with the level of risk and the management controls in place to reduce the risks. In financial terms the risks to the organisation are not significant and the future of the College is closely linked to the future development of the Emergency Medicine Specialty over time. The Council has undertaken a review of the reserves policy having regard for the risk assessment.

## ***Reserves policy***

The total funds of the College at 31 December 2020 were £10.015m (2019: £9.677m) of which £0.418m (2019: £0.426m) were restricted and not available for the general purpose of the charity. The unrestricted funds of the charity totalled £9,598m (2019: £9.251m) of which £7.048m (2019: £7.037m) are designated funds.

Designated funds are funds that the Trustees have earmarked for specific purposes. As at 31 December 2020, there are three designated funds, tangible fixed assets, IT development and RCEM foundation. Most of the designated amount relates to the tangible fixed assets of the College, net of a related bank loan and reflects the fact that these net funds could not be realised without disposing of the assets. The IT development fund has been designated to support our digital transformation agenda over the next 3 years. RCEM foundation fund has been designated to enable our foundation to develop its fundraising capabilities and strategy over the next 2 years.

The free reserve balance is £2,550m (2019: £2.214m), and has been considered by Council, having regard for the risk position of the College and is to provide a cushion to cover up to six months core operating costs.

Furthermore, it has been determined that the College will, as a minimum, hold £800,000 as a general cash reserve and £200,000 as a reserve for property related expenditure. The Treasurer will decide how to hold the reserves as between interest bearing accounts or investments having regard for

## ***Future Plans***

The current plan is now under review. Subject to that review our strategic aims are as follows:

1. Resolving the challenges facing Emergency Medicine in the UK and Ireland to improve the patient experience and outcomes by working with others to tackle the supply and demand issues facing Emergency Medicine.
2. Working with others to achieve safe and high-quality evidence based emergency care.
3. Improving the educational value of training and Continuing Professional Development in Emergency Medicine through our training, examinations, assessment and educational activities for those working in Emergency Medicine.
4. Continuing to support clinical and service development and research in Emergency Medicine.

### ***Statement of Trustees' responsibilities***

The Trustees are responsible for preparing the Report of Council and the financial statements in accordance with applicable law and regulations.

Charity law requires the Trustees to prepare financial statements for each financial year in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards) and applicable law.

Under charity law the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charity and the group and of the charity's net incoming/outgoing resources 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 judgments 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 charity will continue to operate.

The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the charity's transactions and disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008, the Charities and Trustee Investment (Scotland) Act 2005 and Charities Accounts (Scotland) Regulations 2006 (as amended) and the provisions of the charity's constitution. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

### ***Appreciation***

The trustees wish to thank the College employees for their unstinting hard work during 2020 and their on-going efforts in the daily administration of numerous areas of College activity.

The trustees wish to acknowledge the immense quantity of high quality work undertaken by College staff, Officers, Committee members and College members to deliver the charitable objectives of the College.

Approved by the Council of Trustees on 13/05/2021 and signed on their behalf by:



Dr Katherine Henderson  
President



## ***Independent Auditor's Report to the Trustees of The Royal College of Emergency Medicine***

---

### ***Opinion***

We have audited the financial statements of the Royal College of Emergency Medicine for the year ended 31 December 2020 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, including FRS 102 'The Financial Reporting Standard Applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

give a true and fair view of the state of the charity's affairs as at 31 December 2020, and of its incoming resources and application of resources, for the year then ended;

- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the Charities and Trustee Investment (Scotland) Act 2005 (as amended), regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006 (as amended) and the Charities Act 2011.

### ***Basis for opinion***

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

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 charity's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

### ***Other information***

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

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

We have nothing to report in this regard.

### ***Matters on which we are required to report by exception***

We have nothing to report in respect of the following matters where the Charities Accounts (Scotland) Regulations 2006 (as amended) and the Charities Act 2011 require us to report to you if, in our opinion:

the information given in the Trustees' Annual Report is inconsistent in any material respect with the financial statements; or  
the charity has not kept adequate accounting records; or  
the financial statements are not in agreement with the accounting records and returns; or  
we have not received all the information and explanations we required for our audit.

### ***Responsibilities of trustees***

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

In preparing the financial statements, the trustees are responsible for assessing the charity's

ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charity or to cease operations, or have no realistic alternative but to do so.

### ***Auditor's responsibilities for the audit of the financial statements***

We have been appointed as auditor under Section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005, section 144 of the Charities Act 2011 and report in accordance with regulations made under section 154 of that Act.

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 aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below.

### ***Explanation as to what extent the audit was considered capable of detecting irregularities, including fraud***

The objectives of our audit in respect of fraud, are; to identify and assess the risks of material misstatement of the financial statements due to fraud; to obtain sufficient appropriate audit evidence regarding the assessed risks of material misstatement due to fraud, through designing and implementing appropriate responses to those assessed risks; and to respond appropriately to instances of fraud or suspected fraud identified during the audit. However, the primary responsibility for the prevention and detection of fraud rests with both management and those charged with governance of the charity.

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the charity and considered that the most significant are the Charities Act 2011, the Charity SORP, the Charities and Trustee Investment (Scotland) Act 2005 (as amended), regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006 (as amended) and UK financial reporting standards as issued by the Financial Reporting Council.
- We obtained an understanding of how the charity complies with these requirements by discussions with management and those charged with governance.
- We assessed the risk of material misstatement of the financial statements, including the risk of material misstatement due to fraud and how it might occur, by holding discussions

with management and those charged with governance.

- We inquired of management and those charged with governance as to any known instances of non-compliance or suspected non-compliance with laws and regulations.
- Based on this understanding, we designed specific appropriate audit procedures to identify instances of non-compliance with laws and regulations. This included making enquiries of management and those charged with governance and obtaining additional corroborative evidence as required.

As part of an audit in accordance with ISAs (UK) we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purposes of expressing an opinion on the effectiveness of the charity's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the trustees.
- Conclude on the appropriateness of the trustees' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the charity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the charity to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

### *Use of our report*

This report is made solely to the charity's trustees, as a body, in accordance with Section

44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and in accordance with Chapter 3 of Part 8 of the Charities Act 2011. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to any party other than the charity and charity's trustees as a body, for our audit work, for this report, or for the opinion we have formed.

Moore Kingston Smith LLP

.....  
Moore Kingston Smith LLP (Statutory auditor)

Date: ...21 May 2021.....

Devonshire House  
60 Goswell Road  
London  
EC1M 7AD

Moore Kingston Smith LLP is eligible to act as auditor in terms of Section 1212 of the Companies Act 2006.

***THE ROYAL COLLEGE OF EMERGENCY MEDICINE***  
***STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31***  
***DECEMBER 2020***

	Notes	Unrestricted Funds 2020 £	Restricted Funds 2020 £	Total 2020 £	Total 2019 £
<b>INCOME FROM</b>					
Donations and grants	2	64,110	103,797	167,907	259,825
Income from charitable activities	3	6,471,026	-	6,471,026	7,176,461
Investment income	4	19,888	-	19,888	52,034
Other Income	5	232,139	-	232,139	431,534
<b>Total Income</b>		<b>6,787,164</b>	<b>103,797</b>	<b>6,890,961</b>	<b>7,919,854</b>
<b>EXPENDITURE ON</b>					
Raising funds		11,292	-	11,292	19,247
Charitable activities		6,108,980	112,283	6,221,263	7,087,624
<b>Total resources expended</b>	6	<b>6,120,272</b>	<b>112,283</b>	<b>6,232,555</b>	<b>7,106,871</b>
Gains/(Losses) on investments	10	(320,216)	-	(320,216)	189,262
Fair Value Adjustment		-	-	-	-
<b>Net income for the year</b>		<b>346,676</b>	<b>(8,486)</b>	<b>338,190</b>	<b>1,002,246</b>
<b>Transfer between funds</b>	14,15	-	-	-	-
<b>Net movement on funds</b>		<b>346,676</b>	<b>(8,486)</b>	<b>338,190</b>	<b>1,002,246</b>
Fund balances brought forward		9,250,891	426,315	9,677,206	8,674,960
<b>Total funds carried forward</b>	14,15	<b>9,597,567</b>	<b>417,829</b>	<b>10,015,396</b>	<b>9,677,206</b>

All activities in the year were attributable to continuing activities. The accompanying notes form part of these financial statements.

# THE ROYAL COLLEGE OF EMERGENCY MEDICINE

## BALANCE SHEET AS AT 31 DECEMBER 2020

		2020		2019	
	Notes	£	£	£	£
<b>Fixed assets</b>					
Tangible assets	9		13,773,197		13,936,656
Investments	10		-		1,436,612
			<u>13,773,197</u>		<u>15,373,268</u>
<b>Current assets</b>					
Debtors	11	1,002,685		733,365	
Investment (Under 90 Days)		655,185		-	
Investment (Over 90 Days)		465,000		-	
Cash at bank and in hand		3,644,993		2,881,944	
		<u>5,767,863</u>		<u>3,615,309</u>	
<b>Creditors: amounts falling due within one year</b>	12	<u>(2,325,664)</u>		<u>(1,911,370)</u>	
<b>Net current assets</b>			<u>3,442,199</u>		<u>1,703,939</u>
<b>Total assets less current liabilities</b>			<u>17,215,396</u>		<u>17,077,207</u>
<b>Creditors: amounts falling due after one year</b>	13		<u>(7,200,000)</u>		<u>(7,400,000)</u>
<b>NET ASSETS</b>			<u>10,015,396</u>		<u>9,677,207</u>
<b>Represented by:</b>					
<b>Unrestricted funds:</b>	14				
Designated funds		7,048,007		7,036,656	
General funds		2,549,560		2,214,235	
		<u>9,597,567</u>		<u>9,250,891</u>	
<b>Restricted funds</b>	15		<u>417,829</u>		<u>426,315</u>
<b>TOTAL FUNDS</b>			<u>10,015,396</u>		<u>9,677,207</u>

These financial statements were approved by the Trustees and authorised for issue on 13/05/2021 and are signed on their behalf by:



Dr K Henderson (President)



S Hepburn (Treasurer)

The accompanying notes form part of these financial statements.

**THE ROYAL COLLEGE OF EMERGENCY MEDICINE****CASH FLOW STATEMENT FOR THE YEAR ENDED 31 DECEMBER 2020**

	Note	2020 £	£	2019 £	£
<b>Cash flows from operating activities</b>					
<b>Net cash provided by operating activities</b>	19		<b>1,101,283</b>		<b>614,911</b>
			<hr/>		<hr/>
<b>Cash flows from investing activities</b>					
Investment income		19,888		52,034	
Purchase of tangible fixed asset		(38,103)		(97,442)	
Purchase of investments		(14,385)		(270,382)	
Proceeds from sale of investments		549,552		254,875	
		<hr/>		<hr/>	
<b>Net cash used by investing activities</b>			<b>516,952</b>		<b>(60,915)</b>
			<hr/>		<hr/>
<b>Cash flow from financing activities</b>					
Repayment of bank loan		(200,000)		(200,000)	
		<hr/>		<hr/>	
<b>Net cash used by financing activities</b>			<b>(200,000)</b>		<b>(200,000)</b>
			<hr/>		<hr/>
Change in cash and cash equivalents in the year			1,418,235		353,996
Cash and cash equivalents at the beginning of the year			2,881,943		2,527,947
			<hr/>		<hr/>
<b>Cash and cash equivalents at the end of the year</b>			<b>4,300,178</b>		<b>2,881,943</b>
			<hr/>		<hr/>
<b>Analysis of cash and cash equivalents</b>					
<b>Investment (Under 90 Days)</b>			<b>655,185</b>		<b>-</b>
<b>Cash at bank and in hand</b>			<b>3,644,993</b>		<b>2,881,943</b>
			<hr/>		<hr/>
			<b>4,300,178</b>		<b>2,881,943</b>
			<b>=====</b>		<b>=====</b>

**THE ROYAL COLLEGE OF EMERGENCY MEDICINE**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)**

**Analysis of changes in net debt**

	At start of year	Cash-flows	Other non-cash changes	At end of year
	£			
Cash	2,881,943	1,418,235	-	4,300,178
		-----		
		1,418,235		
		-----		
Loans falling within one year	(200,000)	200,000	(200,000)	(200,000)
Loans falling due after more than one year	(7,400,000)	-	200,000	(7,200,000)
	=====	=====	=====	=====
<b>TOTAL</b>	<b>(4,718,057)</b>	<b>1,618,235</b>	<b>-</b>	<b>(3,099,822)</b>
	=====	=====	=====	=====

**Analysis of changes in net debt  
2019**

	At start of year	Cash-flows	Other non-cash changes	At end of year
	£			
Cash	2,527,947	353,995	-	2,881,943
		-----		
		353,935		
		-----		
Loans falling within one year	(200,000)	200,000	(200,000)	(200,000)
Loans falling due after more than one year	(7,400,000)	-	200,000	(7,200,000)
	=====	=====	=====	=====
<b>TOTAL</b>	<b>(5,272,053)</b>	<b>553,995</b>	<b>-</b>	<b>(4,718,058)</b>
	=====	=====	=====	=====

The accompanying notes form part of these financial statements.



# ***THE ROYAL COLLEGE OF EMERGENCY MEDICINE***

## ***NOTES TO THE FINANCIAL STATEMENTS***

### ***FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)***

#### ***1. ACCOUNTING POLICIES***

##### **Basis of accounting**

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019) - (Charities SORP (FRS 102)), and with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102).

The Royal College of Emergency Medicine meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

##### **Going concern**

The Trustees have considered several factors in concluding that the adoption of a going concern basis in the preparation of these financial statements is appropriate. They have reviewed reserves, business plans and a sensitivity analysis (adjusted to replicate some of the impact COVID-19 had in 2020), for a period of twelve months from the date of approval of these financial statements which demonstrate that the College has enough resources to meet its obligations as they fall due. Furthermore, having developed digital solutions for our examinations and conferences, Trustees are content that the College has robust income streams in these areas as well as subscriptions. The College is forecasting a deficit budget in 2021 which is likely to breach our Earnings Before Income Tax Depreciation and Amortisation (EBITDA) financial covenant attached to the long-term loan with our bank, Handelsbanken. The bank has indicated informally that given one off expenditure such as our new ePortfolio and our strong recovery in 2020 they would continue to support the organisation by waiving the covenant. Additionally, they have offered the College an overdraft facility if required. However, the College has free reserves of approximately £2.55m at the balance sheet date which will assist in mitigating the need for additional facilities. Accordingly, the charity continues to adopt the going concern basis in the preparation of the financial statements.

##### **Judgements and estimates**

Judgements made by the Trustees, in the application of these accounting policies that have significant effect on the financial statements and estimates with a significant risk of material adjustment in the next year are deemed to be in relation to the valuation of investments and are discussed below.

##### **Income**

All income is recognised once the College has entitlement to the income, it is probable that the income will be received, and the amount of income receivable can be measured reliably. Income comprises amounts receivable during the year except for investment income which is accounted for in the period in which it is received on the basis that this is not materially different to a receivable basis. Grants are recognised when receivable and subscriptions for life membership are recognised when received. Payments received in advance of the related income being receivable are treated as deferred income within creditors.

# **THE ROYAL COLLEGE OF EMERGENCY MEDICINE**

## **NOTES TO THE FINANCIAL STATEMENTS**

### **FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)**

#### **1. ACCOUNTING POLICIES (continued)**

##### **Expenditure**

Expenditure is recognised on an accruals basis in the period in which the College receives the benefit from the supplies or services. *Raising funds* are costs of investment management, costs of merchandise and costs incurred in publicising the name of the charity. *Charitable activities* comprise all expenditure directly relating to the objects of the charity and, in addition, support costs which are costs which are common to a number of activities and are charged to those activities on the basis of office space used by respective members of staff. Support costs include governance costs which are the costs of compliance with constitutional and statutory requirements and costs related to the strategic management of the organisation.

##### **Tangible fixed assets and depreciation**

Tangible and Intangible fixed assets are recorded at cost or, in cases where fixed assets have been donated to the College, at valuation at the time of donation. All items of expenditure over £1,000 regarded as fixed assets are capitalised. Depreciation and amortisation are charged at the following rates in order to write down the cost or valuation, less estimated residual value, of all fixed assets, over their expected useful lives:

Freehold land	nil
Freehold building	2%
Fixtures and fittings	25%
Computer equipment	25%
Database systems	50%

The Coat of Arms and Presidential Chain of Office have not been depreciated in view of their nature. The Council believe that their current value is at least equal to their book values.

##### **Investments and investment gains and losses**

Quoted investments are valued at the bid price at the close of business at the year end. Realised and unrealised gains and losses on investments are included in the Statement of Financial Activities.

##### **Pension costs**

The charity makes contributions towards employees' personal pension schemes which are accounted for as the payments fall due.

##### **Operating leases**

Rentals applicable to operating leases are charged to the SOFA over the period in which the cost is incurred.

##### **Taxation**

No provision has been made for corporation tax or deferred tax as the charity is exempt.

# **THE ROYAL COLLEGE OF EMERGENCY MEDICINE**

## **NOTES TO THE FINANCIAL STATEMENTS**

### **FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)**

#### **1. ACCOUNTING POLICIES (continued)**

##### **Funds**

General funds are unrestricted funds which are available for use at the discretion of the trustees in furtherance of the general objects of the charity and which have not been designated for other purposes.

Designated funds comprise funds which have been set aside by the trustees for specific purposes. The purpose of each designated fund is set out in note 15.

Restricted funds relate to non-contractual income which is to be used in accordance with restrictions imposed by the donors or which have been raised by the charity for specific purposes. The purpose of each restricted fund is set out in note 16.

##### **Financial instruments**

Basic financial instruments are initially recognised at transaction value and subsequently measured at amortised except for investments which are held at fair value. Financial assets held at amortised cost comprise cash at bank and in hand, together with trade and other debtors. A specific provision is made for debts for which recoverability is in doubt. Cash at bank and in hand is defined as all cash held in instant access bank accounts and used as working capital. Financial liabilities held at amortised cost comprise all creditors except social security and other taxes and provisions.

##### **Debtors**

Trade and other debtors are recognised at the settlement amount due after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

##### **Cash and cash equivalents**

Cash and cash equivalents include cash in hand, deposits held at call with banks and other short-term liquid investments with original maturities of three months or less. Deposits with maturity greater than three months from the year end are classified within short term investments.

##### **Creditors and provisions**

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

##### **Related Party Transactions**

There are no other related party transactions

# **THE ROYAL COLLEGE OF EMERGENCY MEDICINE**

## **NOTES TO THE FINANCIAL STATEMENTS**

### **FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)**

#### **1. ACCOUNTING POLICIES (continued)**

##### **Employee benefits**

- Short term benefits  
Short term benefits including holiday pay are recognised as an expense in the period in which the service is received.
- Employee termination benefits  
Termination benefits are accounted for on an accrual basis and in line with FRS 102.

#### **2. GRANTS AND DONATIONS**

	<b>Total 2020 £</b>	<b>Total 2019 £</b>
<b>RESTRICTED FUNDS</b>		
NHS Health Education England Projects	100,658	256,068
RCEM Foundation	3,139	3,757
<b>UNRESTRICTED FUNDS</b>		
Grants and Donations	64,110	-
	-----	-----
	<b>167,907</b>	<b>259,825</b>
	=====	=====

#### **3. INCOME FROM CHARITABLE ACTIVITIES**

	<b>Total 2020 £</b>	<b>Total 2019 £</b>
<b>UNRESTRICTED FUNDS</b>		
Emergency Medicine Journal	311,187	250,000
Conferences & CPD	329,815	841,080
Subscription	3,329,049	3,049,861
Examination fees	2,242,692	2,702,996
Training	98,591	120,512
Clinical Audit	159,692	173,012
Invited Service Reviews	-	39,000
	-----	-----
	<b>6,471,026</b>	<b>7,176,461</b>
	=====	=====

***THE ROYAL COLLEGE OF EMERGENCY MEDICINE  
NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)***

***4. INVESTMENT INCOME***

	<b>Total 2020 £</b>	<b>Total 2019 £</b>
<b>UNRESTRICTED FUNDS</b>		
Dividends and interest on investments listed on a UK stock exchange	7,154	35,155
Interest received	12,735	16,879
	-----	-----
	<b>19,888</b>	<b>52,034</b>
	=====	=====

Investment income received in both years were from unrestricted sources.

***5. OTHER INCOME***

	<b>Total 2020 £</b>	<b>Total 2019 £</b>
<b>UNRESTRICTED FUNDS</b>		
Sale of Merchandise	22	2,172
Room Hire	232,118	429,362
	-----	-----
	<b>232,139</b>	<b>431,534</b>
	=====	=====

***THE ROYAL COLLEGE OF EMERGENCY MEDICINE***  
***NOTES TO THE FINANCIAL STATEMENTS***  
***FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)***

**6. EXPENDITURE**

	<b>Direct Costs £</b>	<b>Support Costs £</b>	<b>Total 2020 £</b>
<b>Raising Funds</b>			
Website costs	2,160	-	2,160
RCEM Merchandise	3,816	-	3,816
Investment broker charges	5,316	-	5,316
	-----	-----	-----
	<b>11,292</b>	<b>-</b>	<b>11,292</b>
<b>Charitable Activities</b>			
Emergency Medicine Journal	580,163	-	580,163
Research & publications	154,559	48,951	203,510
Education and examinations	1,245,715	748,159	1,993,874
RCEMlearning	199,244	134,974	334,218
Training	696,627	467,253	1,163,880
Conferences & CPD	267,047	347,445	614,492
Membership services	132,862	175,889	308,751
Quality in emergency care	244,234	189,093	433,327
Policy and professional affairs	323,454	144,671	468,125
RCEM Foundation Fund		-	
(Designated Fund)	8,640		8,640
NHS project expenditure			
(Restricted)	112,283	-	112,283
	-----	-----	-----
	<b>3,964,828</b>	<b>2,256,435</b>	<b>6,221,263</b>
	-----	-----	-----
	<b>3,976,120</b>	<b>2,256,435</b>	<b>6,232,555</b>
	=====	=====	=====
	=====	=====	=====

**THE ROYAL COLLEGE OF EMERGENCY MEDICINE**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)**

	Direct Costs £	Support Costs £	Total 2019 £
<b>Raising Funds</b>			
Website costs	2,357	-	2,357
RCEM Merchandise	8,672	-	8,672
Investment broker charges	8,218	-	8,218
	<b>19,247</b>	<b>-</b>	<b>19,247</b>
<b>Charitable Activities</b>			
Emergency Medicine Journal	532,522	-	532,522
Research & publications	80,769	18,627	99,396
Education and examinations	1,573,574	1,089,265	2,662,839
Training	570,232	441,092	1,011,324
Conferences & CPD	771,938	469,785	1,241,723
Membership services	107,312	217,556	324,868
Quality in emergency care	232,213	250,409	482,622
Policy and professional affairs	289,427	243,319	532,746
NHS project expenditure (Restricted)	198,914	-	198,914
RCEM Foundation Fund (Restricted)	670	-	670
	<b>4,357,571</b>	<b>2,730,053</b>	<b>7,087,624</b>
	<b>4,376,818</b>	<b>2,730,053</b>	<b>7,106,871</b>

	Year to December 2020 £	Year to December 2019 £
<b>Staff costs comprise:</b>		
Wages and salaries	2,183,646	2,027,753
Social security costs	233,877	208,190
Other pension costs	188,480	165,449
Total Employee costs	2,606,003	2,401,392
Casual staff	71,802	109,857
	<b>2,677,805</b>	<b>2,511,249</b>

There were no termination payments made in 2020 (2019: £83,717).

**THE ROYAL COLLEGE OF EMERGENCY MEDICINE**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)**

The average number of permanent employees during the period was 53 (2019: 52). These were supplemented by several casual staff who assisted primarily with examinations and training.

	Year to December 2020 No.	Year to December 2019 No.
<b>Staff numbers as analysed by category:</b>		
Exams & Education	12	12
Training	8	7
Policy & Professional Affairs and Quality in Emergency Care	9	8
Membership	3	3
Research & Publications and Events	7	7
Other	14	15
	-----	-----
	<b>53</b>	<b>52</b>
	=====	=====

During the period the numbers of employees whose emoluments (defined as salary and taxable benefits) exceeded £60,000 were:

	Year To December 2020 No.	Year To December 2019 No.
£60,000 to £70,000	3	2
£70,001 to £80,000	1	-
£80,001 to £90,000	-	2
£90,001 to £100,000	1	-
£140,001 to £150,000	-	1
£150,001 to £160,000	1	-

The aggregate emoluments of the key management personnel which comprises of Trustees, Chief Executive Officer, Deputy Chief Executive Officer (who holds the role Director of Education) and Director of Corporate Services amounted to £395,326. (2019: £364,641).

The pension amounts paid to the above employees amounted to £51,383.



**THE ROYAL COLLEGE OF EMERGENCY MEDICINE**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)**

**6A. SUPPORT AND GOVERNANCE COSTS**

	Year To December 2020 £	Year To December 2019 £
Staff costs	851,946	972,776
Rates, service charges and electricity	237,885	278,206
Office expenses	116,943	211,777
Printing, postage, stationery & telephone	92,221	109,232
Website & information technology	254,703	236,987
Insurance	50,697	45,241
Depreciation & loss on disposal of assets	201,562	230,077
Irrecoverable VAT	165,468	195,486
Sundry expenses	14,334	67,271
Bank interest on loan	151,521	186,661
Bank & credit card charges	60,531	64,738
Governance		
Auditors' remuneration		
For audit	15,045	12,500
Non-audit services	3,385	-
Board meeting and travel costs	40,193	119,100
	<b>2,256,435</b>	<b>2,730,053</b>

Support costs are allocated to activities on a basis consistent with the use of these resources. The allocation method of apportionment adopted by The Royal College of Emergency Medicine is as follows, headcount, i.e. based on the number of people employed within an activity, square foot, i.e. based on floor area occupied by an activity and time, i.e. where staff duties span more than one activity.

**7. CHARITABLE ACTIVITIES – GRANT PAYABLE**

Research grants awarded by the Royal College of Emergency Medicine in the year to 31 December 2020 totalled £112,263 (2019: £73,011).

**8. TRUSTEES**

The trustees received no remuneration from the charity in respect of acting as Trustees. No trustee provided services to the charity for which they were paid.

During the year, 22 trustees received reimbursement for costs for attending meetings and for travelling expenses, amounting to £4,978 (2019: 24 trustees, £50,901). In addition, expenses paid directly by the College, mainly in the form of hotel bills, amounted to £5,227 (2019: £46,825).

**THE ROYAL COLLEGE OF EMERGENCY MEDICINE**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)**

**9. TANGIBLE FIXED ASSETS**

	Building Costs £	Office Equipme nt£	College Database £	Coat of Arms £	Chain of office £	Total £
<b>Cost or valuation</b>						
At 1 January 2020	14,416,875	695,570	402,981	6,534	428	15,522,387
Additions	1,263	36,840	-	-	-	38,103
Disposals	-	-	-	-	-	-
	-----	-----	-----	-----	-----	-----
At 31 December 2020	14,418,138	732,410	402,981	6,534	428	15,560,490
	-----	-----	-----	-----	-----	-----
<b>Depreciation</b>						
At 1 January 2020	606,318	576,745	402,668	-	-	1,585,731
Charge for the year	124,645	76,604	313	-	-	201,562
On Disposals	-	-	-	-	-	-
	-----	-----	-----	-----	-----	-----
At 31 December 2020	730,963	653,349	402,981	-	-	1,787,293
	-----	-----	-----	-----	-----	-----
<b>Net Book Value</b>						
At 31 December 2020	13,687,175	79,061	-	6,534	428	13,773,197
	=====	=====	=====	=====	=====	=====
At 31 December 2019	13,810,557	118,825	312	6,534	428	13,936,656
	=====	=====	=====	=====	=====	=====

**10. INVESTMENTS**

	2020 £	2019 £
<b>Analysis of change in investments during the year</b>		
At 1 January	1,436,612	1,220,920
Additions at cost	14,385	270,382
Disposals	(1,014,552)	(254,875)
Net gain on revaluation	(320,216)	189,262
Movement in investment cash	(116,229)	10,924
	-----	-----
Market value at 31 December	-	1,436,612
	=====	=====
<b>Represented by:</b>		
Fixed interest	-	179,362
Equities	-	986,451
Alternative investments	-	154,570
Cash	-	116,229
	-----	-----
	-	1,436,612
	=====	=====
<b>Cost at 31 December</b>	-	<b>866,747</b>
	=====	=====

# THE ROYAL COLLEGE OF EMERGENCY MEDICINE NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)

## 11. DEBTORS

	2020 £	2019 £
Trade debtors	64,934	76,308
Prepayments	615,205	372,489
Accrued income	322,546	258,230
Other debtors	-	26,338
	-----	-----
	<b>1,002,685</b>	<b>733,365</b>
	=====	=====

## 12. CREDITORS: amounts falling due within one year

	2020 £	2019 £
Bank loan (see note 13)	200,000	200,000
Trade creditors	95,293	354,388
Taxes and social security	70,945	61,506
Accruals	672,983	245,347
Deferred income	1,036,095	837,199
Other Creditors	250,348	212,930
	-----	-----
	<b>2,325,664</b>	<b>1,911,370</b>
	=====	=====

Deferred income relates to exam, event and course fees received in advance. All the deferred income at 31 December 2020 relates to income received in 2020 and all deferred income at 31 December 2019 has been released.

At the balance sheet date, no pension contributions were outstanding (2019: £15,975).

## 13. CREDITORS: amounts falling due after more than one year

	2020 £	2019 £
Bank loan	7,200,000	7,400,000
	-----	-----
	7,200,000	7,400,000
	=====	=====
<b>Bank loan maturity analysis</b>		
Due less than 1 year	200,000	200,000
Due 1 – 2 years	200,000	200,000
Due 2 – 5 years	7,000,000	7,200,000
	-----	-----
Total loan value	<b>7,400,000</b>	<b>7,600,000</b>
Included in current liabilities	(200,000)	(200,000)
	-----	-----
Included in long term liabilities	<b>7,200,000</b>	<b>7,400,000</b>
	=====	=====

***THE ROYAL COLLEGE OF EMERGENCY MEDICINE NOTES TO  
THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)***

The bank loan is secured by a first legal charge over the land and buildings owned by the charity. Interest is calculated at LIBOR plus 1.60%.

**THE ROYAL COLLEGE OF EMERGENCY MEDICINE**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)**

**14. UNRESTRICTED FUNDS**

	At 1 January 2020	Income	Expenditure	Investment gains/losses and fair value	Transfers	At 31 December 2020
	£	£	£	£	£	£
<b>Designated Fund</b>						
Tangible fixed Assets	6,336,656	-	-	-	36,541	6,373,197
IT Development	500,000	-	-	-	(16,550)	483,450
RCEM Foundation	200,000	-	-	-	(8,640)	191,360
<b>General fund</b>	2,214,235	6,787,164	(6,120,272)	(320,216)	(11,351)	2,549,560
	<b>9,250,891</b>	<b>6,787,164</b>	<b>(6,120,272)</b>	<b>(320,216)</b>	<b>-</b>	<b>9,597,567</b>

	At 1 January 2019	Income	Expenditure	Investment gains/losses and fair value	Transfers	At 31 December 2019
	£	£	£	£	£	£
<b>Designated Fund</b>						
Tangible fixed Assets	6,269,292	-	-	-	67,364	6,336,656
IT Development	500,000	-	-	-	-	500,000
RCEM Foundation	200,000	-	-	-	-	200,000
<b>General fund</b>	1,342,721	7,660,027	(6,907,286)	189,262	(70,491)	2,214,235
	<b>8,312,013</b>	<b>7,660,027</b>	<b>(6,907,286)</b>	<b>189,262</b>	<b>(3,127)</b>	<b>9,250,891</b>

The Tangible Fixed Assets fund represents the value of these assets less a related loan and are not free reserves. The IT development fund has been earmarked to support the College's Digital Transformation Strategy over the next 3 years. RCEM foundation fund is a 2 year designated fund designed to support the development and implementation of the RCEM Foundation's Fundraising Strategy.

**THE ROYAL COLLEGE OF EMERGENCY MEDICINE**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)**

**15. RESTRICTED FUNDS**

	At 1 January 2020 £	Income £	Expenditure £	Transfer 2020 £	At 31 December 2020 £
Alison Gourdie Memorial Fund	43,832	-	-	-	43,832
E-learning for Health Fund	157,622	-	-	-	157,622
ENACT	3,348	-	-	-	3,348
Beth Christian Memorial Fund	6,050	-	-	-	6,050
Emergency Care Data Set Project	12,273	-	-	-	12,273
Health Education England Projects	188,464	100,658	(112,283)	-	176,839
RCEM Foundation	14,726	3,139	-	-	17,865
	<b>426,315</b>	<b>103,797</b>	<b>(112,283)</b>	<b>-</b>	<b>417,829</b>
	=====	=====	=====	=====	=====

	At 1 January 2019 £	Income £	Expenditure £	Transfer 2019 £	At 31 December 2019 £
Alison Gourdie Memorial Fund	43,832	-	-	-	43,832
E-learning for Health Fund	77,622	80,000	-	-	157,622
ENACT	3,348	-	-	-	3,348
Beth Christian Memorial Fund	6,050	-	-	-	6,050
Emergency Care Data Set Project	12,273	-	-	-	12,273
Health Education England Projects	208,183	176,068	(198,914)	3,126	188,464
RCEM Foundation	11,639	3,757	(670.00)	-	14,726
	<b>362,947</b>	<b>259,825</b>	<b>(199,584)</b>	<b>3,126</b>	<b>426,315</b>
	=====	=====	=====	=====	=====

**The Alison Gourdie Memorial Fund** was established to award prizes to doctors and nurses for projects that benefit the provision of high quality care in the field of Accident and Emergency Medicine.

**The Beth Christian Memorial Fund** was established in her memory.

**Elearning for Health Fund** (previously known as the EnlightenMe Grant) is a project funded by the Department of Health to improve e-learning for Healthcare by covering the costs of Content Authors, Module Editors and Clinical Leads.

# **THE ROYAL COLLEGE OF EMERGENCY MEDICINE**

## **NOTES TO THE FINANCIAL STATEMENTS**

### **FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)**

**ENACT** is a fund set up to help develop emergency medicine learning overseas.

**The Emergency Care Data Set Project** is a funded by the Department of Health to change the data set collected by the NHS relating to emergency medicine.

**The Health Education Projects fund** is to fund a series of joint projects focused on the development of the emergency medicine workforce with NHS Health Education England.

**RCEM Foundation fund** is to support further improvements in patient care, to support ground breaking research and help low income countries establish emergency care and clinical training.

#### **16. ANALYSIS OF NET ASSETS BETWEEN FUNDS**

	<b>General Funds £</b>	<b>Designated Funds £</b>	<b>Restricted Funds £</b>	<b>Total Funds £</b>
<b>Fund balances at 31 December 2020 represented by:</b>				
Tangible fixed assets	-	13,773,197	-	13,773,197
Current assets	4,675,224	674,810	417,829	5,767,863
Creditors falling due within one year	(2,125,664)	(200,000)	-	(2,325,664)
Creditors falling due after one year	-	(7,200,000)	-	(7,200,000)
Total net assets	<b>2,549,560</b>	<b>7,048,007</b>	<b>417,829</b>	<b>10,015,396</b>

	<b>General Funds £</b>	<b>Designated Funds £</b>	<b>Restricted Funds £</b>	<b>Total Funds £</b>
<b>Fund balances at 31 December 2019 represented by:</b>				
Tangible fixed assets	-	13,936,656	-	13,936,656
Investments	1,436,612	-	-	1,436,612
Current assets	2,488,993	700,000	426,315	3,615,309
Creditors falling due within one year	(1,711,370)	(200,000)	-	(1,911,370)
Creditors falling due after one year	-	(7,400,000)	-	(7,400,000)
Total net assets	<b>2,214,235</b>	<b>7,036,656</b>	<b>426,315</b>	<b>9,677,207</b>

**THE ROYAL COLLEGE OF EMERGENCY MEDICINE**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 DECEMBER 2020 (continued)**

**17. OPERATING LEASE COMMITMENTS**

	<b>2020 Equipment £</b>	<b>2019 Equipment £</b>
<b>Operating leases which expire within:</b>		
Less than one year	50,808	51,931
Between one and two years	50,808	50,808
Between two and five years	30,450	80,505
Over five years	-	753
	<b>132,066</b>	<b>183,997</b>

**18. RECONCILIATION OF OPERATING PROFIT TO NET CASH**

	<b>2020 £</b>	<b>2019 £</b>
Net income before other gains and losses	658,406	724,727
Depreciation charges	201,562	230,078
Investment income	(19,888)	(52,034)
Movement in investment portfolio cash	116,229	(10,924)
Decrease/(increase) in debtors	(269,320)	(107,736)
Increase/(decrease) in creditors	414,294	(169,200)
Net cash inflow from operating activities	<b>1,101,283</b>	<b>614,911</b>

**20. CAPITAL COMMITMENTS**

Amounts contracted for but not provided in the financial statements amounted to £185,926 inc. VAT in respect of the College's development of a new ePortfolio platform. (2019: £0)



## Annex

College representatives work with several organisations, including:

- Academy of Medical Royal Colleges
- Academy of Medical Royal Colleges and Faculties in Scotland
- ACEM
- Alcohol Health Alliance (AHA)
- All Party Parliamentary Group – Antimicrobial Resistance
- Apollo Hospitals, India
- Association of Anaesthetists of Great Britain & Ireland (AAGBI)
- Aster Medicity, India
- BMA Scotland
- British Association for Sexual Health and HIV (BASHH) / British HIV Association (BHIVA) - Testing Guidelines Group
- British Lung Foundation - Respiratory Taskforce Stakeholder Group
- British Medical Journal
- British Red Cross
- British Thoracic Society (BTS) - Quality Standards for non-invasive ventilation
- BTS - Guideline for the outpatient management of pulmonary embolism
- BTS/ Scottish Intercollegiate Guidelines Network (SIGN) asthma guideline
- Cambridge Global Health Partnership
- Care Quality Commission
- College of Emergency Physicians, Malaysia
- Department of Health and Social Care
- Department of Health Northern Ireland
- Devices Expert Advisory Committee
- Egyptian Ministry of Health and Population
- Emergency Care Society of Uganda
- Emergency Medicine Trainees' Association (EMTA)
- European Society For Emergency Medicine (EuSEM)
- Faculty of Forensic and Legal Medicine
- Faculty of Sport and Exercise Medicine (UK)
- Forum for Associate Specialist and Staff Grade Doctors in Emergency Medicine (FASSGEM)
- General Practitioners at the Deep End (Scotland)
- HCA Healthcare UK
- Health Education and Improvement Wales (HEIW)
- Health Innovation Network
- Health Research Authority (HRA) – Confidentiality Advisory Group (CAG)
- Healthcare Improvement Scotland
- Healthcare Inspectorate Wales (HIW) - Patient Discharge Thematic Review Stakeholder Group
- Home Office – Modern Slavery Campaign
- HSC Public Health Agency (Northern Ireland)

## ***Annex (continued)***

- Independent Inquiry into Child Sexual Abuse - Prevention of child sexual abuse in healthcare settings
- Institute of Hepatology - Lancet Commission for Liver Disease
- Intercollegiate Board for Training in Intensive Care Medicine
- Intercollegiate Board for Training in Pre-Hospital Emergency Medicine (IBTPHEM)
- Intercollegiate Committee for Acute Care Common Stem Training (ICACCST)
- Intercollegiate Committee for Standards for Children and Young People in Emergency Care Settings
- International Federation for Emergency Medicine (IFEM)
- Joint Colleges Hospital Visiting Committee
- Joint Royal College Ambulance Service Liaison Committee
- Kokilaben Dhirubhai Ambani Hospital and Medical Research Institute, India
- Landspítali – The National University Hospital of Iceland, Iceland
- Max Healthcare, India
- MBRRACE
- Medical Council on Alcohol – Advisory Committee
- Myanmar Emergency Medicine Society
- National audit of seizure management in hospitals (NASH)
- National Confidential Enquiry into Patient Outcome and Death (NCEPOD)
- National Co-ordinating Centre for Health Technology Assessment (NHS R&D)
- National Electronic Library for Health – Emergency Care branch
- National Horizon Scanning Centre expert database
- National Institute for Health and Clinical Excellence (NICE) – Quality Standards Programme Board
- National Police Chiefs Council (NPCC)
- National Research Ethics Service)
- National Safeguarding Delivery Unit – Partnership Network
- National Surviving Sepsis Campaign
- National Workforce Skills Development Unit - Enhancing the management of psychological trauma and resilience experienced by staff working in the NHS
- NHS Blood and Transplant (NHSBT) - National Organ Donation Committee
- NHS Commissioning Board Special Health Authority
- NHS Education for Scotland
- NHS England
- NHS England North Regional team - Liaison Mental Health Task & Finish Group
- NHS Health Education England
- NHS National Services Scotland
- NHS Pathways - National Clinical Governance Group of NHS Pathways
- NHS Right Care - Optimal pathway for the management of headache and migraine
- Northern Ireland Ambulance Service
- Oman Medical Specialty Board, Oman
- Paediatric Intensive Care Society (PICS) – National Standards
- Pakistan Institute of Medical Sciences

## *Annex (continued)*

- Patient and Client Council (Northern Ireland)
- 
- Professional Record Standards Body (PRSB)
- Public Health Wales (PHW)
- Qimet International
- Rawalpindi Medical University, Pakistan
- Regulation and Quality Improvement Authority (RQIA) Northern Ireland
- Royal College of Pathologists
- Royal College of Physicians and Surgeons of Glasgow
- Royal College of Physicians of Edinburgh
- Royal College of Physicians of London
- Royal College of Psychiatrists
- Royal College of Surgeons of Edinburgh
- Royal College of Surgeons of England
- Scottish Ambulance Service
- Scottish Government's 6 Essential Actions for Unscheduled Care National Programme
- Scottish Government's Ministerial Strategic Group for Health and Community Care
- Scottish Government's Unscheduled Care Advisory Group
- Scottish Health Action for Alcohol Problems (SHAAP)
- Serious Hazards of Transfusion Steering Group (SHOT)
- St John Ambulance
- The Emergency Medical Retrieval and Transfer Service Cymru (EMRTS) Wales
- Uganda UK Health Alliance
- UK Advisory Panel for Healthcare Workers Infected with Blood borne Viruses
- UK Clinical Research Collaboration (UKCRC) – Clinical Research Collaboration (NRES –
- UK Clinical Research Network (UKCRN) – National Institute for Health Research – specialty groups
- UK Health Alliance on Climate Change (UKHACC)
- University of Medicine 1, Yangon
- University of Medicine 2, Yangon
- University of Medicine, Mandalay
- Warwick Advisory Group
- Welsh Ambulance Service
- Welsh NHS Confederation

"The Royal College of Emergency Medicine objective is to promote excellence in emergency care. Our activities are focused in three key areas:

Delivery of safe high quality emergency care, promotion of best practice and ensuring emergency medicine training is of the highest standard. To achieve these aims we strive to ensure that patient centred care is led and delivered by fully trained Emergency Medicine Consultants, working in and with the wider Emergency Medicine team.

Secondly, we advance safe and effective Emergency Medicine by providing expert guidance and advice on Emergency Medicine policy.

Thirdly through the development of training, the funding of research and the setting of professional postgraduate examinations we work to educate, train and assess Emergency Medicine doctors to deliver the highest standards of professional competence and practice for the protection and benefit of all the public."

**This report covers activity of the year to 31 December 2020**



**The Royal College of  
Emergency Medicine**

7-9 Breams Buildings

London

EC4A 1DT

Tel: +44 (0)20 7400 1999

Fax: +44 (0)20 7067 1267

[www.rcem.ac.uk](http://www.rcem.ac.uk)

Incorporated by Royal Charter, 2008

Registered Charity number 1122689