

Annual Report and Financial Statement 2021

Contents

Chair's Welcome	3
Reference and administrative details	4
What we do	5
Protecting and improving the public's health	6
What we achieved	6
Vision	7
Voice	9
Practice	12
2022 and beyond	21
Structure, governance, and management	22
Statement of trustee's responsibilities	26
Independent Auditors' report	27
Statement of financial activities	32
Balance sheet	33
Statement of cash flows	34
Notes to the financial statement	35

Chair's Welcome

Dr Nigel Carter OBE



It seems incredible to think that this marks my last annual review as Chair of Royal Society for Public Health Council. What a challenging three years these have been for everyone.

In 2021, with the global Covid-19 pandemic continuing to affect every aspect of public health, the support, compassion, resilience, and unwavering care of the public health workforce was overwhelming.

The Royal Society for Public Health has risen to the challenges of the pandemic and has successfully adapted to deliver much of its valuable training and qualifications in a more digital way.

We owe a huge debt of thanks to our dedicated staff led by the executive management team who have risen to the challenges of home and hybrid working to deliver adapted services and support the government and other authorities in the fast-changing landscape of public health in a pandemic. We're proud of the resilience and agility that our staff, and our members and supporters have shown. As a result, we have been able to continue providing a wide range of support for public health.

Our **vision** has always been dedication to improving and protecting the public's health. We used our **voice** to support the national vaccination programme and to dispel misinformation. We used our expertise in **practice** to develop new, relevant training and learning tools that are fully accessible remotely in a complex and changing environment.

During the year the trustees and executive team worked to develop an updated strategy for the organisation and this will be launched later in 2022. Trustees also undertook training in Governance to optimise their contribution to the work of the organisation.

I am pleased to welcome our new Chief Executive, William Roberts, who joins us in June and who will lead the charity through the implementation of our new strategy.

We are also nearing completion of a major refurbishment of our headquarters building at John Snow House to provide an updated modern and flexible work environment for all the staff team.

I would also like to thank our trustees who have served the charity admirably with their skills and knowledge and to thank all our members, supporters, partners and centres for their continued dedication and support.

A handwritten signature in black ink, appearing to read 'Nigel Carter', with a long horizontal flourish extending to the right.

Dr Nigel Carter, OBE BDS LDS(RCS)
Chair of Council

Reference and administrative details

Charity No:	1125949 England and Wales SC040750 Scotland
Principal and registered office:	John Snow House 59 Mansell Street London E1 8AN
Trustees:	Members of the Council since 1 January 2021 Dr Nigel Carter Chair Professor Carol Wallace Treasurer Professor Lisa Ackerley Ms Ahmina Akhtar Mr Christopher Clarke to 26 January 2022 Dr Tim Elwell-Sutton Ms Anne Heughan Ms Davinder Jhamat Mr James Morris Dr Jonathan Pearson-Stuttard Ms Wilma Reid Mr Joe Stringer to 17 March 2022 Ms Jill Turner to 15 September 2021 Mr Tony Vickers-Byrne to 31 January 2022 Professor Derek Ward to 24 November 2021
Bankers:	HSBC Bank Wimbledon Branch 5 Wimbledon Hill Road London SW 19 7NF
Auditors:	Moore Kingston Smith LLP Devonshire House 60 Goswell Road London EC1M 7AD
Legal Advisors:	Hempsons 40 Villiers Street London WC2N 6NJ
Investment Advisors:	Rathbones Investment Management Ltd 1 Curzon Street London W1J 5FB

What we do

Established in 1856 and one of the oldest public health charities, Royal Society for Public Health (RSPH) is an independent health charity, operating under Royal Charter, dedicated to improving and protecting the health of the population in the United Kingdom and, increasingly through our international membership, around the world.

Our membership includes thousands of healthcare professionals, food safety specialists, environmental health experts, policy makers, academics, students and many other people from all walks of life, who share one thing in common - caring passionately about protecting the public's health.

To help fund our work - and safeguard our independent voice - we offer a variety of services that contribute in different ways to fulfilling our vision. Whether that involves developing public health programmes across place and local communities, bespoke projects to tackle health inequalities, educating people directly through our qualifications, training in their workplaces or schools, to publishing our respected peer-reviewed journals or by providing accreditation for university modules and training programmes.

Significantly, we are also the UK's leading OFQUAL regulated Qualifications Awarding Organisation in the field of public health. Every day, hundreds of thousands of RSPH qualified professionals fulfil vital roles - quietly and without fanfare - in communities the length and breadth of the country.

Whatever we do, we remain incredibly proud that, over the last 165 years, our work has had a positive and lasting impact on the lives of millions of people. And, as we adapt and evolve to meet the public health challenges of the 21st century, we hope that individuals, businesses, public organisations, academic institutions, and our contacts in the media will work with us to fulfil our vision for public health. And share in our achievements.

Protecting and improving the public's health

What we've achieved



12,687

hours public health learning delivered



11

webinars with 3,514 attendees



67,656 hours of CPD delivered



18% increase in candidates



33 new centres recruited



8 new qualifications developed



704,054 website visits



6,000 + new followers on social media

Vision

In 2021, Royal Society for Public Health (RSPH) continued to strive towards our vision of everyone having the opportunity to optimise their health and wellbeing.

Our resources were focused on two key areas of public health – responding to the pandemic ensuring the public were informed and knew how to optimise their health and wellbeing, and to maintain our level of wide-ranging public health services whilst developing new learning, training, and qualifications to support the government's vaccine programme.

The Community Spirit Level

The Community Spirit Level is part of our programme to act on the wider determinants of health – the political, social, economic, environmental, and cultural factors which shape the conditions in which we are born, grow, live, work and age. This project focused on the role of community spirit and its impact on health and wellbeing.

The communities that we live in, and our social networks have a significant impact on our health and on health inequalities. In more deprived communities, nearly 50% report severe lack of social networks and support, with high levels of chronic loneliness making people who are at greater risk less resilient to the health effects of social and economic disadvantage. There is evidence that a strong community spirit can help address health inequalities.

We produced a 'Community Spirit Level' toolkit and tested it with six communities across the UK. The evidence-based tool can help communities measure and improve their community spirit.

This project explored how community spirit can be raised and improved and the tool provides communities and those working with them - grassroots organisations, anchor institutions, NHS teams and local authorities - with practical, step-by-step guidance and inspiration about how they can reflect on, and improve, community spirit in a systematic way.

Around 1 in 5 people in some of our most deprived areas lack social support.

The work began in 2018 and continued as the COVID-19 pandemic hit. The case studies that feature in the Community Spirit Level demonstrate why community spirit is an essential part of people's lives, particularly for collective resilience in the face of crises such as COVID-19. For example, using the toolkit a community organisation in Sheffield found what they would like to see in the community once the pandemic passes and found that residents appreciated the stronger community relationships built up during the lockdown, and they now have a better idea of how it can be sustained.

RSPH will continue to promote the framework and toolkit with other organisations to help improve community wellbeing as the country moves towards recovery.

<https://www.rsph.org.uk/our-work/programmes/community-spirit-programme.html>

RSPH Awards

Initiated in 2007, the RSPH Health and Wellbeing Awards is now the UK's premier awards scheme for promoting health and wellbeing. We reach out to the many organisations working in the public health sector including NHS, local authorities, charities, businesses, and community groups to recognise and promote best practice in the field. The assessment criteria are based on the principles of the Ottawa Charter for Health Promotion and subsequent international declarations which call for action to achieve 'Health for All'.

“Winning means that as well as being able to fund the ‘Be A Gamechanger’ campaign for another year, we hope to include other Newcastle United supporters with the campaign and increase our reach and impact.”

Ashley Lowe, Health and Wellbeing Manager Newcastle United Foundation, winner Public Mental Health and Wellbeing Award 2021



Public Health Minister's Award

The Public Health Minister's Award recognises and rewards excellence and innovation in public health programmes delivered by organisations across all sectors and in settings such as workplaces, schools, care homes, hospitals, and the community.



Winner 2021

Redthread's Youth Violence Intervention Programme is run in 13 hospitals across London, Birmingham and Nottingham, and provides tailored support for 11–25-year-olds impacted by violence and/or exploitation. Their aim is to integrate healthcare into the community and empower young people to lead healthy, safe, and happy lives.

<https://www.rsph.org.uk/redthread-youth.html>

Voice

Influencing

Health on the High Street, and the health status of Walsall town centre

The regeneration of Walsall's town centre represented an exciting opportunity to not only reinvigorate the local economy, but also to strengthen the town's community spirit and improve the health and wellbeing of resident. We were invited to work with local stakeholders, communities, and public services to identify tangible ways in which the regeneration could serve the public's health.

The project developed a key set of recommendations that supported Walsall Council to make changes to the local economic regeneration plans and public realm investment and 15 recommendations were implemented – some of these are:

- Identify barriers to promote active travel and develop initiatives which address them
- Engage with workplaces to promote active travel
- Launch Beat the Street in Walsall
- Establish a floating garden in canal basin
- Develop a Supplementary Planning Document to improve the healthiness of the businesses of the high street
- Encourage healthier 'out of home' food provision
- Find creative uses for empty shops
- Establish Walsall Community Diagnostic Health Hub
- Develop Walsall Health Champions programme

Financial Health Insecurity

Financial health, understood as a person's ability to manage money, prepare for and recover from financial shocks, have minimal debt, and ability to build wealth, underlies all facets of daily living

such as securing food and paying for housing. Yet there is inconsistency in measurement and definition of this critical concept. Most social determinant research and interventions focus on siloed solutions (housing, food, utilities) rather than on a root solution such as financial health. With minimal public health research on financial health, particularly among low-income populations, this work introduced the construct of financial health into the domain of public health as a useful root term that underlies other individual measures of economic hardship.

Funded by Health Foundation, and working with Citizens Advice, Royal Society for Public Health trialled a small project to help local authorities and NHS develop tools to better understand the prevalence of financial insecurity in specific populations, to enable them to feel more confident about commissioning services that respond to these emerging needs .

Working with Sheffield Council and Hull Council we developed tools to aid decision at a local level, to identify the strategies to be implemented, underpinned by cross sectional, and integrated policy plans at a local level, that help underline the case for national action.

In Sheffield, the project brought together local stakeholders to discuss how existing data sets can overlay intelligence and inform integration of services for certain populations. For example, council data suggests that prevalence of mental health issues is positively correlated with indicators of financial insecurity and that addressing the issue involves better integration of housing, benefits, money and debt advice, and support services in the wider health system, including public health, health and social care, and the NHS.

In Hull, we facilitated the development of Financial Insecurity Network Hull with over 30 local stakeholders, including the local authority and local Councillor Hester Bridges, including training and workforce development as well as data-sharing preferences.

Vaccinations

Encouraging Vaccine uptake

We launched a comprehensive toolkit to support local healthcare services in gaining assurance of, and improving, vaccination services in their area. With sponsorship from RSPH Corporate Member MSD, we engaged with experts, Directors of Public Health, and stakeholders from two local authority areas to produce a series of resources which can be used by public health teams, Integrated Care Systems, Local Pharmaceutical Committees, and Primary Care Networks.

The toolkit includes resources for supporting school-age vaccinations; promoting travel vaccinations; reducing inequalities in coverage; facilitating collaborative working; developing communications and community engagement strategies to increase confidence in vaccinations; and questions to use to gain assurance from providers, and to ensure equitable provision.

The toolkit is now being used at a local level in the UK by MSD's implementation support team and local authority public health teams.

Donald Read, Consultant in Public Health at Cheshire West and Chester Council, said:

“RSPH’s project was a great opportunity to bring together a diverse range of partners to have their say on what could help increase immunisation uptake in our communities, many of whom had probably not had the opportunity to discuss these issues previously.”

Workforce vaccination

We were commissioned by NHS North West to research social care workers’ attitudes and access to flu vaccinations. We did this through a survey and focus groups with social care workers and managers, exploring barriers to receiving the flu vaccination and levels of confidence in its safety, efficacy, and importance. On this basis, we developed a series of policy recommendations to improve the communication and education about, and the delivery of flu vaccinations to this workforce.

Our findings were incorporated into NHS North West’s planning for the annual flu season, and several of our recommendations have been picked up by the DHSC’s Adult Social Care Covid-19 Booster Taskforce.

Covid-19

In July 2021 we initiated and led a roundtable, funded by MSD. Invitees included leaders in vaccination and public health to explore how we can harness the best practise of the Covid-19 Vaccination programme.

The report from this meeting was launched in October 2021 and received positive responses from members, experts and social media.

<https://www.rsph.org.uk/our-work/policy/vaccinations/taking-forward-the-best-practice-from-the-covid-19-vaccination-programme.html>

Throughout autumn and winter of 2021, we were vocal about the need for the government to implement Plan B as cases continued to rise. To this effect we signed a joint letter from the Association of Directors in Public Health and Faculty of Public Health and issued a press statement on the urgent need for Plan B to be instated. We received strong media coverage with pick up on national TV asking for no more “deadly delays”.

Gambling

The Gambling Health Alliance released the findings from polling commissioned to support its response to the Gambling Act Review call for evidence. The poll showed overwhelming public support for gambling reform, which helped make the case for the recommendations submitted in the formal consultation response.

The research featured in the Mail Online and the Evening Standard, and has been instrumental in our ongoing conversations with Department of Health and Social Care and Department for Culture, Media and Sport to maintain momentum and support relationships with the aim of changes to gambling policy.

Member voice

RSPH Members are drawn from all walks of life but share one thing in common - a passion for public health. We have a global membership that works across a wide range of public health sectors including environmental health, food safety, infection control, water safety, occupational health, and medicine. They continue to identify and define our objectives in public health allowing us to amplify their voice with our presence and influence within the sector.

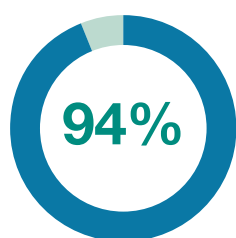
Communication with our membership is key and we effect continuous two-way communication, and we regularly undertake surveys to drive our strategic activities and monitor our membership focus groups and surveys.

“Being a member has both widened and underpinned my public health knowledge and allowed me to network with peers and share ideas, which really helps my work.”

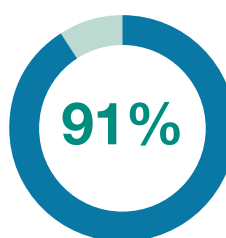
RSPH Member 2021

Member satisfaction

How well do you think RSPH voice reflects your views as a member?



7.6 rating 94% are satisfied that RSPH voice reflects their views as members



are satisfied with their membership

Which four things do you value most about your membership?

1. Post nom letters
2. Regular communications
3. Status of being associated with a professional organisation
4. Journal *Perspectives in Public Health*

All RSPH members play a vital role in helping to protect the public's health and we want to celebrate the great work that they do. In 2021 we initiated a monthly Member Spotlight in the Member Area on our website.

RSPH membership continues to grow and in 2022 we will develop a long-term marketing strategy to both increase our membership and raise awareness of our range of products and services in the wider public health sector.

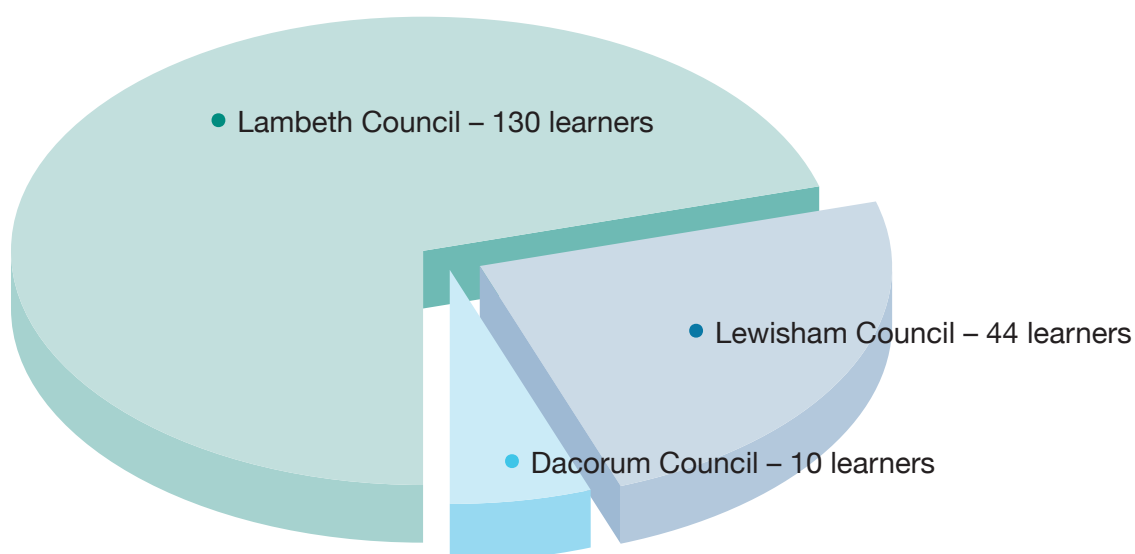
Practice

Vaccination qualification and training

We were commissioned jointly by Lambeth Council and South East London Clinical Commissioning Group to develop and deliver a new qualification – Level 2 Award in Encouraging Vaccination Uptake. The objective to upskill public facing professionals who could have brief conversations with the public about vaccination programmes, in particular COVID-19. This included people working in social care, schools, homelessness support services and refugee support services.

Total number of learners trained: 184

Local authorities we worked with to deliver this training:



We successfully developed and submitted the Award to the Ofqual register of qualifications within just two weeks.

Centres across England subsequently registered to deliver the qualification including Halton Council, Royal Borough of Greenwich, Brighton and Hove City Council, Southern Health NHS Foundation Trust.



“I would wholeheartedly recommend the training”
– Taking the RSPH Level 2 Award in Encouraging
Vaccination Uptake qualification.”

Kathrine Bell, Lambeth Council

Level 2 Award for COVID-19 Young Health Champions

This new Ofqual-regulated qualification was designed to support young people in secondary schools understand the purpose and importance of measures in place to prevent the spread of COVID-19, giving them the tools and education to make informed choices about their health and wellbeing.

This Award builds upon the existing and successful RSPH Level 2 Award for Young Health Champions, that supports young people to develop the skills and knowledge to act as peer health mentors. The Level 2 Award for COVID-19 Young Health Champions uses the same methodology to support learners to build their knowledge of the importance of measures to stop the spread of COVID-19 and to pass this knowledge on effectively to their friends and peers.

Over the course of 2021, over 60 young people were trained as COVID-19 Young Health Champions and contributed directly to the pandemic response within their local communities. This has included in Southampton, where COVID-19 Young Health Champions played a key role in the local authority's Community Champions programme.

We collaborated with University of Southampton to develop the Award, funded by Department of Health and Social Care.



Communities in Charge of Gambling

As part of Gambling Health Alliance, we worked to establish a Communities in Charge of Gambling training programme. This scheme builds on our existing Communities in Charge of Alcohol project but takes the approach to reduce gambling-related harm within communities, through recruitment and training of locally engaged and RSPH accredited 'Gambling Health Champions'.

2021 saw the launch of the Level 2 Award in Tackling Gambling-related Harm, the first Ofqual-regulated qualification available within this area of public health. Our Centers were quick to register and start delivering the qualification, with the Communities in Charge of Gambling training due to be rolled-out in early 2022.

Healthcare Support Worker Access Programme

RSPH was successful in attracting funding from NHS England and NHS Improvement (NHSEI) to design and pilot a pre-employment training programme for individuals with lived experience of homelessness, to support them into employment as Healthcare Support Workers. We worked in partnership with Pathway and Groundswell, two of the leading homelessness support charities operating in the UK, to design and test the training, which includes the RSPH Level 1 Award in Health Improvement.

The programme will be rolled out in 2022, with a session taking place in each of the seven geographical areas in which NHSEI operates.

Courses and conferences (for members and non-members)

Diploma in Occupational Medicine Spring Course	Delivering Online Training via Zoom	Virtual Qualification Introduction - RSPH Level 2 Understanding HACCP (including Meat Industry)
Keeping Healthcare Water Safe - 2021 Challenges	Virtual Qualification Introduction - RSPH Level 2 Award in Food Safety and Hygiene	Level 2 Award in Encouraging Vaccination Uptake Training
Food Fraud and Authenticity	Virtual Qualification Introduction - RSPH Level 2 Identifying and Controlling Food Allergy Risks	Diploma in Occupational Medicine Autumn Course
Virtual Qualification Introduction - RSPH Level 2 Award in Understanding Health Improvement	Virtual Training Support - Top Tips on Building an Engaging Training Session	Crazy About Gin: A sober story from public health history
Total attendees - 368		



“We have been using RSPH online training since September 2019. It’s great to be working with one of the oldest public health charities in the world to deliver reliable e-learning for our team and we value the high quality food safety and hygiene training they provide for us.”

Karen O'Dare, Health & Safety Manager Bourne Leisure

Webinars

Our webinars run throughout the year and take inspiration from latest events and key debates in the public health sector, and the requests of our membership. They cover a range of interesting public health topics with expert speakers and attract attendees internationally.

In addition, in 2021 we produced a series of highly popular RSPH Sparks Debate webinars with speakers including Chief Medical Officer, Professor Chris Whitty, Sir Michael Marmot, Professor Maggie Rae, Richard Sloggett, Dr Jonathan Pearson-Stuttard and Lord Kamlesh Patel.

Webinar	Chair: Speakers
Drawing from Life: Alcohol in the time of Covid-19	Chair and Speakers: Dr Ranjita Dhital and Dr Louise Younie
Living Longer Better	Chair: Graham Rushbrook, Speaker: Sir Muir Gray
Obesity, responding to the silent epidemic	Chair: Graham Rushbrook, Speaker: Stuart King and Prof Paul Gately
Digital Shifts in Behaviour Change	Chair: Graham Rushbrook Speakers: Tim Chadborn and John-Paul Dannon
Methods for diagnosing Legionnaires' disease and typing of clinical and environmental <i>Legionella</i> spp. Isolates	Chair: Dr Diane S J Lindsay, Speakers: Soren Udlum and Dr Vicki Chalker
Considerations for returning plumbing to safe use after it's been chemically contaminated	Chair: Marcus Rink, Speakers: Prof Andrew Whelton
Getting it right: Building Hospital Water Systems Safely	Chair: Mike Weinbren, Speaker: George McCracken
<i>Pseudomonas</i> the new BS 8580-2 – risk assessments in healthcare	Chair: Victoria McKee, Speaker: Dr Susanne Lee
The implications of climate change on water-related infections	Chair: Dr Susanne Lee, Speaker: Prof Gordon Nichols
New British standards on Sampling methods for legionella BS 7592	Chair: Dr Maria Luisa Ricci Speaker: Dr John Lee
Understanding the application of biocides within healthcare water systems	Chair: Sebastian Crespi Speaker: Tim Wafer
Total number attended 3,514	

RSPH Learn

The continuing pandemic and public safety measures implemented by the government meant we needed to bring forward the planned launch of our digital learning platforms proving our ability to change quickly to meet public health training and learning market demands.

RSPH Learn, our learning management system was launched January, followed by the launch of RSPH LearnFree, our free learning portal for the public, in April.

**Total learners
accessing digital
courses: 12,687**

**Number of new
eLearning courses
launched: nine**

New courses:

- MECC for Mental Health (x3 modules)
- Think Brain Health – commissioned by Alzheimer’s Research UK
- RSPH Level 2 Award in Understanding HACCP
- RSPH Level 2 Award in Identifying and Controlling Food Allergy Risks
- Mental Health at Work
- Infection Prevention and Control
- Arts, Culture and Heritage: understanding their complex effects on our health – commissioned by University College London

RSPH uses expertise from across its breadth, and external organisations to develop projects and learning in this area. We are increasingly becoming recognised for delivering solutions for behaviour change regarding health and wellbeing. Last year we worked with clinical commissioning groups, Health Education England, NHS England and Improvement, Mental Health First Aid England amongst others

Soon, we hope to develop training and qualifications to support the government’s Levelling Up policy.



Continuing Professional Development

RSPH provides individuals with CPD points for a range of its training, learning, webinars, conferences and more.

We delivered

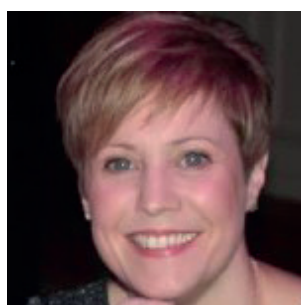
Educational Service	Total CPD hours
ELearning	66,015
Training	1,511
Webinars and events	130
Total	67,656

New CDP courses	No of Members
Mental Health at Work	173
Infection Prevention and Control	41
Total	214

Making Every Contact Count for Mental Health

This is mental health promotion programme utilises Make Every Contact Count (MECC) to deliver consistent and concise mental health and wellbeing information and encourages individuals to engage in conversations about their health.

Delivered across the North of England, we developed a training programme and a programme of support to upskill local individuals to act as Lead Trainers (12) and Trainers (95). With the training cascading to 1000 end-users across primary and community care settings in all seven Integrated Care Systems (ICS) areas in 2022.



Beverley Moorhouse,
Dental Education Programme
Manager (North west) at
Health Education England

“Understandably, having a mental health support programme in place for staff has become more important than ever, so staff can get mental health advice and signposting to resources. Our aim is to offer mental health training to an existing member of the team within the dental practice, who will then adopt the mental health and wellbeing champion role.”

RSPH Accreditation

RSPH has operated an accreditation scheme since 1904, helping to improve standards of public health across the nation. Currently this scheme accepts applications for endorsement of training programmes, university modules and health-related campaigns. RSPH accreditation is a mark of high standards of content and design, ensuring programmes meet their aims and provide excellent public health education.

2021 saw RSPH continue to support clients to move classroom-based programmes onto virtual classroom or e-learning formats. Three new organisations also joined the scheme

- Young Gamers and Gamblers Education Trust (YGAM). Their Mindful Resilience training programme aims to build the understanding, skills and capabilities of professionals in addressing gambling and gaming in children and young people.
- NTH Solutions (a subsidiary of North Tees and Hartlepool NHS Foundation Trust and Northumbria Healthcare NHS Foundation Trust). Their training programme “Domestics – Cleaning the NHS Way” provides cleaning staff with a background knowledge about decontamination methods, the chemicals used and the health and safety principles of their work.
- The British Oncology Pharmacy Association (BOPA). Their free e-learning “Let’s Communicate Cancer” provides pharmacy staff with an understanding of the signs and symptoms of cancer, the lifestyle factors that influence the risk of developing cancer, cancer treatments and appropriate referrals for patients with suspected or confirmed malignancy.

“We are thrilled that the “Let’s Communicate Cancer” programme has received accreditation. BOPA is passionate about the role of the pharmacy profession to deliver excellent care to patients with cancer and are delighted that the RSPH has joined us to support our vision”.

Jackie Lewis, Co-creator of Let’s Communicate Cancer programme, and Andy Walker, co-chair of the BOPA community pharmacy group



New Qualifications

Eight new qualifications were developed during 2021. All of these were submitted to the Register of Regulated Qualifications apart from one which is classed as an RSPH Regulated Qualification.

New Qualification development
● RSPH Level 2 Award in Tackling Gambling-related Harms
● RSPH Level 2 Award for Covid-19 Young Health Champions
● RSPH Level 3 Certificate in Health Coaching
● RSPH Level 3 Certificate in Social Prescribing
● RSPH Level 2 Award in Encouraging Vaccination Uptake
● RSPH Level 4 Award for Pre-slaughter inspection of white meat species
● RSPH Level 4 Diploma for Proficiency in Meat Inspection
● RSPH Level 2 Professional Practitioner Award for Initial Washroom Customer Delivery Representatives*

Review of Qualifications

Twenty-one qualifications had their five-year review in 2021 and a further eleven qualifications their mid-term review. All of the qualifications that had a five –year review had their review dates extended.

Centre Assessment Standards Scrutiny Strategy

Ofqual introduced a requirement for all Awarding Organisations that had any assessment or part of an assessment developed or marked by centres to develop a Centre Assessment Standards Scrutiny (CASS) strategy.

The RSPH CASS strategy was developed and introduced in accordance with the timetable set by Ofqual. As well as developing the strategy, which is based on pre-existing external verification procedures, a number of related documents and procedures were amended in order to be consistent with the strategy.

Centre Approvals

During 2021, 33 new Centres were approved. Two Centres were re-approved; 25 additional qualifications for Centres were approved.

Candidate numbers

In 2021 we increased the number of candidates by 18% increasing across all the subjects that RSPH operates in. The increase in candidates for our food safety qualifications was marginal, this area continues to be depressed following the Covid-19 pandemic as it is heavily linked to the hospitality industry.

Journals

We publish three widely respected peer-reviewed journals: Perspectives in Public Health, Public Health and Public Health in Practice

Perspectives in Public Health

Perspectives in Public Health is our bi-monthly peer-reviewed journal and available to all our members

January: Workplace Health and Wellbeing, collection of papers.

March: Physical Activity: wider influences and novel approaches for promotion
Editor Matt Hobbs. Guest Editor Prof Jim McKenna

July: Understanding Loneliness. Guest Editor Alison Iliff

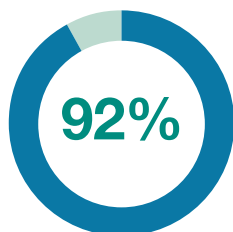
November: Climate Crisis. Guest Editors from Faculty of Public Health

Impact factor 4.940 increased from 4.073 in 2020

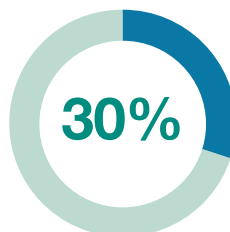
194,575 full-text downloads in 2021

828 manuscript submissions, a 6% increase from 781 in 2020

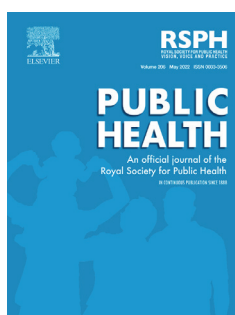
How satisfied are you with PPH?



2021 7.7 average rating
92% are satisfied (scored)
6+/10



30% are extremely satisfied
(scored 10/10)



Public Health

Public Health is our multi-disciplinary monthly peer-reviewed journal and one of the world's oldest on the subject.

1,076,041 downloads in 2021, up from 1,065,126 in 2020

impact factor 2.427 increased from 1.774

3,141 submissions in 2021 compared to 3,803 in 2020

Public Health in Practice

Public Health in Practice is RSPH's newest open access journal. Launched in January 2020, the journal covers a range of public health subjects and is currently accepting submissions.

PHIP had 339,307 downloads in 2021, up from 105,395 in 2020.

458 in 2021 submissions compared to 317 in 2020

2022 and beyond

The year ahead, 2022, is a time of opportunity for RSPH and we have approached it with a new-found vigour, energy and commitment to focus on the public health issues that our members, partners, relevant authorities, and the wider public health workforce ask and need us to.

Strategy

This year will see the launch of RSPH's new strategy taking us from 2022-2025. Following a pandemic that exposed and exacerbated the inequalities and inequities that exist in our societies, this strategy will aim to tackle the greatest challenges faced in public health. There will be a clear focus and delivery through four key pillars of Prevention, Protection, Improvement and Transformation, ensuring that RSPH is best placed to:

- Tackle inequalities exposed and exacerbated through Covid-19.
- Change trajectory for improving UK healthy life expectancy.
- Enabling and creating the conditions and environments that support healthier societies.

We will deliver our ambition through our core principles of enabling, convening, innovating, and being transformative and through this we shall over the next three years:

- **Influence** change to support improvements in healthy life expectancy
- **Champion** prevention, protection, and improvement in public health
- **Increase** uptake of health protection tools, information, and education
- **Be the** voice and ambition for public health and the workforce that deliver it
- **Understand** and increase presence/voice in climate and health

All delivered with an organisation that is:

- **Agile and innovative**, able to adapt to a changing external environment
- **Sustainable** with financial security
- Strong in staff **health** and **wellbeing**

In all that we do we shall keep our values of being bold, innovative, and inclusive at the heart of all that we do.

Funding

RSPH has already embarked on looking at how and where we receive our funds from and how we make our investments. It is our goal for 2022 to develop clearer frameworks and policies for our funding. To this end we will define our approach to Ethical, Social and Corporate Governance, developing a policy that provides a framework on how we can evaluate the organisations total alignment with our social goals. This will include an Ethical Funding Policy through which we will be better able to make decisions on RSPH income and investments.

Engagement

In the coming year we will look to build and expand our stakeholder networks to support strategic delivery. RSPH will continue to be part of and on key issues lead the conversations that will shape the public health landscape as we emerge from Covid-19.

As Integrated Care Systems (ICS) come in to being, we will engage with the ICS leads, government, NHS, local authorities and other commissioning groups, alongside our partners across the third sector and beyond, using our innate ability to convene, listen and communicate with all public health areas and at all levels.

In doing so we shall continue to advocate for and deliver equitable access to the best possible health and wellbeing for all sectors and communities.

Structure, Governance and Management

RSPH is a registered charity in England and Wales (Reg.No 1125949) and in Scotland (Reg. No.SC040750) and governed by a Royal Charter and Bye-Laws dated 30 September 2008 and as amended on 10 February 2016. The direction and management of RSPH and its affairs and business are vested in the RSPH Council. The Council members, as charity trustees are responsible for the RSPH and its property and funds. The Council of the RSPH consists of up to not less than ten and not more than 15 members including the Chair, Vice Chair and Treasurer. Trustees are appointed by the Council to ensure an optimum match of expertise and experience to suit the strategic needs of the charity that exists at any given time. All members of the Council act as trustees of RSPH and have a vote.

New trustees are appointed through a recruitment campaign and occasionally on the basis of recommendation depending on the experiences and skills needed. RSPH members are always notified of Council vacancies and encouraged to apply. New trustees complete an application form and letter and short-listed candidates are interviewed by two or three members of the Nominations and Governance Committee. New trustees are given a formal induction process with senior staff and provided with all the appropriate governance materials including key guidance for trustees from the charity Commission.

The normal term of office for trustees is three years, renewable for a further immediate term of three years. To provide both continuity and engagement of new trustees, one third of the Council is required to stand down each year. New Council members are offered induction meetings with the Chair, Chief Executive, and senior staff of RSPH, and every trustee is offered training opportunities as appropriate.

RSPH reviews its long-term strategy regularly with trustees and the executive management team. It operates three standing sub-committees, 'Audit and Risk', 'Nominations and Governance' and

'Qualifications Governance' to provide support to the Council on issues defined by terms of reference. It also creates task and finish groups to explore specific and timely issues when necessary. The trustees meet four times per year as a full trustee group as well as at the Annual General Meeting

RSPH is managed on a day-to-day basis by an executive management team led by the Chief Executive. To facilitate effective operations, the Chief Executive has delegated authority, within terms of delegation approved by the trustees, for all operational matters including finance and employment. The trustees are listed on page xx of this report.

Key Management Personnel

The Council of trustees and members of the executive management team comprise the key management personnel of the charity in charge of directing and controlling, running and operating the RSPH on a day-to-day basis. All trustees give their time freely and no trustee received remuneration in the year for their responsibilities as part of the Council. The executive management team members are the Chief Executive, Director of Membership and Educational Services, Director of Finance and Corporate Resources, Director of National and Regional Programmes, Director of Qualifications and Director of Policy and Public Affairs.

The pay of the executive management team is reviewed annually and normally increases in accordance with inflation. The charity benchmarks salaries based on the market rates.

Risk Management

The Council has assessed the major risks to which RSPH is exposed, in particular those related to the operations and finances of RSPH and is satisfied that systems are in place to mitigate the exposure to major risks. The trustees have set up an Audit and Risk Committee comprising five trustees to oversee the risk issues. This Committee reports to Council on relevant matters and sets its own agenda for action and is free to consider any matters relating to the health of RSPH, which could have serious deleterious effects or bring RSPH or its work into disrepute. Where appropriate, risks are covered by insurance. A risk register has been set up and is reviewed quarterly by the Council at its meetings.

The following framework is central to ensuring adequate risk assurance:

- regular identification and monitoring of major risks and development of action plans
- a clear structure of delegated authority and control
- regular review of internal control systems
- regular summary reports on risk management to the Council
- regular reports on risk management to the Audit and Risk Committee.

Key risks

- As an Awarding Organisation, RSPH is regulated by OfQual. It is important for RSPH to satisfy the regulatory requirements to maintain the accredited status of its qualifications. The Compliance Manager and other senior staff keep up to date with OfQual guidance on the Regulatory Conditions. This is overseen on a quarterly basis by the Qualification Governance Committee.

- As any organisation, RSPH is also exposed to threats caused by cyber-attack. To mitigate this risk, RSPH updates regularly the 'anti-virus' software which is on every device on our network. In addition to this, RSPH maintains a 'SPAM filter' system which is hosted externally by our IT advisors. We also regularly review the access controls of RSPH computer files by staff members. We have in place a disaster recovery system in which our files are backed up at a remote location as well as on tapes. In an event of data loss, our data can be re-stored within a short period of time.
- Over the last few years, the charity has achieved unprecedented media coverage for its campaigns on key public health issues. This has exposed RSPH to reputational risk. RSPH has established good media relationships and engages in robust research on topics by our dedicated and trained staff. RSPH also engages trustees and other experts in special campaigns.

Reserves Policy

The executive management team has considered RSPH's requirements and established a policy whereby the unrestricted general fund held by RSPH should be approximately twelve months expenditure. The budgeted expenditure for the year is £2.9 million and therefore, the target reserve level is approximately £2.9 million, and the management is confident that at this level they would be able to continue the current activities of RSPH in the event of a significant drop in income.

At the end of the year, the level of unrestricted general funds stood at over £8.6 million. RSPH is currently reviewing its strategic plan for the next three to five years and expected to be completed by late 2022. Once the review is completed part of this unrestricted funds would be allocated to specific designated funds.

Fundraising

Following the implementation of the Charities (Protection and Social Investment) Act 2016, the charity has reviewed its fundraising activities and confirms that it complies with the regulation. The charity did not make use of any external fundraisers. No complaints were received in respect of its fundraising activities.

Objects

The trustees confirm that they have complied with the duty in section 17 of the Charities Act 2011 to have due regard to public benefit guidance published by the Charities Commission in determining the activities undertaken by RSPH.

The objects of RSPH as set out in the Royal Charter are “for the promotion and protection of public health in such ways as are charitable in law”. Through advocacy, mediation, empowerment, knowledge and practice we advise on policy development, provide education and training services, encourage scientific research, disseminate information and good practice.

Financial Review

Funding for RSPH’s work is generated by its core activities in education and training and through the support of specific projects from charitable sources. It is also supported by income from the investment portfolio. Although RSPH continues to experience the effect of the covid pandemic, trustees are pleased with the income for the year compared to the previous year. The total income from all sources has increased by 23% to £2,836,450 (2020- £2,299,971).

Total expenditure for the year has also increased by 8.5% to £2,902,292 (2020- £2,570,253) which includes an expenditure of £210,750 in relation to the restricted funds.

Total net expenditure before gains/(loss) on investments amounted to £65,842 which was 75% better than the net expenditure of £270,282 in 2020. RSPH is pleased with this outcome.

Providing qualifications is one of the main activities of RSPH and this has generated an income of £705,845 which was 31% higher than the previous year’s income of £538,140. The other main activities, membership and publishing, have generated an income of £788,274 for the year, compared to the income of £637,957 in the previous year. Income from projects for the year is £394,951 which is 40% higher than the previous year income. In addition to this, RSPH has also provided other activities such as courses and conferences, educational services, and sold resources, which have generated a combined income of £632,822 for the year.

At 31 December 2021, RSPH received updated advice on the value of its freehold property from a registered RICS valuer and based on this advice, the market value of the property has been reduced by £900,000. This reduction in value is split between tangible fixed assets (£566,888) and investment properties (£333,112).

Overall, RSPH’s net deficit after all the gains and depreciation is £316,594 compared to a net surplus of £2,130,237 in the previous year.

Investment policy and performance

Investments are managed by external managers, Rathbones Investment Management Ltd who have many years' experiences of investment management and are authorised persons within the Financial Services and Markets Act 2000.

RSPH delegates power to Rathbones Investment Management Ltd to use their best endeavours in managing the portfolio within clearly defined policy guidelines. Investments are with corporations who have produced audited accounts in the last five preceding years and trade within the ethical restraints imposed by RSPH.

The investment manager is required to report all transactions within 14 days and submit a comprehensive performance report quarterly. The manager is frequently invited to present his report to the Audit and Risk Committee. RSPH reviews the delegated arrangement with the manager annually. RSPH also undertakes an annual review of its investment objectives which meet the requirements of the Financial Services Authority (FSA).

RSPH's priority is for capital growth with medium income. The portfolio is based on medium risk and may include government and other fixed interest investments and equities. Indirect exposure through UK companies trading internationally is permitted.

During the year, RSPH acquired stocks with a value of £3,141,734 and disposed stocks with the market value of £1,379,346. The market value of the RSPH investment portfolio at the end of the year stood at £5,866,041 (2020-£3,454,405).

Thomas Latimer Cleave Memorial Trust

RSPH administers the above charitable fund which has been registered with the Charity Commission under the number 296180. RSPH is the only trustee of the fund.

Statement of trustees' responsibilities

The trustees are responsible for preparing the Annual Report and the financial statements in accordance with applicable law and regulations. Charity law in England and Wales and the Royal Charter require the trustees to prepare financial statements for each financial year. Under the law the trustees have elected to prepare the financial statements in accordance with United Kingdom Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). The financial statements are required by law to give a true and fair view of the state of affairs of the charity and of the surplus or deficit 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 of the Charities SORP
- make judgments and estimates that are reasonable and prudent
- follow applicable accounting standards
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the company will continue in operation

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the company and enable them to ensure that the financial statements comply with the Charities Act 2011. They are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

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



Dr Nigel Carter, OBE BDS LDS(RCS)
Chair of Council

Date: 6 June 2022

Independent auditor's report to the trustees of Royal Society for Public Health

Opinion

We have audited the financial statements of the Royal Society for Public Health for the year ended 31 December 2021 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 31 December 2021, and of its incoming resources and application of resources, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Charities Act 2011.

Basis for opinion

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

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 Act 2011 requires us to report to you if, in our opinion:

- the information given in the Trustees' Annual Report is inconsistent in any material respect with the financial statements; or
- 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 26, 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 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.

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.

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

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 can detect irregularities, including fraud is detailed below.

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, 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.

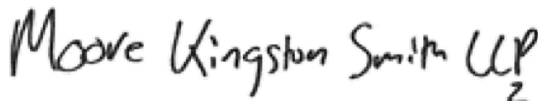
There are inherent limitations in the audit procedures described above. We are less likely to become aware of instances of non-compliance with laws and regulations that are not closely related to events and transactions reflected in the financial statements. Also, the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

Use of our report

This report is made solely to the charity's trustees, as a body, in accordance with Chapter 3 of Part 8 of the Charities Act 2011. 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
Statutory auditor Devonshire House
60 Goswell Road
London
EC1M 7AD

Signature

A handwritten signature in black ink that reads "Moore Kingston Smith LLP". The signature is written in a cursive, flowing style.

Date: 11 July 2022

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

Statement of Financial Activities for the year ended 31 December 2021

	Unrestricted Funds £	Restricted Funds £	2021 Total £	2020 Total £
Income from:				
Donations and sponsorship	32,020	-	32,020	83,386
Charitable activities 3(a)	2,425,412	96,480	2,521,892	1,862,762
<i>Other trading activities:</i>				
Rental, room hire and other income	169,385	-	169,385	338,879
Investments	111,181	1,972	113,153	14,944
Total	2,737,998	98,452	2,836,450	2,299,971
Expenditure on:				
Raising funds				
Trading operations	131,511	-	131,511	215,128
Charitable activities	2,560,031	210,750	2,770,781	2,355,125
Total 3(b)	2,691,542	210,750	2,902,292	2,570,253
Net expenditure before gains/(loss) on investments	46,456	(112,298)	(65,842)	(270,282)
Gain on disposal of leasehold property	-	-	-	2,153,615
(Loss)/Gain on revaluation of freehold property	(566,888)	-	(566,888)	150,000
Net gain on investments	316,136	-	316,136	96,904
Net expenditure/surplus	(204,296)	(112,298)	(316,594)	2,130,237
Net movement in funds	(204,296)	(112,298)	(316,594)	2,130,237
Reconciliation of funds				
Funds brought forward	13,251,358	310,847	13,562,205	11,431,968
Funds brought forward 12	13,047,062	198,549	13,245,611	13,562,205

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

Balance Sheet as of 31 December 2021

	Note	2021 £	2020 £
Fixed Assets			
Tangible Assets	6	4,166,412	4,734,070
Intangible Assets	7	75,497	91,774
Investments	8	8,306,722	6,228,198
		12,548,631	11,054,042
Current Assets			
Stock		2,846	162
Debtors	9	237,029	294,299
Cash at bank and in hand		1,112,564	2,752,304
		1,352,439	3,046,765
Creditors: amounts falling due within one year	10	(655,459)	(538,602)
Net current assets/(liabilities)		696,980	2,508,163
Total assets less current liabilities		13,245,611	13,562,205
Net Assets		13,245,611	13,562,205
Funds	13		
Restricted Funds		198,549	310,847
Unrestricted Funds			
General		8,634,451	8,295,583
Designated and revaluation reserve		4,412,611	4,955,775
		13,245,611	13,562,205

These financial statements were approved and authorised for issue by the Council on 6 June 2022 and were signed below on its behalf by;



Dr Nigel Carter, OBE BDS LDS(RCS)
Chair of Council



Professor Carol Wallace
Treasurer

Statement of Cash Flows for the year ended 31 December 2021

	2021 £	2020 £
Cash flows from operating activities (see note below)	37,050	(23,511)
<i>Cash flows from investing activities</i>		
Dividends received	113,153	14,944
Net sale proceeds on disposal of property	-	9,322,782
Proceeds from sale of other Investments	1,379,346	229,337
Purchase of investments	(3,141,734)	(3,038,722)
Purchase of fixed assets	(27,555)	(110,920)
Net cash provided/(used) by investing activities	(1,676,790)	6,417,421
<i>Cash flows from financing activities</i>		
Repayments of borrowing	-	(3,178,802)
Net cash used in financing activities	-	(3,178,802)
Cash and cash equivalents at the beginning of the year	2,752,304	(462,804)
Cash and cash equivalents at the end of the year	1,112,564	2,752,304

Notes to the Cash Flow Statement

Reconciliation of Net Movement in Funds to Net cashflow from operating activities

	2021 £	2020 £
Net income/(expenditure) for the year	(316,594)	2,130,237
Depreciation	7,775	35,790
Amortisation	36,827	12,110
Increase/(decrease) in revaluation reserve	566,888	(150,000)
Dividends and interest	(113,153)	(14,944)
Net loss/(gain) on disposal of leasehold property	-	(2,153,615)
Net loss/(gain) on investments	(316,136)	(96,904)
Decrease in debtors	57,270	155,273
(Increase)/Decrease in stock	(2,684)	605
Increase in creditors	116,857	57,937
	37,050	(23,511)

Analysis of Cash and Cash Equivalents

	2021 £	2020 £
Cash at bank and in hand	1,112,564	2,752,304
	1,112,564	2,752,304

Report and financial statements for the year ended 31 December 2021

Notes to the accounts

1. Accounting policies

Basis of preparation

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 2015) - (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102). The charity 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).

Functional currency and level of rounding

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

Going concern

The financial statements are prepared on a going concern basis which assumes the charitable company will continue in operational existence for the foreseeable future. At the end of the year charity's cash balance was £1,112,564 and the value of its listed investment portfolio was £5,866,041 at the balance sheet date. This can be drawn down to support operating activities if necessary. The trustees continue to review the impact of the ongoing Covid-19 pandemic and are satisfied with the performance this year with an increase in the charitable activities turnover of 35% compared to the previous year.

Accordingly the financial statements have been prepared on a going concern basis.

Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the trustees in furtherance of the general objectives of the charity and which have not been designated for other purposes. Designated funds comprise unrestricted funds that have been set aside by the trustees for particular purposes. Restricted funds are funds subject to specific restrictive conditions imposed by donors or by the purpose of the appeal.

Income

All income is included in the SOFA when the charity is legally entitled to the income, it is probable that income will be received and the amount of income receivable can be measured reliably. Income is accounted for on an accruals basis. Part of the income from investments is allocated to the restricted funds and this is calculated at the rate of 1% above the Bank of England's base rate on the average balance of the funds during the year.

Grants relating to revenue are recognised in income on a systematic basis over the periods in which the entity recognises the associated costs for which the grant is intended to compensate. This includes £3,450 (2020- £38,896) of Government assistance under the Coronavirus Job Retention Scheme (CJRS) relating to staff who were furloughed due to Covid-19.

Expenditure

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregated all costs related to the category.

Support costs, which include the central office functions such as general management, budgeting and accounting, information technology, marketing and financing are allocated across the categories of charitable expenditure, governance costs and the costs of generating funds. The basis of costs allocation has been explained in the note 3 (c).

Report and financial statements for the year ended 31 December 2021

Notes to the accounts – cont'd

1. Accounting policies cont'd

Expenditure cont'd

Governance costs comprise all costs identified as wholly or mainly attributable to ensuring the public accountability of the charity and its compliance with regulation. These costs include external audit and trustee costs. Governance costs are now apportioned on the same basis as support costs.

Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

Charitable activities

Costs of charitable activities comprise all costs identified as wholly or mainly attributable to achieving charitable objects of the charity. These costs include staff costs, wholly or mainly attributable support costs and apportionment of general overheads.

Operating leases

All the operating lease rentals are charged to the income and expenditure account on a straight line basis over the terms of the lease.

Pensions

RSPH operates a group personal pension scheme with AEGON Scottish Equitable for its employees and this scheme complies with the employer pension duties applicable under Part 1 of the Pensions Act 2008. This is a contributory scheme and RSPH contributes 10% to Senior Managers and up to 7.5% to all the other employees. The assets of the scheme are held separately from those of the charity in independently administered funds. The pension cost charge represents contributions payable under this arrangement by RSPH to the funds. RSPH has no liability other than for the payment of those contributions.

Tangible fixed assets

All income is included in the SOFA when the tangible fixed assets, except freehold property, are stated at cost less accumulated depreciation. Depreciation is provided so as to write off the cost of tangible fixed assets over their estimated useful lives of:

- Computer hardware - 3 years
- Office equipment - 3 years
- Office furniture - 3 years

The freehold property at 59 Mansell Street, London E1 was acquired by the charity on 27 January 2011 for £3.35million. The charity decided to adopt the policy of revaluation and the premises was valued at £6.6 million at 31 December 2021. This property is also split between tangible fixed assets (£4,159,319) and investment properties (£2,440,681) as per the mixed use of the building. The trustees believe that the current valuation reflects the realisable value of the premises under current market conditions.

Intangible fixed assets

Intangible fixed assets are stated at cost less accumulated depreciation. Amortisation is provided so as to write off the cost of intangible fixed assets over their estimated useful lives of:

- Software - 3 years

RSPH's policy is to capitalise any of the above items with the value over £500.

Investments

Investments are valued and carried at market value. Realised and unrealised gains or losses on revaluation are disclosed in the Statement of Financial Activities.

Fixed asset investment properties are revalued annually at open market value.

Report and financial statements for the year ended 31 December 2021

Notes to the accounts – cont'd

1. Accounting policies cont'd

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 includes cash and overdraft balances.

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.

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 accruals basis and in line with FRS 102

Key estimates and judgements

In the application of the charity's accounting policies, which are described in note 1, the trustees are required to make judgements, estimates and assumptions about the carrying amounts of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised if the revision affects only that period, or in the period of the revision and future periods if the revision affects both current and future periods. The following judgement is considered by the trustees to have most significant effect on amounts recognised in the financial statements:

- The charity's fixed-use freehold property is included in the financial statements at valuation as described in notes 6 and 7 to the financial statements. This is considered to be a critical accounting estimate in view of the amounts involved and the judgements applied in their valuation.

2. Taxation

As a registered charity, RSPH is potentially exempt from taxation on its income and gains falling within s505 Income & Corporation Taxes Act 1988 and s256 Taxation of Chargeable Gains Act 1992 to the extent that these are applied to its charitable purposes. No tax charge has arisen in the year.

Report and financial statements for the year ended 31 December 2021

3. (a)

Income - Charitable activities - 2021

	Un-restricted General funds £	Restricted funds £	2021 Total £
Qualifications	705,845	-	705,845
Membership and publishing	788,274	-	788,274
Courses and conferences	262,970	-	262,970
Educational services	363,131	-	363,131
Projects	298,471	96,480	394,951
Bookshop	6,721	-	6,721
	2,425,412	96,480	2,521,892

Income - Charitable activities - 2020

	Un-restricted General funds £	Restricted funds £	2020 Total £
Qualifications	538,140	-	538,140
Membership and publishing	637,957	-	637,957
Courses and conferences	98,317	-	98,317
Educational services	300,887	-	300,887
Projects	199,929	81,940	281,869
Bookshop	5,592	-	5,592
	1,780,822	81,940	1,862,762

3. (b)

Total Expenditure - 2021

Costs of generating funds

	Direct costs £	Indirect costs £	2021 Total £
Rental and room hire costs	24,649	74,487	99,136
Investment managers fees	32,375	-	32,375

	57,024	74,487	131,511
--	---------------	---------------	----------------

Charitable activities

Qualifications	459,241	267,715	726,956
Membership and publishing	405,966	237,028	642,994
Courses and conferences	208,422	80,359	288,781
Educational services	250,104	112,851	362,955
Projects	395,704	188,948	584,652
Bookshop	8,182	3,468	11,650
Policy and communications	152,793	-	152,793

	1,880,412	890,369	2,770,781
--	------------------	----------------	------------------

	1,937,436	964,856	2,902,292
--	------------------	----------------	------------------

Report and financial statements for the year ended 31 December 2021

3. (b)

Total Expenditure - 2020

	Direct costs £	Indirect costs £	2020 Total £
<i>Costs of generating funds</i>			
Rental and room hire costs	120,972	83,547	204,519
Investment managers fees	10,609	-	10,609
	131,581	83,547	215,128
<i>Charitable activities</i>			
Qualifications	452,130	303,690	755,820
Membership and publishing	362,600	214,663	577,263
Courses and conferences	109,868	86,533	196,401
Educational services	160,131	91,993	252,124
Projects	283,950	156,531	440,481
Bookshop	2,926	5,419	8,345
Policy and communications	124,691	-	124,691
	1,496,296	858,829	2,355,125
	1,627,877	942,376	2,570,253

3. (c)

Support costs - 2021

	Premises £	Other Overheads £	2021 Total £
<i>Costs of generating funds</i>			
Rental and room hire costs	7,284	67,203	74,487
	7,284	67,203	74,487
<i>Charitable activities</i>			
Qualifications	39,969	227,746	267,715
Membership and publishing	29,976	207,052	237,028
Courses and conferences	2,248	78,111	80,359
Educational services	14,988	97,863	112,851
Projects	22,193	166,755	188,948
Bookshop	1,249	2,219	3,468
	110,623	779,746	890,369
	117,907	846,949	964,856

Report and financial statements for the year ended 31 December 2021

3. (c) cont'd

Support costs - 2020

	Premises £	Other Overheads £	2020 Total £
<i>Costs of generating funds</i>			
Rental and room hire costs	13,579	69,968	83,547
	13,579	69,968	83,547
<i>Charitable activities</i>			
Qualifications	38,798	264,892	303,690
Membership and publishing	29,098	185,565	214,663
Courses and conferences	2,182	84,351	86,533
Educational services	14,549	77,444	91,993
Projects	15,761	140,770	156,531
Bookshop	1,212	4,207	5,419
	101,600	757,229	858,829
	115,179	827,197	942,376

Other overheads;

	2021 £	2020 £
Overhead staff costs	425,676	361,078
Marketing and communications	127,988	82,944
Administrative expenses	267,964	315,244
Governance	25,321	15,396
Loan interest and charges	-	52,535
	846,949	827,197

Support costs have been allocated on the following basis;

Premises costs	allocated based on the floor space basis occupied by each department.
Overheads	allocated based on turn over basis

3. (d) Governance costs

	2021 £	2020 £
Audit fees	15,600	15,045
Council meeting expenses	355	351
	15,955	15,396

Report and financial statements for the year ended 31 December 2021

3. (e) Staff costs

	2021 £	2020 £
Salaries	1,205,200	1,189,511
Social security costs	128,997	124,212
Pension and other benefits	146,255	156,706
Ex-Gratia/Redundancy costs	37,285	14,695
	1,517,737	1,485,125

The average number of employees during the year was:

Royal Society of Public Health

2021 Number	2020 Number
33	34
33	34

The number of employees whose salary and benefit in kind fell within the following scales is as follows:

£110,001 - £120,000

£90,001 - £100,000

£70,001 - £80,000

£60,001 - £70,000

2021 Number	2020 Number
1	-
-	1
-	1
2	1

Key management personnel

Key management personnel are the trustees and members of the Executive Management Team. Trustees are not paid any remuneration for their role as members of the Council (Board). The Executive Management Team members are the Chief Executive, Director of Membership and Education, Director of Policy and Public Affairs, Director of Finance and Corporate Resources, Director of Qualifications, Director of National and Regional Programmes and Commercial Director. The total employee benefits paid to the Executive Management Team were £575,920 (2020 - £545,889).

3. (f) Related parties

Professor Lisa Ackerley, chairing and speaking at RSPH courses and conferences, received an Honorarium of £300 (2020 - £650) in accordance with Article 4.3 of the Royal Charter.

Travelling expenses totalling £355 (2020 - £441) were reimbursed to three (2020 - four) trustees during the year to 31 December 2021.

Trustees liability insurance premium of £3,600 (2020 - £7,056) was paid in the period.

4. Operating costs

The deficit is stated after charging:

	2021 £	2020 £
Depreciation charge	7,775	35,790
Amortisation charge	36,827	12,110
Auditors' remuneration	15,600	15,045
Finance costs	-	52,535

Statement of Financial Activities for the year ended 31 December 2021

5. Commitments under operating leases

At 31 December 2021 the charity had annual commitments under non-cancellable operating leases as follows:

	2021 £	2020 £
Operating leases - Equipment		
Due within one year	2,283	5,981
Due within 2 to 5 years	381	2,283
	2,664	8,264

6. Tangible fixed assets

	Freehold property £	Computer hardware £	Furniture and office equipment £	Total £
Cost:				
At 1 January 2021	4,726,207	102,888	237,161	5,066,256
Additions in the period	-	7,005	-	7,005
Revaluation	(566,888)	-	-	(566,888)
At 31 December 2021	4,159,319	109,893	237,161	4,506,373

Depreciation

At 1 January 2021	-	97,042	235,144	332,186
Charge for the period	-	6,334	1,441	7,775
At 31 December 2021	-	103,376	236,585	339,961

Net book value

At 31 December 2021	4,159,319	6,517	576	4,166,412
At 31 December 2020	4,726,207	5,846	2,017	4,734,070

At 31 December 2021 there were authorised capital commitments of £Nil (2020: £Nil).

Historic cost and the revaluation of freehold property

Historic cost of the freehold property, 59 Mansell Street, was £3.35 million. At 31 December 2020, this property was valued at £7.5 million by Richard Moss of Cluttons, a registered RICS valuer. At 31 December 2021, the value is estimated to be £6.6 million, based on updated advice from Richard Moss of Cluttons, which is split between tangible fixed assets (£4,159,319) (as above) and investment properties (£2,440,681) (as per note 8). The trustees believe that this valuation reflects the realisable value of the premises under current market conditions.

Statement of Financial Activities for the year ended 31 December 2021

7. Intangible fixed assets

	Software £	Total £
Cost:		
At 1 January 2021	130,704	130,704
Additions in the period	20,550	20,550
At 31 December 2021	151,254	151,254

Depreciation

At 1 January 2021	38,930	38,930
Charge for the period	36,827	36,827
At 31 December 2021	75,757	75,757

Net book value

At 31 December 2021	75,497	75,497
At 31 December 2020	91,774	91,774

At 31 December 2021 there were authorised capital commitments of £Nil (2020: £Nil).

8. Investments

	2021 £	2020 £
RSPH investment portfolio		
Market value of investments on 1 January 2021	6,228,198	6,086,100
Additions	3,141,734	3,038,722
Disposal proceeds	(1,379,346)	(2,993,528)
Net Investment gains	316,136	96,904
Balance at 31 December 2021	8,306,722	6,228,198
Historic Cost of Investments	5,303,430	3,275,631

All investments are quoted on a registered UK stock exchange.

Market Value at 31 December:

	£	£
Investment properties	2,440,681	2,773,793
UK listed investments	5,866,041	3,454,405
	8,306,722	6,228,198

Investment properties

Historic cost of the freehold property, 59 Mansell Street, was £3.35million. At 31 December 2020, this property was valued at £7.5 million by Richard Moss of Cluttons, a registered RICS valuer. At 31 December 2021, the value is estimated to be £6.6 million, based on updated advice from Richard Moss of Cluttons, which is split between tangible fixed assets (£4,159,319) (as per note 6) and investment properties (£2,440,681) (as above). The trustees believe that this valuation reflects the realisable value of the premises under current market conditions.

Report and financial statements for the year ended 31 December 2021

9. Debtors

	2021 £	2020 £
Trade debtors	194,593	178,439
Other debtors	12,607	31,789
Prepayments	29,829	84,071
	237,029	294,299

10. Creditors: amounts falling due within one year

	2021 £	2020 £
Other taxes and social security costs	32,377	51,419
Trade and other creditors	231,632	177,719
Accruals	189,214	65,701
Deferred income	202,236	243,763
	655,459	538,602

Included within other creditors is an amount of £13,254 (2020: £14,832) of pension contributions to be paid across to scheme.

Deferred income-movements during the year:

	2021 £	2020 £
Balance at 1 January	243,763	142,337
Amounts released to income in the year	(243,763)	(142,337)
New deferred income in the year	202,236	243,763
Balance at 31 December	202,236	243,763

Report and financial statements for the year ended 31 December 2021

11. Analysis of net assets - 2021

	General Fund £	Designated Fund £	Revaluation Reserve £	Restricted Fund £	2021 Total £
Tangible fixed assets	916,412	-	3,250,000	-	4,166,412
Intangible fixed assets	75,497	-	-	-	75,497
Investments	7,744,111	-	562,611	-	8,306,722
Current assets	553,890	600,000	-	198,549	1,352,439
Liabilities	(655,459)	-	-	-	(655,459)
	8,634,451	600,000	3,812,611	198,549	13,245,611

12. Analysis of net assets - 2020

	General Fund £	Designated Fund £	Revaluation Reserve £	Restricted Fund £	2020 Total £
Tangible fixed assets	639,545	-	4,094,525	-	4,734,070
Intangible fixed assets	91,774	-	-	-	91,774
Investments	5,966,948	-	261,250	-	6,228,198
Current assets	2,135,918	600,000	-	310,847	3,046,765
Liabilities	(538,602)	-	-	-	(538,602)
	8,295,583	600,000	4,355,775	310,847	13,562,205

Report and financial statements for the year ended 31 December 2021

13. Funds - 2021

	1 Jan 21	Income	Expenditure	Gains, Losses & Transfers	31 Dec 21
	£	£	£	£	£
General fund	8,295,583	2,737,998	(2,691,542)	292,412	8,634,451
Designated funds and revaluation reserve					
Building fund	600,000	-	-	-	600,000
Revaluation reserve	4,355,775	-	-	(543,164)	3,812,611
	4,955,775	-	-	(543,164)	4,412,611
Restricted funds					
Nigel Symonds	1,135	11	-	-	1,146
Harben Trust	82,439	825	-	-	83,264
Heggie fund	60,193	602	-	-	60,795
Thomas Latimer Cleave Memorial Trust	8,076	81	-	-	8,157
Awards fund	12,633	126	-	-	12,759
EMC Wilson Bequest fund	901	9	-	-	910
Gamble Aware	32,555	96,689	(108,175)	-	21,069
Robert Wood Johnson	112,915	109	(102,575)	-	10,449
	310,847	98,452	(210,750)	-	198,549
Total funds - 2021	13,562,205	2,836,450	(2,902,292)	(250,752)	13,245,610

Report and financial statements for the year ended 31 December 2021

Funds - 2020

	1 Jan 20	Income	Expenditure	Gains, Losses & Transfers	31 Dec 20
	£	£	£	£	£
General fund	2,050,612	2,214,923	(2,395,931)	6,425,979	8,295,583
Designated funds and revaluation reserve					
Building fund	133,481	-	(15,420)	481,939	600,000
Revaluation reserve	8,863,173	-	-	(4,507,398)	4,355,775
	8,996,654	-	(15,420)	(4,025,459)	4,955,775
Restricted funds					
Nigel Symonds	1,124	11	-	-	1,135
Harben Trust	81,615	824	-	-	82,439
Heggie fund	59,591	602	-	-	60,193
Thomas Latimer Cleave Memorial Trust	7,995	81	-	-	8,076
Awards fund	12,507	126	-	-	12,633
EMC Wilson Bequest Fund	892	9	-	-	901
Gamble Aware	76,884	82,266	(126,594)	-	32,555
Robert Wood Johnson	144,095	1,129	(32,309)	-	112,915
	384,702	85,048	(158,903)	-	310,847
Total funds - 2021	11,431,968	2,299,971	(2,570,253)	2,400,520	13,562,205

Report and financial statements for the year ended 31 December 2021

14. Funds - continued

RSPH has designated certain funds as follows:

Building fund - represents amounts set aside for property refurbishments, repairs and maintenance over the next three years.

Major restricted funds of RSPH as follows:

Harben Trust fund - represents amounts restricted for the purpose of an annual lectureship “dealing with some subject embodying the results of original research in conjunction with the science of public health”.

Heggie fund - represents amounts restricted for the specific purposes of
(a) the refurbishment and maintenance in perpetuity of ‘James Heggie Room’ in 28 Portland Place.
(b) the development of courses and examinations for anatomical pathology technicians.

Thomas Latimer Cleave Memorial fund - represents amounts restricted for the purpose for the advancement of education and in furtherance thereof to provide prizes, awards, scholarships and grants to students of food science subjects.

Awards fund - represents all the individual restricted award funds from the predecessor or organisations Royal Institute of Public Health and the Royal Society for the Promotion of Health.

Gamble Aware - represents to establish and run Gambling Health Alliance

Robert Wood Johnson - to support the Health on the High Street campaign in the USA

15. Net debt

	2020	Cash flow movements	Other movements	2021
	£'000	£'000	£'000	£'000
Cash at bank and in hand	2,752,304	(1,639,740)	-	1,112,564
Net debt	2,752,304	(1,639,740)	-	1,112,564

Royal Society for Public Health
John Snow House
59 Mansell Street
London E1 8AN
+44 (0)20 7265 7300
info@rsph.org.uk
www.rsph.org.uk

RSPH Incorporated by Royal Charter
Patron: Her Majesty The Queen

Charity Registration 1125949 and SC040750