BRITISH HIV ASSOCIATION

England & Wales · Charity number 1170707

Details

Other names	BRITISH HIV ASSOCIATION (BHIVA)
Status	Registered
Legal form	CIO
Registered	2016-12-12
Register	View on the Charity Commission register

Contact

Address	British HIV Association Spirella Building Bridge Road Letchworth Hertfordshire SG6 4ET
Phone	01462 530070
Email	bhiva@bhiva.org
Website	www.bhiva.org

Activities

Objects: 1) TO RELIEVE SICKNESS AND TO PROTECT AND PRESERVE HEALTH THROUGH THE DEVELOPMENT AND PROMOTION OF GOOD PRACTICE IN THE TREATMENT OF HIV AND HIV-RELATED ILLNESSES AND IN SUCH OTHER CHARITABLE WAYS AS THE CIO, THROUGH ITS CHARITY TRUSTEES, MAY FROM TIME TO TIME DECIDE.2) TO ADVANCE PUBLIC EDUCATION IN THE SUBJECTS OF HIV AND THE SYMPTOMS, CAUSES, TREATMENT AND PREVENTION OF HIV-RELATED ILLNESSES THROUGH THE PROMOTION OF RESEARCH AND THE DISSEMINATION OF THE USEFUL RESULTS OF SUCH RESEARCH, AND IN SUCH OTHER CHARITABLE WAYS AS THE CIO, THROUGH ITS CHARITY TRUSTEES, MAY FROM TIME TO TIME DECIDE.

Activities: BHIVA is the leading UK association representing professionals in HIV care. Since 1995, we have been committed to providing excellent care for people living with and affected by HIV. BHIVA is a national advisory body on all aspects of HIV care and we provide a national platform for HIV care issues. Our representatives contribute to international, national and local committees dealing with HIV care

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Classification

- **How:** Makes Grants To Individuals, Makes Grants To Organisations, Provides Advocacy/advice/information, Sponsors Or Undertakes Research, Acts As An Umbrella Or Resource Body
- **What:** The Advancement Of Health Or Saving Of Lives, Other Charitable Purposes

Geography

- Throughout England And Wales

Finances

Period end	Income	Expenditure	Assets	Employees
2024-12-31	£930,618	£1,125,338	£1,995,167	0
2023-12-31	£839,260	£1,003,687	£1,997,995	0
2022-12-31	£857,689	£831,624	£2,082,631	0
2021-12-31	£868,933	£850,029	£2,383,254	0
2020-12-31	£807,543	£912,412	£2,141,340	0

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Trustees

Name	Role	Appointed
Dr Tristan John Barber	Chair	2019-10-03
Dr Aderonke Oyeyemi Oluwadamilola Collier		2025-11-28
Dr Carol Emerson		2023-11-24
Dr Daniel John Clutterbuck		2020-11-22
Dr Hannah Pintilie		2023-11-24
Dr IAIN REEVES		2018-10-05
Dr Joe Smith		2025-11-28
Dr Kathryn Childs		2023-04-24
Dr Lasanthi Nirupama Siriwardena		2024-06-18
Dr Miriam Ann Kathleen Cadden Ringshall		2025-11-28
Dr Naomi Sarah Bulteel		2025-11-28
Dr Nicola Mackie		2019-10-03
Dr Venkateshwaran Sivaraj		2025-11-28
John Robert Jaquiss		2022-11-25
Nadia Naous		2023-11-24
PROFESSOR CAROLINE SABIN		2017-11-17

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BRITISH HIV ASSOCIATION

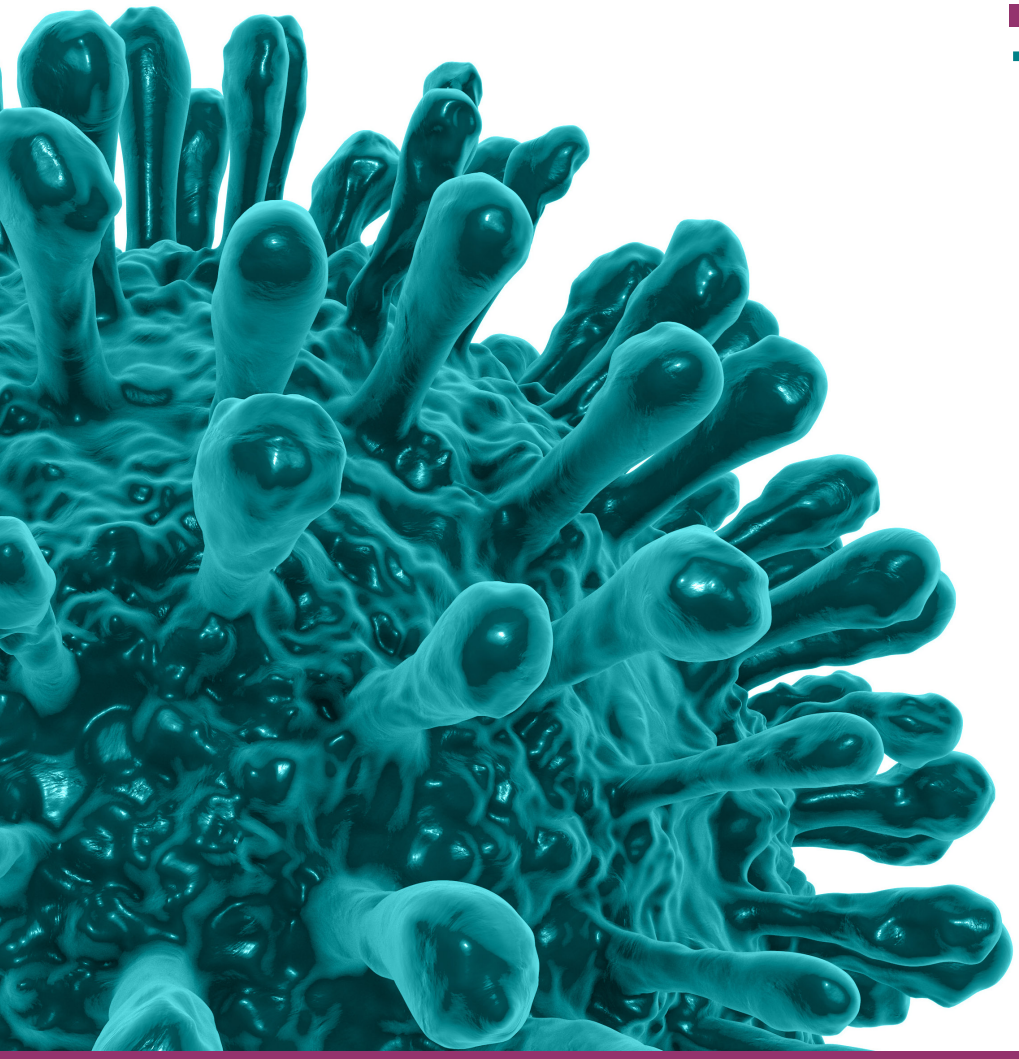
England & Wales - Charity number 1170707

Accounts

BHIVA
British HIV Association

2024

Trustees' Annual Report & Accounts



www.bhiva.org

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Charity information for the year ended 31 December 2024

Trustees retiring on 29 November 2024

- There were no trustees retiring at the date 29 November 2024.

Charity Trustees from 29 November 2024

Officers

- Professor Yvonne Gilleece, Chair appointed 20 January 2023
- Dr Nicola Mackie, Vice Chair, appointed 25 November 2022
- Dr Tristan Barber, Honorary Secretary, appointed 25 November 2022
- Dr Iain Reeves, Honorary Treasurer, appointed 24 November 2023

Elected Trustees

- Dr Kate Childs, appointed 19 April 2023
- Ms Nadia Naous, appointed 24 November 2023
- Dr Dan Clutterbuck, appointed 24 November 2023
- Dr David Chadwick (appointed 25 November 2022)
- Dr Carol Emerson, appointed 24 November 2023
- Dr Jonathan Underwood (appointed 25 November 2022)

Specific Trustee Roles

- Dr Hannah Pintilie, New Consultant Doctors' Representative, appointed 24 November 2023
- Professor Caroline Sabin, Editor-in-Chief, HIV Medicine, appointed 25 November 2022
- Mr Jeremy Huband, Financial Expert Trustee, appointed 29 November 2024
- Dr Lasanthi Siriwardena, SAS Doctors' Representative Trustee, appointed 29 November 2024
- Mr John Jaquiss, UK-CAB Community Representative, appointed as representative 25 November 2022
- Dr Nina Vora, Trainee Doctors' Representative, appointed 24 November 2023

Charity Number

- 1170707

Registered Office and Operational Address

- Spirella Building
  Bridge Road, Letchworth
  Hertfordshire, SG6 4ET

Independent Examiners

- TC Group
  PO Box 501
  The Nexus Building, Broadway, Letchworth
  Hertfordshire, SG6 9BL

Bankers

- National Westminster Bank plc
  190 The Broadway, Muswell Hill
  London N10 3SD

About BHIVA

The British HIV Association, (BHIVA), is the leading UK association representing professionals in HIV. Since its inception in 1995, BHIVA has been committed to providing excellent care for people living with and affected by HIV.

BHIVA is a national advisory body on all aspects of HIV care and the association provides a national platform for HIV care issues. BHIVA representatives contribute to international, national and local committees dealing with HIV care. In addition, BHIVA promotes undergraduate, postgraduate and continuing medical education within HIV care.

The association aims to advance professional and public education in the subjects of HIV, including testing, treatment and prevention, and the management of HIV-related illnesses and treatment complications through the promotion of research, dissemination of and the production and promotion of evidence-based guidelines and standards.

Our objectives

BHIVA has four main objectives:

1. To relieve sickness and to protect and preserve health through the development and promotion of good practice in the testing and treatment of HIV and HIV-related illnesses:
2. To advance public and professional education on HIV through education and the promotion, conduct and dissemination of research
3. To promote optimal outcomes for people living with, and affected by, HIV through the development and dissemination of national guidelines and standards, audit and research
4. To support other organisations through activities including collaborative responses to consultations, media representation of HIV, workforce planning and, exceptionally, individual cases of stigma, discrimination or suboptimal care

Long term, continuing to promote best practice within the specialty, ensuring that the care provided for people living with HIV in the UK is world-leading is of primary concern. To achieve that aim, BHIVA must maintain its contribution to the continued growth of the specialty over the next decade by continuing to support training and research in the field of HIV medicine and helping to ensure that the existing excellent national standards of care are maintained.

Education is a primary focus and BHIVA is passionate about promoting and supporting the speciality to deliver undergraduate, postgraduate and continuing medical education within HIV care.

With work still to be done in educating the medical profession, scientific community public about HIV, through the promotion of research and dissemination of research results is central to the association's objectives. Promoting accurate messaging related to HIV and challenging decisions that discriminate against people living with, or affected by, HIV helps overcome outdated beliefs and challenge stigma.

Education is also key to the ongoing development of the speciality and the ability to develop a fully integrated educational programme for members and the wider HIV community is at the heart of the long-term strategy of the association. Promoting and disseminating the latest research through regional, national and international meetings and conferences and publications, and supporting an increasingly diverse range of research studies which aim to improve the health and lives of people living with HIV will help to achieve this.

By increasing the awareness of BHIVA at an international level, BHIVA endeavours to maintain a reputation for excellence education and research. The

association's ability to support a range of stakeholders and organisations by providing expert clinical advice on HIV and its management further strengthens BHIVA's international presence.

Activities

BHIVA promotes excellence in HIV care through production of evidence-based, NICE-accredited guidelines. Our antiretroviral treatment guidelines form the basis of national prescribing policies across the UK and are widely read and referenced internationally. BHIVA represents the interests of people with HIV and input from the HIV clinical and research communities through feedback on national prescribing policies. Antiretrovirals moved under the remit of NICE for the first-time last year and BHIVA provided strong written feedback and verbal representation at the NICE Technology Appraisal for the first generation of injectable HIV treatment in 2021.

BHIVA works closely with other professional and community organisations to advocate against discriminatory policies and ensure that the needs and priorities of people with HIV are at the heart of decisions that affect them.

BHIVA actively encourages the presentation of original UK research. Abstracts are invited for the annual spring conference, which aims to showcase the best contemporary research into HIV-related topics currently being undertaken in the UK. The annual conference attracts a broad spectrum of participants from experienced HIV specialists to those still in training, HIV researchers from a range of disciplines and community members. Eminent international speakers are invited to present the latest data.

BHIVA supports research in HIV care through its annual Research Awards Scheme. Originally launched in 2006, the programme operates through competitive application. Open to all BHIVA members applicants can submit applications for the funding of research projects that impact on the improvement of clinical care and management of people living with HIV in the UK. A minimum of £30,000 per annum is available, to be distributed amongst the successful applicants according to the quality of the submitted proposals. The awards panel is chaired by an independent chair.

Applications for grants or funding for research or other projects made directly to the association are reviewed by the BHIVA Executive Committee on a quarterly basis and considered based on merit and relevance to the objectives of BHIVA.

HIV Medicine is the official journal of the association and is published by Wiley. HIV Medicine is a peer-reviewed journal publishing original articles, reviews and guidelines on all aspects of HIV treatment and diagnosis.

BHIVA also undertakes a wide range of other activities to promote medical education in HIV care and support research. This includes conference feedback meetings, training courses for the Diploma in HIV Medicine examination, web-based e-learning modules as well as international scholarships and exchanges to forge links with international organisations to increase the understanding of the treatment and management of HIV.

A board of 18 trustees are responsible for the work of the association and its activities are carried out by five main sub-committees, all which report to the Executive Committee.

The sub-committees are:

- Audit and Standards
- Conferences
- Education and Scientific
- External Relations
- Guidelines

The Executive Committee review the work carried out by the sub-committees to ensure its activities are in line with the charity's objectives. All trustees sit on at least one sub-committees to facilitate this process and monitor progress.

BHIVA would be unable to flourish without the considerable commitment of time, energy, expertise and dedication by so many individual members of the committees, sub-committees, writing and working groups as well as the vital support through sponsorship from within the pharmaceutical industry.

2024 Year in review

Once again BHIVA has embraced its mission to support people living with and affected by HIV.

Our Equity, Equality, Diversity and Inclusion (EEDI) working group held its first webinar, with excellent attendance and feedback. The ethos of EEDI is embedded in every BHIVA subcommittee and the EEDI working group facilitated our achievement of our first appointed Trustee.

Our BHIVA HIV in pregnancy guidelines underwent a complete revision and update and were circulated for public consultation in 2024, with a publication date on our BHIVA website for Summer 2025. We also updated chapters of the opportunistic infections on the clinical management of opportunistic infections in pregnancy, pulmonary opportunistic infections and non-tuberculosis mycobacteria. We published a position statement on measles in people living with HIV in Jan 2024 and updated our Rapid Guidance on statins for people living with HIV but also our guidance on opt-out consent for HIV testing in Emergency Departments.

We launched our newly designed BHIVA website which has been incredibly well received with regards to colour scheme, ease of use and clarity. We continued our strong mainstream media presence on matters relating to HIV, featuring on a wide range of media outlets, including radio and television, as well as social media. BHIVA was proud to attend the first World AIDS Day Event in Downing Street since 2007, hosted by the Prime Minister Sir Keir Starmer.

Our virtual CROI feedback sessions once again garnered excellent feedback with over 350 registrants. We held our BHIVA Spring Conference 2024 in Birmingham with over 750 registrants from the multidisciplinary HIV team, researchers and academics as well as the community. Our first Regional World AIDS Day was hosted by the winning bid from Manchester was a great success. We marched together, we shared our experiences by candlelight and listened to the wonderful choral remembrance. Our Autumn Conference, held in Bishopsgate, London, once again provided a great venue for speakers, exhibitors and audience alike.

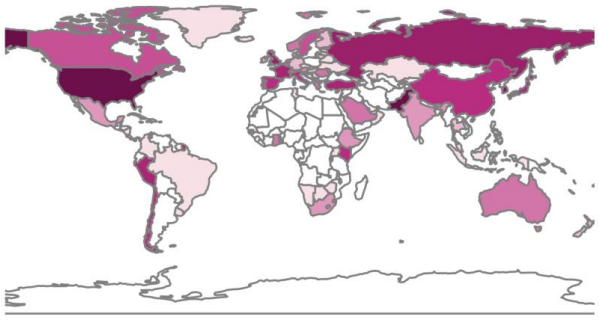
Our audit 2024 project was a national audit of documentation of co-medications and provision of vaccinations but also included communication with GPs, new BHIVA guidance regarding statins and provision of long-acting injectable ART. We surveyed services' policies on documentation of co-medications, and a case-note review of outpatients living seen within the 12 months. Key findings and recommendations were presented at the BHIVA Autumn Conference in November 2024. BHIVA continue to lead the way internationally with our well established and highly regarded Standards of Care.

2024 was another busy year for the Education and Scientific subcommittee with the announcement of from a total of 11 high quality applications, four awards were made totalling £53,207. Work continued on e-learning modules and monthly journal club updates in BHIVA Members Matters. We have also expanded our work on the BHIVA international Partnerships Working Group (IPWG).

I have been very proud to have been Chair during this period of incredible work culminating in BHIVA's 2024 activities and achievements!

Circulation

Global reach



In 2024, 4,420 institutions offered access to the latest content in your journal via a Wiley license or a traditional subscription. On this map, darker shading shows where circulation is highest. Countries/regions with no shading may be covered by philanthopic initiatives. In 2024, our philanthropic initiatives extended low-cost or free access to current content to 4,514 developing world institutions.

Reach by region

Region	2022	2023	2024
Australia & NZ	70	70	69
Canada	93	98	89
China	114	142	139
Europe	1,280	1,250	1,284
Japan	178	173	177
Rest of World	1,846	2,018	1,606
UK	263	265	266
USA	747	784	790
Grand Total	**4,591**	**4,800**	**4,420**

This table shows the number of institutions, by region, with access to the latest content in your journal via either a Wiley license or a traditional subscription.

Reach by access type

Sales Model	2022	2023	2024
Institutions with access via a Wiley license	**4,588**	**4,798**	**4,418**
All Journals license	1,036	1,357	1,306
Transformational agreements	1,195	1,581	1,897
Other licenses	2,357	1,860	1,215
Institutions with access via traditional subscriptions	**3**	**2**	**2**
Online	2	1	2
Print and online	0	0	0
Print	1	1	0
Total	**4,591**	**4,800**	**4,420**

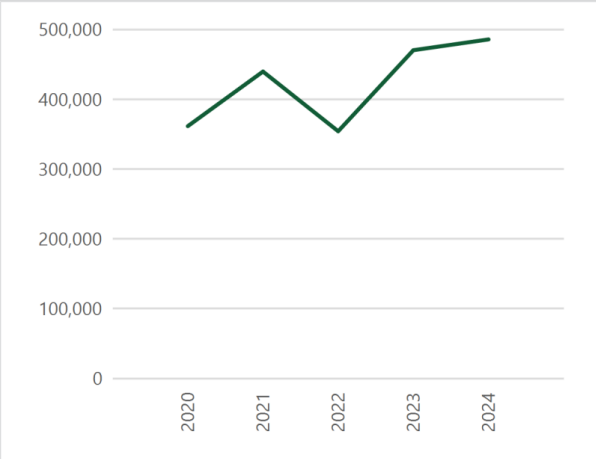
In 2024, 4,418 institutions offered access to your journal via a Wiley license, often through a consortium. Of these institutions, 1,306 had access via the 'All Journals license'. 1,897 institutions had access via 'Transformational agreements' which cover both subscription access and open access publishing. In addition, 2 institutions offered access via traditional (online or print) subscriptions.

Additional reach: EBSCO

Wiley's arrangement with EBSCO allows us to extend the reach of your journal beyond core academic libraries. In 2024, 1,295 institutions accessed embargoed content of at least one year old from your journal via EBSCO databases.
This is a -1.7% change from 2023.

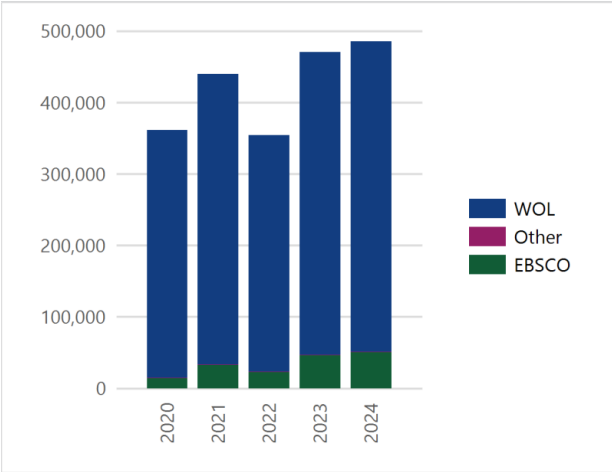
Readership

Article views trend



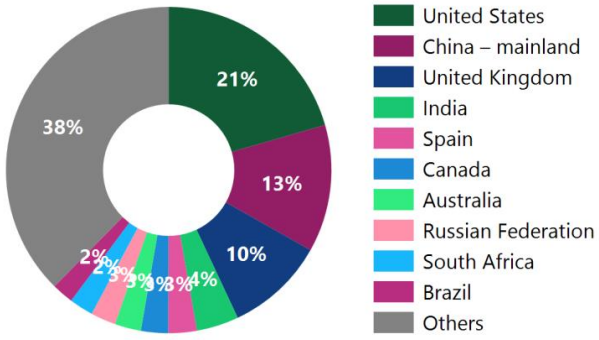
This chart shows the increase in the number of full-text article views for your journal in the period 2020 to 2024. The total includes usage on Wiley Online Library, PubMed, and other third-party databases. Accesses via Wiley Online Library increased (2.5%) in 2024. This compares with a decrease (-0.9%) across all Wiley journals in the Infectious Disease & Microbiology / your subject area.

Reach by region



This chart shows the origin of full-text article views of your journal across Wiley Online Library and other major third party providers.

Top 10 usage countries/regions



This chart shows the top 10 countries/regions from which articles in your journal were accessed via Wiley Online Library in 2024, and the percentage each country/region contributed to total usage. All other countries/regions are combined under “Others”.

Social Media Reach

With over 1,800 followers, the BHIVA Facebook page is managed by the External Relations sub-committee and is used as a tool for promoting the work of the association. It carries updates and links to valuable resources produced by both BHIVA and other organisations within the HIV healthcare sector.

The BHIVA X account, also managed by the External Relations subcommittee, has continued to go from strength to strength again in 2023 and now has over 12,500 followers, an increase from over 10,000 followers in 2022. The group post regularly about the latest updates in the field of HIV and there were approximately 850,000 post impressions across the 12 months.

BHIVA's YouTube channel is used to host the latest resources, including a series of educational podcasts covering a range of hot topics in HIV. Following its set up in 2019, the YouTube channel has become an excellent resource for the broadcast of educational content including sessions from conferences and other training materials.

The BHIVA Instagram account has become increasingly active over the year and we now have 1,500 followers.

The work of the Sub-Committees

Audit and Standards Sub-committee

Professor Fiona Burns,
Chair Audit & Standards Sub-committee

The BHIVA Audit and Standards Subcommittee runs a clinical audit program with HIV centres across the UK to improve quality of care. The 2024 project was a national audit of documentation of co-medications and provision of vaccinations. Other areas of focus included communication with GPs, new BHIVA guidance regarding statins and provision of long-acting injectable ART. It included a brief survey of services' policies on documentation of co-medications, and a case-note review of outpatients living with HIV who have been on the active outpatient caseload and attended an appointment in the last 12 months. Key findings and recommendations were presented at the BHIVA Autumn Conference in November 2024, with individual feedback reports sent to services.

Planning for the 2025 audit began in the latter part of 2024. The chosen topic was partner notification and the testing of children, as this aligns with key priorities within the HIV action plan. Data from UKHSA highlighted a decline in the number of people testing through partner notification since COVID-19. BASHH were invited to collaborate on this audit, building on our previous joint audit with them on this topic in 2013.

As notable changes in care delivery have taken place since the Covid pandemic, the BHIVA Audit and Standards Committee recognised that a review of the 2018 BHIVA Standards of care for people living with HIV was required. The perception across the committee was that most of the standards likely remain applicable and a full revision was unnecessary, however a review of existing chapters to assess their relevance to current clinical practice and whether the supporting evidence base has since evolved was required. The Audit and Standards Committee will conduct this review in 2025 so that a proposal can be submitted to the BHIVA executive committee detailing the scope and support requirements to undertake a revision of the standards.

Progress has also continued throughout 2024 on establishing a new BHIVA HIV-2 MDT/virtual clinic, dedicated to the management of people living with HIV-2. This initiative originated from a small audit presented at BHIVA several years ago, during which participants highlighted the value of a national network given the limited number of cases. Updated guidance followed, and recently the working group has provided regular updates. A standard operating procedure has now been drafted, and work is ongoing to arrange its hosting.

BHIVA and the UK Health Security Agency (UKHSA) continue to collaborate on understanding the causes and preventable mortality among people with HIV through the National HIV Mortality Review (NHMR). The NHMR working group met once during this period, involving regional representatives and specialists to review progress. The data collection platform is being updated to give clinicians more autonomy and to integrate with late diagnosis reviews. At the end of 2024, two new co-chairs were appointed.

Members of the Subcommittee have been updating the process for late diagnosis reviews to ensure alignment with the NHS Patient Safety Incident Response Framework (PSIRF). This includes refining systems for capturing information in a way that integrates with existing mortality review work. The revised approach is scheduled for relaunch in 2025.

BHIVA is collaborating with the British Psychological Society to update psychological support standards for adults with HIV. The updated standards were presented at the BHVA Autumn Conference 2024. Following feedback, they will produce a final version in early 2025 for publication.

Subcommittee members led a survey of emergency departments implementing HIV and hepatitis B/C screening, focusing on the acceptability and understanding of assumed consent. The findings were published in a journal paper, here.

Subcommittee members are supporting and advising on the ECDC/EACS Standards of Care. For 2024 these include ART initiation, co-morbidity management, and antenatal screening.

BHIVA Conferences Sub-committee report

Professor Caroline Sabin,
Chair Conferences Sub-committee

The first organised events of 2024 were the ever-popular Best of CROI webinars. The Conference on Retroviruses and Opportunistic Infections 2024 was a face-to-face event that took place in Denver in March. BHIVA supported a small working party to attend (made possible by grants from pharmaceutical companies) to review the key research. This group worked hard to produce slides and pre-record talks for the webinars which took place on 2 different evenings shortly after the Conference. The webinars were attended by over 500 delegates, with each event culminating in a live panel discussion with Q&A after the recorded talks. Feedback was excellent with virtually all respondents rating the webinars as good or excellent, and participants appreciating the clarity of the presentations, the enthusiasm of the speakers, and the educational content of the event.

A huge amount of work from the Conferences Committee and the Medivents team went into the planning for the BHIVA Spring Conference at the end of April, which returned to Birmingham. The programme featured a variety of invited speakers covering a range of topics including pre-exposure prophylaxis (PrEP) delivery, cardiovascular disease prevention, hepatitis management, health inequalities and marginalised communities, and the management of low level viraemia, as well as our usual updates on the BHIVA guidelines, our 'What's new in HIV/General Medicine' sessions, and the ever popular case presentation sessions. During the 4 oral abstract sessions, the audience was able to hear the latest research presented by a variety of health care workers and community representatives; and many posters on a diverse ranges of topics. Over the lunchtime periods, attendees were also able to choose from 9 parallel

sessions and sponsored workshops from affiliated organisations and pharma companies. Feedback was again excellent, with delegates commenting on the multidisciplinary nature of the meeting, the person-centred approach and focus on equity, and the value of the networking sessions.

November 2024 was a busy month for the team. The ever-popular BHIVA General Medicine Course was held early in the month – a great opportunity for HIV/GU physicians to hear what's new in the ever-changing world of medicine. And on 29th November our BHIVA Autumn Conference was held once again in Bishopsgate, London. With almost 300 delegates, the Autumn Conference had a broad range of speakers exploring research, innovations and programmes and how these can shape our practice and support people living with HIV in the UK.

As always, none of these events would be possible without the huge input, hard work and enthusiasm of the Conferences Committee and of Medivents, particularly Gemma Wilkins, who has supported us throughout the year.

Education and Scientific Sub-committee report

This has been a productive year for the sub-committee with the award of research awards and several educational outputs.
Dr Fiona Cresswell joined as chair of the sub-committee in September 2024, with Tristan stepping down to vice-chair of the sub-committee.

Education

The Education working group, chaired by Dr Ashini Fox, has continued to develop our online resources.

In 2024, E-learning assessment modules based on several chapters of the BHIVAopportunistic infection (OI) guidelines were published. These covered GI infections, Candidiasis, Non-tuberculous mycobacteria, PUO and Kaposi's SarcomaE-learning modules are now open access with the option of completing anonymously which has led to a significant increase in usage. E-learning modules continue to receive positive feedback and be seen as a valuable exam revision resource for the Diploma in HIV Medicine as wellas continuing professional development (CPD) for senior clinicians.

Professor Anna Maria Geretti continues to provide a monthly summary of the BMJ journal Sexually Transmitted Infections for BHIVA Members Matters, and Dr Laura Waters also helpfully provides a summary of the HIV Medicine journal and other highlights.

HIV Medicine (https://onlinelibrary.wiley.com/journal/14681293) is the official journal of BHIVA with all eligible members getting complementary access. The Editors-in-Chief are Professor Caroline Sabin and Professor Jürgen Rockstroh, and the journal achieved an impact factor of 3.2 in 2024.

Research Awards

Professor Alison Rodger chaired the BHIVA Research Awards Judging Panel for the thrid time. Thee awards are funded by Gilead Sciences and BHIVA members, facilitating research projects that will impact on the improvement of clinical care, management, health, and wellbeing of people living with HIV and on the prevention of HIV transmission. From a total of 11 high quality applications, there were four awards made totalling £53,207, as follows:

- Preclinical validation of a Loop-Mediated Isothermal Amplification (LAMP) point-of-care test for the detection of HIV RNA, Dr Jasmini Alagaratnam, Chelsea and Westminster Hospital NHS Foundation Trust, London
- The POWER Study: Projecting the voices of midlife Women in East Sussex with a late diagnosis of HIV, Dr Kiersten Simmons, University Hospitals Sussex NHS Foundation Trust and Brighton and Sussex Medical School
- Gut microbiome diversity and its correlation to treatment response in people living with HIV receiving immunotherapy for combined anti-retroviral therapy (cART) refractory Kaposi Sarcoma (KS): insights from the phase Ib StarKap trial, Dr Claudia Fulgenzi, Imperial College London/ Chelsea and Westminster Hospital, London
- Utility and acceptability of self-collected capillary blood using Tasso® device for HIV viral load testing, Dr Maithili Varadarajan, Chelsea and Westminster NHS Foundation Trust, London

No one was eligible for the Don Jeffries Research Award this year, but we are planning to make an award in 2025.

Professor Maryam Shahmanesh is chair of the BHIVA Implementation Science Awards judging panel. These awards are supported by ViiV Healthcare. Awards in were last made is 2022 but several projects are still ongoing. An application for further funding for another round of Implementation Science Awards was made to ViiV but funding has not yet been confirmed.

International Partnerships Working Group (IPWG)

The BHIVA international Partnerships Working Group (IPWG) is chaired by Dr Douglas Fink, supported by Vice Chair Dr Nadia Ahmed. The BHIVA/Gilead International Exchange Fellowship Awards are designed to support the development of new links between BHIVA and institutions in low- or middle-income countries.

At Birmingham in 2024, the annual IPWG lunchtime plenary session at the BHIVA spring conference hosted Dr Dr Maysoon Abdullah Mohammed speaking online from Egypt on behalf of the Sudanese HIV/AIDS Working Group (SHAWG). Dr Abdullah Mohammed was interviewed by her UK-based SHAWG colleague Dr Rasah Omer, GUM consultant in Rotherham NHS Foundation Trust, about the Sudan experience of delivering HIV care during conflict.

Future plans

The Education and Scientific subcommittee is at the core of BHIVA activities, including in supporting conference delivery, the membership with educational content, and in obtaining funding to support BHIVA's research, implementation science, and international educational exchange programmes. In 2025 there will be an internal reflection on the scope, design and delivery of the research awards with a view to streamlining and optimising the awards and insuring they are as inclusive as possible to BHIVA members. Implementation Science Award: the four active awards that are proceeding will be completing and reporting in the next year. We hope to receive funding from ViiV to support implementation science awards in 2026. The IPWG exchange programme re-opened in August 2025 after a funding hiatus and education activities will continue in the form of e-learning, contribution to conferences and international engagements.

BHIVA External Relations Sub-Committee Report

Dr Matthew Page,
Chair, External Relations Sub-Committee

The External Relations Subcommittee works in line with BHIVA's objectives to promote good practice in the treatment and care of HIV to its membership and external organisations.

Summary Of Activities (June 2024 to Jun 2025)

Organisation structure

The ER committee membership changes have been expanded upon since its restructuring in 2021. We have now incorporated a representative from the EEDI committee who also has a role within the sub-committee outside of being a representative from the EEDI, and a representative from the HIV Pharmacy Special Interest Group.

Still in need of a External Relations Vice Chair, and a clear succession plan for when Matthew Page vacates his position in 2027.

Campaigns and Impact

Following the success of the "Unsung Heroes" award, we are refining the process with a view to make this an ongoing event embedded within the BHIVA conferences.

Following a statement of support, Specsavers have now changed their messaging/policy re: the removal of earwax (Specsavers turn away patient living with HIV for earwax removal- Canary)

Discussion with British Boxing Board of Control regarding ban on boxers living with HIV are being continued.

Media

BHIVA continues to be a mainstream media commentator on HIV, responding to many media enquries. BHIVA spokespeople were featured on a wide range of media outlets including television (BBC, BBC Persia).

Website

One of the External relations committee members has offered their assistance (in their capacity of being a GP) in the content for the proposed Primary Care page embedded within the BHIVA website

Statements

Continues promotion of guidelines and position statements issued by BHIVA

Social Media

The ER continues to manage BHIVAs social media accounts, which include X, Facebook, Instagram and LinkedIn, as well as the HIV Medicine journal X account. There continues to be growth in followers on all platforms and continues to be an effective method for dissemination of information, and communication with members and external organisations.

We have a BHIVA Canva account to aid the creation of visual content for our social media messaging.

Succession planning ongoing for BHIVA tweeters – successfully filled posts for present tweeter roles.

Forward Look – 2025 and onwards

Succession planning – key members stepped down from roles –Vacancy remains for BHIVA ER Vice Chair.

Successful handover of HIV Medicine social media accounts following the stepping down of the previous tweeter.

Plans to analyse appropriate use of resources to our social media platforms (i.e. do we need to divert resource away from the X account in view of anecdotal declines in followers, and the movement of people to other social media platforms).

We continue to explore avenues to expand the reach of BHIVAs messaging beyond the existing audience.

BHIVA Guidelines Sub-committee Report

Dr Stuart Flanagan, Chair
Guidelines Sub-Committee

BHIVA produces guidelines on a comprehensive range of topics to support clinicians in managing HIV and its complications, as well as working with other organisations to produce co-badged guidelines on HIV prevention, testing and other areas. In a rapidly changing area of health, we provide rapid guideline updates as needed.

Dr Stuart Flanagan took on the chair role in autumn 2023, after Dr Clare van Halsema completed a 3-year term. Dr Angela Bailey continued as vice chair and Dr Cathy Nieman Sims continues her permanent role as guidelines coordinator.

The guidelines subcommittee has continued to meet virtually since the COVID pandemic, with plans to meet in person at the annual BHIVA cᵒnference in Spring 2025.

Guideline development

The management of HIV in pregnancy guidelines underwent a complete revision and update and were circulated for public consultation in 2024. They are due to be published on the BHIVA website in 2025. This complete revision included new sections on HIV screening, prevention, and pre-conception advice, and a more detailed, standalone section on infant feeding. The guidelines emphasise managing care through a multidisciplinary team, offering peer support, and conducting regular mental health assessments. They also highlight new considerations for managing HIV in pregnancy and the postpartum period.

Newly updated chapters of the opportunistic infections guideline (which is being updated chapter by chapter) were published in 2024, on the clinical management of opportunistic infections in pregnancy, pulmonary OIs and non-tuberculosis mycobacteria.

The full guidance on antiretroviral therapy from 2022 was updated in 2023 (on cardiovascular risk) and will have a further update in 2025 to reflect latest evidence for two drug regimens.

Abridged versions of guidelines are published on the BHIVA guidelines app.

Rapid Guidance

A Rapid guidance update on statins for people living with HIV, was published in early 2024 following the outcomes of the REPRIEVE study in 2023 and feedback from cariologists after the first update in late 2023.

Rapid guidance on opt-out consent for HIV testing, as currently used in Emergency Department testing in extremely high prevalence areas, was published in February 2024. The writing group included representatives from BHIVA, BASHH, BIA and RCEM. This will be replaced by the interim update of the testing guidelines when published.

Rapid guidance usually does not undergo consultation, but feedback is invited using a form alongside the guidance on the BHIVA website. However, we did invite consultation on the rapid guidance on opt-out testing, in view of the importance, lack of published evidence and range of opinions.

Position statements

A position statement on measles in people living with HIV, was published in January 2024 on the BHIVA website. This was prompted by a recent increase in measles cases in England. This will be replaced by the immunisation guidelines when they are published in 2025.

NICE accreditation

We held NICE accreditation for our guideline process until December 2023. NICE has now reviewed its accreditation process and terminated it as of July 2024. We continue to adhere to the principles of excellence in evidence-based, unbiased guideline production as set out in the guideline development manual.

2025 plans and actions so far

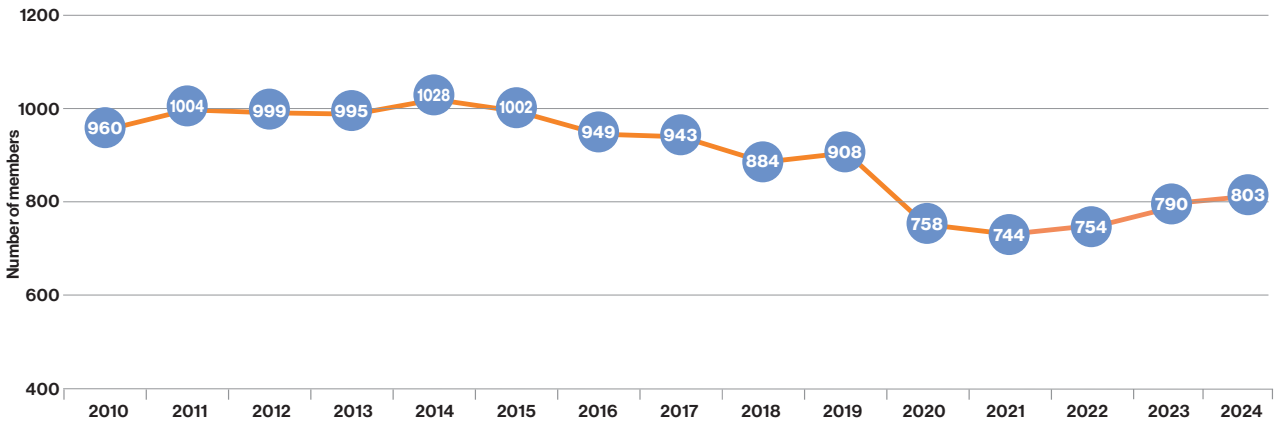
The pregnancy guidelines were being finalised and out to public consultation in 2024 with aim for publication in 2025 (which was achieved in June 2025).

Work is ongoing on full guideline updates on viral hepatitis, immunisation, monitoring and tuberculosis, with aim for publication in 2025. Work continues on a new BHIVA guidelines for people who are not in care. The testing guidelines are being reviewed for an interim update.

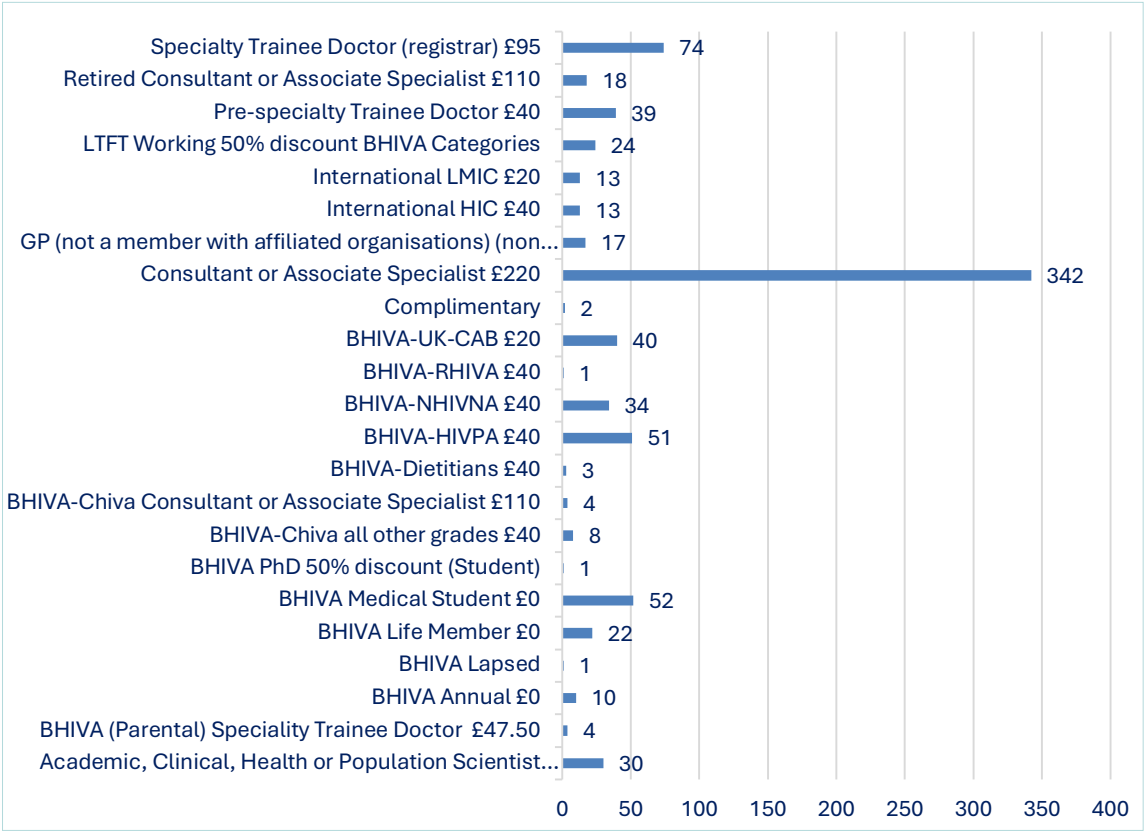
With members of the guideline subcommittee including community representatives, trainee member and members responsible for the app, linkage with the education group for modules, we continue to produce guidance that is of great value to the HIV community.

BHIVA membership annual report to 31 October 2024

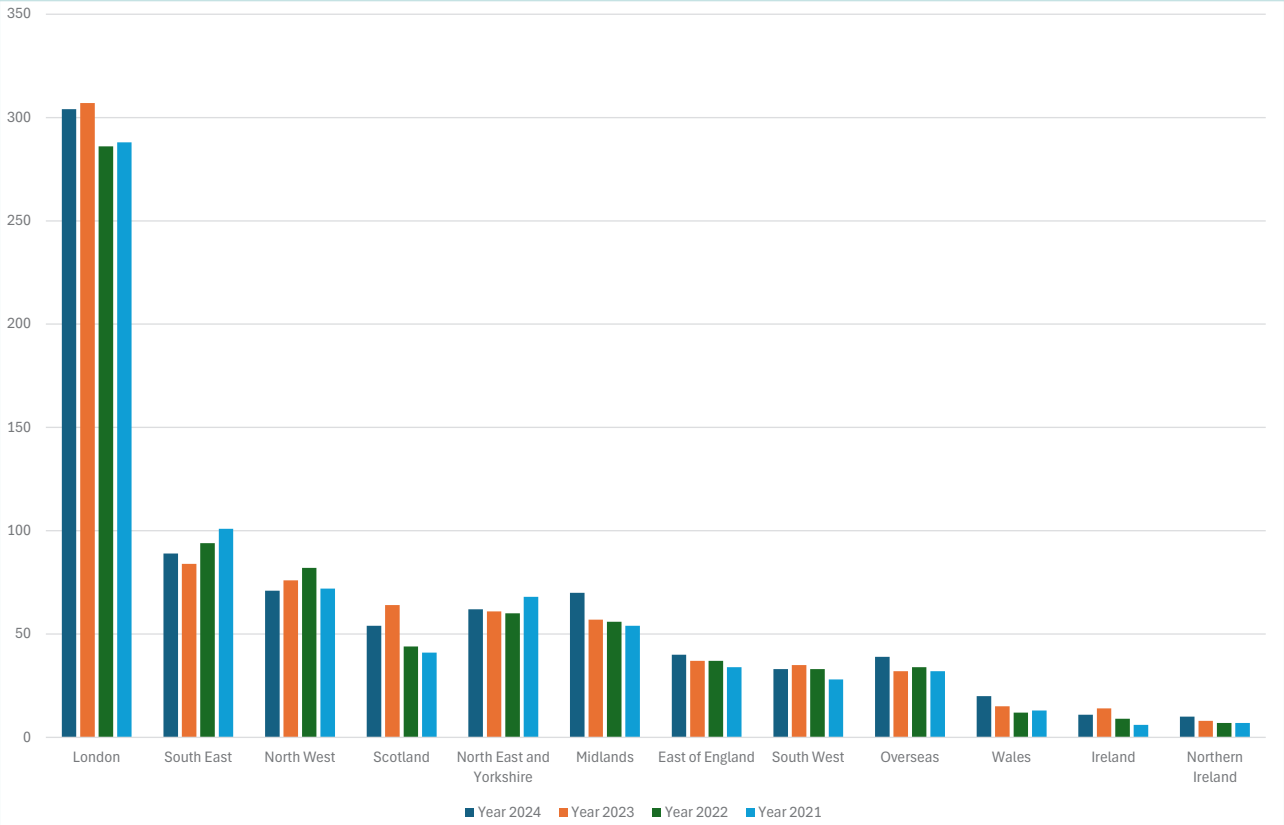
Total number of members from year 2010 to 2024



Membership to 31 October 2024 by category



Membership years 2021 to 2024 by region



Structure, governance and management

BHIVA is a Charitable Incorporated Organisation (as of 12 December 2016) governed by its Constitution and registered as a charity with the Charity Commission.

BHIVA is a membership association currently governed by a Board of 18 elected trustees who make up the Executive Committee including four officer posts of Chair, Vice Chair, Honorary Secretary and Honorary Treasurer.

BHIVA endeavours to ensure that the specialty is well represented on the Executive Committee to ensure that local challenges and issues that affect all those working within the field are addressed UK wide. Trustees are drawn from across the HIV sector and include clinicians and other healthcare professionals, academics, a representative from the UK-CAB as well as a trainee Doctors' representative and a new Consultant Doctors' representative.

The methods adopted for the recruitment and appointment of new trustees are as follows:

- A list of nominees is forwarded to all eligible members of the association with a request for their selections to fill the vacancies
- The election scrutineer will normally be the immediate past chair of the association or another person nominated by the Executive Committee
- The results of the election are declared at the Annual General Meeting.

Nominees are required to complete a trustee declaration form, a conflict-of-interest form and a skills assessment form at time of nomination. All members of the Executive Committee give their time voluntarily and receive no paid benefits from the charity.
On joining the BHIVA Executive Committee, trustees are provided with an induction pack that includes an outline of the role and expectations, a copy of the constitution, relevant policy and administration documents required to carry out the role as well as Charity Commission information about the responsibilities of becoming a charity trustee. Each new trustee also undertakes a tailored induction programme and is offered mentoring support from existing trustees.

Beyond their governance duties, trustees are expected to take an active role in the work of the charity according to their expertise through engagement with at least one of the five specialist sub-committees. Each sub-committee manages the activities of the charity and is led by a chair and vicechair. Under the sub-committees also sit a variety of specialist working and writing groups, led by an elected or appointed BHIVA member, who has specific responsibilities and bring a depth of knowledge and expertise to the sub-committees.

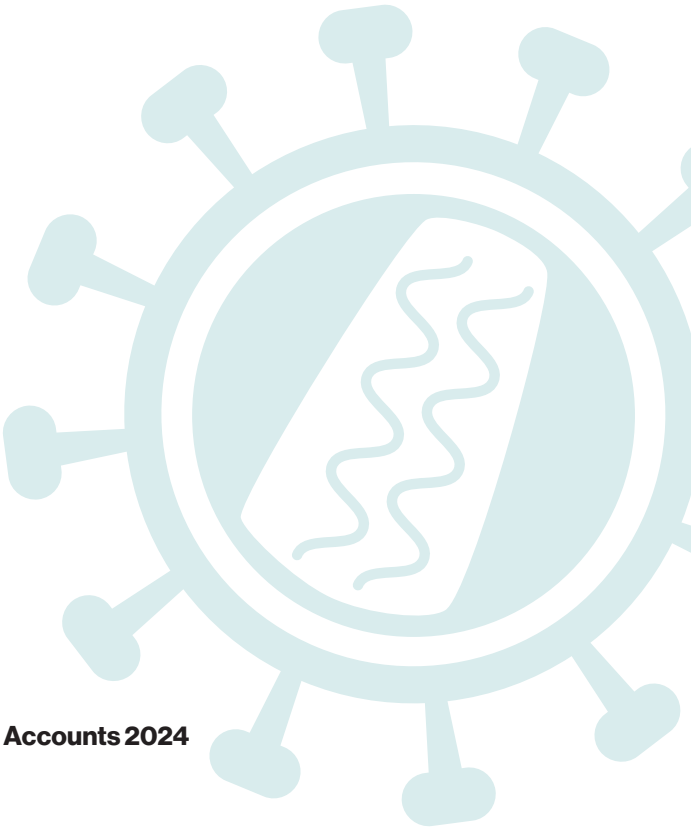
The trustees hold quarterly Executive Committee meetings to review the activities of the charity and consider its plans.

To retain its position at the forefront of HIV care, BHIVA is also affiliated with all the other key charities and associations who work within the field including:

- Chiva
- British Dietetic Association HIV Care Specialist Group (BDA)
- HIV Pharmacy Association (HIVPA)
- National HIV Nurses Association (NHIVNA)
- HIV Trainee Association (HIVTA)
- Rehabilitation in HIV Association (RHIVA)
- Society of Sexual Health Advisers (SSHA)
- UK Community Advisory Board (UK-CAB)

BHIVA has developed important links with other organisations, encouraging exchange of information between national and international centres including:

- British Psychological Society (BPS)
- Federation of Infection Societies (FIS)
- International AIDS Society (IAS)
- European AIDS Clinical Society (EACS)
- Medical Research Council (MRC)
- National AIDS Trust (NAT)
- Terrence Higgins Trust (THT)
- University of Liverpool Drug Interaction website.
- HIV Glasgow Conference



Financial review

Both income and expenditure related to charitable activities rose in 2024. A significant contribution to expenditure related to the project management, development, and delivery of the new BHIVA website. This contributed to most of the imbalance between expenditure and income, with a withdrawal of £100,000 from the investment fund required in order to meet payments for the website, while continuing to deliver BHIVA's core activities, such as the planning of conferences. Membership fees, conference registration fees, and pharmaceutical companies' contribution to conference income, as well as sponsorship fees, remain important sources of income. HIV medicine also generates significant income, though this is declining somewhat – this has been offset by a move to online only access to the journal, reducing costs.

Inflation has contributed significantly to increased expenditure, as, for example, conference venue hire costs increase. The BHIVA executive has taken steps to scrutinise and reduce administrative and other costs, while carefully reviewing other expenditure. An expenditure approval process for sub-committees has also been implemented. Careful attention has also been given to choice of venue for conference events, as well as to fees charged for both membership and conference registration, while still delivering excellent educational opportunities.

The intention of the Executive committee is to secure a position where core costs are balanced with core income, while additional income, e.g. from the investment fund can be used to make discretionary awards. Moving forwards, budget setting and monitoring financial performance are lead topics on the agenda for BHIVA. While this close focus is warranted, there is no doubt that the charity will be able to deliver its objectives. The reserves policy continues to be that the charity should hold sufficient funds to continue 18 months of charitable activities. The majority of the reserves are held in the investment portfolio.

Statement of Directors' and Trustees' responsibilities

The trustees are responsible for preparing a trustees' annual report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales requires the charity trustees to prepare financial statements for each year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, of the charity for that period. In preparing the financial statements, the trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- Observe the methods and principles in the applicable Charities SORP;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures that must be 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 in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the applicable Charities (Accounts and Reports) Regulations, and the provisions of the Trust deed. They are also responsible for safeguarding the assets of the charity and taking reasonable steps for the prevention and detection of fraud and other irregularities.

The trustees are responsible for the maintenance and integrity of the charity and financial information included on the charity's website in accordance with legislation in the United Kingdom governing the preparation and dissemination of financial statements.

Trustee declaration

I declare that:

- I am over age 18.
- I am not an undischarged bankrupt.
- I have not previously been removed from trusteeship of a charity by a Court or the Charity Commission.
- I am not under a disqualification order under the Company Directors' Disqualification Act 1986.
- I am, in the light of the above, not disqualified by the Charities Act 1993 (section 72) from acting as a charity trustee.
- I undertake to fulfil my responsibilities and duties as a trustee of the British HIV Association (BHIVA) in good faith and in accordance with the law and within the objects of BHIVA.

I do not have any financial interests in conflict with those of BHIVA (either in person or through family or business connections) except those that I have formally notified in a declaration of interest statement. I will specifically notify any such interest at any meeting where trustees are required to make a decision, which affects my personal interests, and I will absent myself entirely from any decision on the matter and not vote on it.

Approved by the Board of Trustees

Professor Yvonne Gilleece
Chair, British HIV Association (BHIVA)

1st Dec 2025

Annual report and unaudited financial statements for the year ended 31 December 2024

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Legal and administrative information

Trustees
Professor Y Gilleece
Dr T Barber
Dr D Clutterbuck
Dr L N Siriwardena
Dr H Pintilie
Ms N Naous
Dr C Emerson
Dr K Childs
Mr JR Jaquiss
Dr N Mackie
Dr D Chadwick
Professor C Sabin
Dr I Reeves
Dr J Underwood

Charity number
1170707

Principal address
BHIVA Secretariat, Spirella Building, Bridge Road , Letchworth Garden City, Herts SG6 4ET

Independent examiner
TC Group
Suite 501
The Nexus Building
Broadway
Letchworth Garden City
Herts
SG6 3TA

Bankers
National Westminster Bank plc, 190 The Broadway, Muswell Hill, London N10 3SO
Santander Bank, Bootle, Merseyside L30 4GB

Solicitors
Stone King LLP, Boundary House, 91 Charterhouse Street London EC1M 6HR

Independent examiner's report to the Trustees of British HIV Association

I report to the trustees on my examination of the financial statements of British HIV Association (the charity) for the year ended 31 December 2024.

Responsibilities and basis of report

As the trustees of the charity (and also its directors for the purposes of company law), you are responsible for the preparation of the financial statements in accordance with the requirements of the Companies Act 2006.

Having satisfied myself that the financial statements of the charity are not required to be audited under Part 16 of the Companies Act 2006 and are eligible for independent examination, I report in respect of my examination of the charity's financial statements carried out under section 145 of the Charities Act 2011. In carrying out my examination I have followed the Directions given by the Charity Commission under section 145(5)(b) of the Charities Act 2011.

Independent examiner's statement

Since the charity's gross income exceeded £250,000, the independent examiner must be a member of a body listed in section 145 of the Charities Act 2011. I confirm that I am qualified to undertake the examination because I am a member of the Institute of Chartered Accountants in England and Wales, which is one of the listed bodies.

I have completed my examination. I confirm that no matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1 accounting records were not kept in respect of the charity as required by section 386 of the Companies Act 2006.
2 the financial statements do not accord with those records; or
3 the financial statements do not comply with the accounting requirements of section 396 of the Companies Act 2006 other than any requirement that the financial statements give a true and fair view, which is not a matter considered as part of an independent examination; or
4 the financial statements have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102).

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the financial statements to be reached.

Alison Price FCA
Suite 501
The Nexus Building
Broadway
Letchworth Garden City
Herts
SG6 3TA

Dated: .....

Consolidated statement of financial activities including income and expenditure account for the year ended 31 December 2024

	Notes	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £
Income from:							
Donations and legacies	**2**	20,000	56,956	76,956	30,025	-	30,025
Charitable activities	**3**	817,927	-	817,927	777,793	-	777,793
Investments	**4**	35,762	-	35,762	31,442	-	31,442
Total income		873,689	56,956	930,645	839,260	-	839,260
Expenditure on:							
Charitable activities	**5**	1,077,938	44,452	1,122,390	998,133	5,554	1,003,687
Total expenditure		1,077,938	44,452	1,122,390	998,133	5,554	1,003,687
Net gains/(losses) on investments	**9**	120,589	-	120,589	146,412	-	146,412
Net income/(expenditure) and movement in funds		(83,660)	12,504	(71,156)	(12,461)	(5,554)	(18,015)
Reconciliation of funds:							
Fund balances at 1 January 2024		1,881,557	116,438	1,997,995	1,894,018	121,992	2,016,010
Fund balances at 31 December 2024		1,797,897	128,942	1,926,839	1,881,557	116,438	1,997,995

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

CIO statement of financial activities including income and expenditure account for the year ended 31 December 2024

	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £
Income from:						
Donations and legacies	20,000	56,956	76,956	30,025	-	30,025
Charitable activities	817,927	-	817,927	777,793	-	777,793
Investments	35,735	-	35,735	31,422	-	31,422
Total income	873,662	56,956	930,618	839,240	-	839,240
Expenditure on:						
Charitable activities	1,080,886	44,452	1,125,338	993,431	5,554	998,985
Total expenditure	1,080,886	44,452	1,125,338	993,431	5,554	998,985
Net gains/(losses) on investments	120,589	-	120,589	146,412	-	146,412
Net income/(expenditure) and movement in funds	(86,635)	12,504	(74,131)	(7,779)	(5,554)	(13,333)
Reconciliation of funds:						
Fund balances at 1 January 2024	1,952,860	116,438	2,069,298	1,960,639	121,992	2,082,631
Fund balances at 31 December 2024	1,866,225	128,942	1,995,167	1,952,860	116,438	2,069,298

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

The notes on pages 7 to 18 form part of these financial statements.

Consolidated balance sheet as at 31 December 2024

	Notes	2024 £	2024 £	2023 £	2023 £
Fixed assets					
Intangible assets	**11**		82,000		-
Investments	**12**		1,638,392		1,621,712
			1,720,392		1,621,712
Current assets					
Debtors	**14**	218,629		380,432	
Cash at bank and in hand		279,826		459,381	
		498,455		839,813	
Creditors: amounts falling due within one year	**15**	(292,008)		(463,530)	
Net current assets			206,447		376,283
Total assets less current liabilities			1,926,839		1,997,995
Net assets excluding pension liability			1,926,839		1,997,995
The funds of the charity					
Restricted income funds	**17**		128,942		116,438
Unrestricted funds			1,797,897		1,881,557
			1,926,839		1,997,995

The notes on pages 7 to 18 form part of these financial statements.

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 December 2024.

The directors acknowledge their responsibilities for complying with the requirements of the Companies Act 2006 with respect to accounting records and the preparation of financial statements.

The members have not required the company to obtain an audit of its financial statements for the year in question in accordance with section 476.

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The financial statements were approved by the trustees on .....

.....
Dr I Reeves
Trustee

Company registration number (England and Wales)

CIO balance sheet as at 31 December 2024

	Notes	2024 £	2024 £	2023 £	2023 £
Fixed assets					
Intangible assets	**11**		82,000		-
Investments	**12**		1,638,392		1,621,712
			1,720,392		1,621,712
Current assets					
Debtors	**14**	286,757		470,332	
Cash at bank and in hand		279,826		423,026	
		566,583		893,358	
Creditors: amounts falling due within one year	**15**	(291,808)		(445,772)	
Net current assets			274,775		447,586
Total assets less current liabilities			1,995,167		2,069,298
Net assets excluding pension liability			1,995,167		2,069,298
The funds of the charity					
Restricted income funds	**17**		128,942		116,438
Unrestricted funds			1,866,225		1,952,860
			1,995,167		2,069,298

The notes on pages 35 - 46 form part of these financial statements.

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 December 2024.

The directors acknowledge their responsibilities for complying with the requirements of the Companies Act 2006 with respect to accounting records and the preparation of financial statements.

The members have not required the company to obtain an audit of its financial statements for the year in question in accordance with section 476.

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The financial statements were approved by the trustees on .....

.....
Dr I Reeves
Trustee

Company registration number (England and Wales)

Consolidated statement of cash flows for the year ended 31 December 2024

	Notes	2024 £	2024 £	2023 £	2023 £
Cash flows from operating activities					
Cash absorbed by operations	**22**		(237,226)		(147,009)
Investing activities					
Purchase of intangible assets		(82,000)		-	
Purchase of investments		(180,142)		(246,284)	
Proceeds from disposal of investments		284,051		280,286	
Investment income received		35,762		31,442	
Net cash generated from investing activities			57,671		65,444
Net cash used in financing activities			-		-
Net decrease in cash and cash equivalents			(179,555)		(81,565)
Cash and cash equivalents at beginning of year			459,381		540,946
Cash and cash equivalents at end of year			279,826		459,381

The notes on pages 7 to 18 form part of these financial statements.

Notes to the financial statements for the year ended 31 December 2024

1.1 Accounting convention

The financial statements have been prepared in accordance with the charity's governing document, the Companies Act 2006, FRS 102 “The Financial Reporting Standard applicable in the UK and Republic of Ireland” (“FRS 102”) and the Charities SORP "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). The charity is a Public Benefit Entity as defined by FRS 102.

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 £.

The financial statements have been prepared under the historical cost basis except for the modification to a fair value basis for certain financial instruments as specified in the accounting policies.

Basis of consolidation

The results of BHIVA Trading Ltd have been consolidated on a line by line basis.

1.2 Going concern

In light of the cost of living crisis, the trustees hove assessed whether the use of going concern is appropriate and have considered possible events or conditions that might cast significant doubt on the ability of the charitable company to continue as a going concern. The trustees have made this assessment for a period of at least one year from the date of the approval of these financial statements. In particular, the trustees have considered the charitable company's forecasts and projections and hove token account of pressures on fee income. After making enquiries, the trustees hove concluded that there is a reasonable expectation that the charitable company has adequate resources to continue in operational existence for the foreseeable future. The charitable company therefore continues to adopt the going concern basis in preparing its financial statements.

1.3 Fund accounting

Unrestricted funds are available for use at the discretion of the trustees in furtherance of their charitable objectives.

Designated funds are reserves which have been earmarked for particular uses by the trustees.

Restricted funds are subject to specific conditions by donors or grantors as to how they may be used. The purposes and uses of the restricted funds are set out in the notes to the financial statements.

1.4 Income

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

In pursuit of its charitable objectives, the Charity organises and hosts conferences, for which registration fees, sponsorship income, exhibition stand income and other sundry income is received, Where this income is received in advance of the given conference taking place, it is treated as deferred income and included within creditors in the accounts. The income is released once the conference has taken place.

Income from membership subscriptions is recognised in line with the period to which it relates.

Income from grants and donations are recognised when the Charity has been notified in writing of both the amount and settlement dole. In the event thot a grant or donation is subject to conditions that require a level of performance before the Charity is entitled to the funds, the income is deferred and not recognised until those conditions are fully met, or the fulfilment of those conditions is wholly within the control of the Charity and its probable that those conditions will be fulfilled in the reporting period.

Notes to the financial statements (continued) for the year ended 31 December 2024

1 Accounting policies **(Continued)**

1.5 Expenditure

Expenditure is accounted for on an accruals basis. Overheads and other costs not directly attributable to particular projects are apportioned to the relevant funds based on management estimates of the amount attributable to that activity in the year, either by reference to staff, time or space occupied, as appropriate.

Costs relating to a particular activity are allocated directly and others are apportioned on an appropriate staff basis. All costs are allocated between the expenditure categories of the Statement of Financial Activities on a basis designated to reflect the use of the resources.

1.6 Intangible fixed assets other than goodwill

Intangible assets acquired separately from a business are recognised at cost and are subsequently measured at cost less accumulated amortisation and accumulated impairment losses.

Intangible assets acquired on business combinations are recognised separately from goodwill at the acquisition date where it is probable that the expected future economic benefits that are attributable to the asset will flow to the entity and the fair value of the asset can be measured reliably; the intangible asset arises from contractual or other legal rights; and the intangible asset is separable from the entity.

Amortisation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Website development	5 years straight line (£nil in year of acquisition)

1.7 Tangible fixed assets

Tangible fixed assets are initially measured at cost and subsequently measured at cost or valuation, net of depreciation and any impairment losses.

Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Computers	3 years straight line

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in the statement of financial activities.

1.8 Fixed asset investments

Fixed asset investments are initially measured at transaction price excluding transaction costs, and are subsequently measured at fair value at each reporting date. Changes in fair value are recognised in net income/(expenditure) for the year. Transaction costs are expensed as incurred.

Interests in subsidiaries are initially measured at cost and subsequently measured at cost less any accumulated impairment losses. The investments are assessed for impairment at each reporting date and any impairment losses or reversals are recognised immediately in profit or loss.

A subsidiary is an entity by the charitable company. Control is the power to govern the financial and operating policies of the entity so as to obtain benefits from its activities.

1.9 Impairment of fixed assets

At each reporting end date, the charity reviews the carrying amounts of its tangible and intangible assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any).

Notes to the financial statements (continued) for the year ended 31 December 2024

1 Accounting policies **(Continued)**

1.10 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

1.11 Financial instruments

The charity has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the charity's balance sheet when the charity becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

Basic financial assets

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price including transaction costs and are subsequently carried at amortised cost using the effective interest method unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts discounted at a market rate of interest. Financial assets classified as receivable within one year are not amortised.

Basic financial liabilities

Basic financial liabilities are initially measured at transaction price.

Derecognition of financial liabilities

Financial liabilities are derecognised when the charity's contractual obligations expire or are discharged or cancelled.

1.12 Taxation

The Charity is considered to pass the tests set out in Paragraph 1 Schedule of 6 of the Finance Act 2010 and therefore it meets the definition of a charitable company for UK corporation tax purposes. Accordingly, the Charity is potentially exempt from taxation in respect of income or capital gains received within categories covered by Chapter 3 Part 11 of the Corporation Tax Act 2010 or Section 256.

The trading subsidiary is not exempt for corporation tax purposes. The tax currently payable is based on the taxable profit for the year. Taxable profit differs from net profit in the profit or loss account because it excludes items of income or expense that are taxable or deductible in other years and it further excludes items that are never taxable or deductible. The company's liability for current tax is calculated using tax rates that have been enacted or substantively enacted by the reporting end date.

1.13 Significant judgements and estimates

No items in these financial statements include significant judgements and estimates that management has made in the process of applying these accounting policies or that have a significant risk of causing material adjustment to the book value of assets and liabilities within the next financial year.

Notes to the financial statements (continued) for the year ended 31 December 2024

2 Income from donations and legacies

	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £
Donations	-	-	-	25	-	25
Grants	20,000	56,956	76,956	30,000	-	30,000
	20,000	56,956	76,956	30,025	-	30,025

3 Income from charitable activities

	Unrestricted 2024 £	Unrestricted 2023 £
Membership Subscriptions	98,886	103,137
Major Sponsorship Fees	66,600	66,000
HIV medicine royalty & DAIG subscription	167,293	173,666
Conference income	482,248	433,990
Other conference income	-	500
Miscellaneous income	2,900	500
	817,927	777,793
Analysis by fund		
Unrestricted funds	817,927	777,793

4 Income from investments

	Unrestricted funds 2024 £	Unrestricted funds 2023 £
Income from listed investments	31,966	23,635
Interest receivable	3,796	7,807
	35,762	31,442

Notes to the financial statements (continued) for the year ended 31 December 2024

5 Expenditure on charitable activities

	Total Funds 2024 £	Grants 2024 £	Total 2024 £	Total Funds 2023 £
Direct costs				
Subsides to affiliated associations and donations	4,919	-	4,919	10,000
Research awards	29,173	-	29,173	20,352
Conferences, courses and events	453,172	-	453,172	503,562
National clinical audit	19,600	-	19,600	28,780
HIV medicine, guidelines and educational tools	99,793	-	99,793	52,638
Website and app development and maintenance	59,655	-	59,655	38,223
	666,312	-	666,312	653,555
Grant funding of activities (see note 6)	-	58,640	58,640	-
Share of support and governance costs (see note 7)				
Support	397,438	-	397,438	350,132
	1,063,750	58,640	1,122,390	1,003,687
Analysis by fund				
Unrestricted funds	1,061,254	16,684	1,077,938	998,133
Restricted funds	2,496	41,956	44,452	5,554
	1,063,750	58,640	1,122,390	1,003,687

6 Grants payable

	Grants 2024 £
Grants to institutions:	
Implementation Science Funding	16,684
International CROI and Best of CROI	41,956
	58,640

Notes to the financial statements (continued) for the year ended 31 December 2024

7 Analysis of support costs

	Total 2024 £	Total 2023 £
Secretariat fees	222,174	214,144
Establishment, commitee and communications	66,510	64,781
Accountancy and bookkeeping fees	20,639	9,160
Auditors remuneration	-	9,400
Legal and professional fees	51,317	42,079
Bank and currency charges	5,007	3,713
Irrecoverable VAT	31,791	6,823
Depreciation	-	32
	397,438	350,132

8 Key management personnel

The CIO considers its key management personnel to be the Trustees. The Trustees give their time and expertise without any form of remuneration or other benefit in kind as noted below.

During the year, trustees received reimbursed expenses or had expenses paid directly to a third party on their behalf totalling £2,217 (2023: £11,460).

The CIO has no employees and therefore, no employee received emoluments over £60,000 per annum.

9 Gains and losses on investments

Gains/(losses) arising on:	Unrestricted funds 2024 £	Unrestricted funds 2023 £
Revaluation of investments	129,894	131,631
Sale of investments	(9,305)	14,781
	120,589	146,412

10 Taxation

The charity is exempt from taxation on its activities because all its income is applied for charitable purposes. The trading subsidiary is not exempt for corporation tax purposes.

Notes to the financial statements (continued) for the year ended 31 December 2024

11 Intangible fixed assets

	Website development £
Cost	
At 1 January 2024	-
Additions - separately acquired	82,000
At 31 December 2024	82,000
Amortisation and impairment	
At 1 January 2024 and 31 December 2024	-
Carrying amount	
At 31 December 2024	82,000
At 31 December 2023	-

Notes to the financial statements (continued) for the year ended 31 December 2024

12 Fixed asset investments

	Listed investments £
Cost or valuation	
At 1 January 2024	1,621,712
Additions	180,142
Valuation changes	120,589
Disposals	(284,051)
At 31 December 2024	1,638,392
Carrying amount	
At 31 December 2024	1,638,392
At 31 December 2023	1,621,712

All investments are carried at their fair value. Investment in equities and fixed interest securities are all traded in quoted public markets, primarily in the London Stock Exchange. Holdings in common investment funds, unit trusts and open-ended investment companies are at the bid price. Asset sales and purchases are recognised at the date of trade at cost (that is their transaction value).

The trustees delegate the management of their investments to Rathbones. The charity is operating an investment policy that provides a degree of diversification of holdings within different shares and unit trust investments. The charity has invested in a range of holdings in order to protect against exposure to volatility in the market to reduce risk and preserve capital.

The charity does not make use of derivatives and similar complex financial instruments at it takes the view that investments are held for their longer term growth and annual income.
The charity has no material investment holdings in markets subject to exchange controls or trading restrictions.

The total net gains on investments as per the Statement of Financial Activities comprises realised gains of (£9,305) and unrealised revaluation gains of £129,894.

13 Subsidiaries

BHIVA Trading Limited is a private company limited by shares which was incorporated in England and Wales on 9 December 2019. It is 100% owned and controlled by the British HIV Association.

Name of undertaking	Registered office	Company number	Class of shares held	Holding
BHIVA Trading Ltd	The Spirella Building, Bridge Road, Letchworth, Herts, SG6 4ET	12353562	Ordinary	100%

Notes to the financial statements (continued) for the year ended 31 December 2024

13 Subsidiaries **(Continued)**

The aggregate capital and reserves and the result for the year of subsidiaries was as follows:

Name of undertaking	Profit/(Loss)	Capital and Reserves
	£	£
BHIVA Trading Ltd	2,975	(68,324)

14 Debtors

	Group 2024	Group 2023	CIO 2024	CIO 2023
Amounts falling due within one year:	£	£	£	£
Trade debtors	26,838	211,198	26,838	211,198
Amounts owed by subsidiary undertakings	-	-	68,151	89,167
Other debtors	114,909	57,230	114,886	57,963
Prepayments and accrued income	76,882	112,004	76,882	112,004
	218,629	380,432	286,757	470,332

15 Creditors: amounts falling due within one year

	Group 2024	Group 2023	CIO 2024	CIO 2023
	£	£	£	£
Corporation tax payable	-	3,148	-	-
Deferred income	1,523	185,631	1,523	185,631
Trade creditors	258,275	235,192	258,275	235,192
Other creditors	-	17,210	-	2,600
Accruals	32,210	22,349	32,010	22,349
	292,008	463,530	291,808	445,772

16 Deferred income

	Group 2024	Group 2023	CIO 2024	CIO 2023
	£	£	£	£
Deferred income is included within:				
Current liabilities	1,523	185,631	1,523	185,631
Movements in the year:				
Deferred income at 1 January 2024	185,631	30,320	185,631	30,320
Released from previous periods	(185,631)	(30,320)	(185,631)	(30,320)
Resources deferred in the year	1,523	185,631	1,523	185,631
Deferred income at 31 December 2024	1,523	185,631	1,523	185,631

Notes to the financial statements (continued) for the year ended 31 December 2024

17 Restricted funds

The restricted funds of the charity comprise the unexpended balances of donations and grants held on trust subject to specific conditions by donors as to how they may be used.

	At 1 January 2024	Incoming resources	Resources expended	At 31 December 2024
	£	£	£	£
Website development fund	1,080	-	(1,080)	-
Gilead podcasts fund	23,963	-	-	23,963
Gilead Pakistan fund	3,190	-	-	3,190
Gilead - ViiV Implementation	88,205	-	(1,416)	86,789
Gilead Exchange grant	-	15,000	-	15,000
ViiV Healthcare - CROI 2024	-	41,956	(41,956)	-
	116,438	56,956	(44,452)	128,942

Previous year:	At 1 January 2023	Incoming resources	Resources expended	At 31 December 2023
	£	£	£	£
Website development fund	2,980	-	(1,900)	1,080
Gilead podcasts fund	27,617	-	(3,654)	23,963
Gilead Pakistan fund	3,190	-	-	3,190
Gilead - ViiV Implementation	88,205	-	-	88,205
	121,992	-	(5,554)	116,438

The income and expenditure of the trading subsidiary, BHIVA Trading Limited, is presented separately above. These results are consolidated into the overall consolidated financial statements on a line by line basis.

Research awards fund
Originally launched in 2016, the BHIVA research awards are intended to provide funding for research projects that will improve the clinical care and management of people living with HIV in the UK.

Website development fund
This fund represents funding received specifically for the development of the BHIVA website. Unspent funds have been carried forward to be utilised in subsequent years.

Gilead podcasts fund
This fund represents funding received specifically for the production of BHIVA podcasts. These podcasts will take place in 2020-21. Accordingly, the unspent funds have been carried forward at the balance sheet date.

Gilead Pakistan Fund
Gilead Sciences Inc. has partnered with 12 leading companies in Pakistan as part the Corporate Coalition for Viral Hepatitis Elimination in Pakistan (CCVHEP) program to support the Government of Pakistan's effort to eliminate viral hepatitis in Pakistan by 2030. This funding was specifically used by the charity to cover the costs of 3 people to attend a conference and speak on behalf of BHIVA training with the Pakistan military.

Notes to the financial statements (continued) for the year ended 31 December 2024

17 Restricted funds **(Continued)**

Gilead - ViiV Implementation
Implementation research capacity amongst UK health care professionals engaged in HIV Research in order to improve the quality of HIV care in the UK.

Gilead Exchange grant
Exchange Fellowships aims to provide funding for up to three exchanges for BHIVA members and an international colleague that will foster links between BHIVA and institutions in lower middle-income countries.

ViiV Healthcare - CROI 2024
Scholarship awards to be made available to senior members of the BHIVA appointed CROI Working Party to attend the Conference on Retroviruses and Opportunistic Infections (CROI). The purpose of the Working Party would be to identify, evaluate and feedback on the key topics /latest research from CROI to healthcare professionals here in the UK. This would be done through a series of CROI Feedback Meetings which will take the format of interactive webinars.

18 Unrestricted funds

The unrestricted funds of the charity comprise the unexpended balances of donations and grants which are not subject to specific conditions by donors and grantors as to how they may be used. These include designated funds which have been set aside out of unrestricted funds by the trustees for specific purposes.

	At 1 January 2024	Incoming resources	Resources expended	Gains and losses	At 31 December 2024
	£	£	£	£	£
General funds	1,952,862	870,514	(1,077,738)	120,589	1,866,227
Trading subsidiary	(71,305)	3,175	(200)	-	(68,330)
	1,881,557	873,689	(1,077,938)	120,589	1,797,897

Previous year:	At 1 January 2023	Incoming resources	Resources expended	Gains and losses	At 31 December 2023
	£	£	£	£	£
General funds	1,960,641	839,240	(993,431)	146,412	1,952,862
Trading subsidiary	(66,623)	20	(4,702)	-	(71,305)
	1,894,018	839,260	(998,133)	146,412	1,881,557

Notes to the financial statements (continued) for the year ended 31 December 2024

19 Analysis of net assets between funds

	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £
At 31 December 2024:			
Intangible fixed assets	82,000	-	82,000
Investments	1,638,392	-	1,638,392
Current assets/(liabilities)	77,505	128,942	206,447
	1,797,897	128,942	1,926,839

	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £
At 31 December 2023:			
Investments	1,621,712	-	1,621,712
Current assets/(liabilities)	259,845	116,438	376,283
	1,881,557	116,438	1,997,995

20 Related party transactions

At the balance sheet date the company was owed £68,151 by BHIVA Trading Limited. This loan is interest free and repayable on demand.

21 Analysis of changes in net funds

The charity had no material debt during the year.

22 Cash generated from operations

	2024 £	2023 £
Net income/(expenditure) for the year	(71,156)	(18,015)
Adjustments for:		
Investment income recognised in statement of financial activities	(35,762)	(31,442)
Loss/(gain) on disposal of investments	9,305	(14,781)
Fair value gains and losses on investments	(129,894)	(131,631)
Depreciation of tangible fixed assets	-	32
Movements in working capital:		
Decrease/(increase) in debtors	161,803	(83,837)
(Decrease)/increase in creditors	(171,522)	132,665
Cash absorbed by operations	(237,226)	(147,009)

BHIVA
British HIV Association

www.bhiva.org

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BRITISH HIV ASSOCIATION

England & Wales - Charity number 1170707

Accounts

BHIVA
British HIV Association

2023 Trustees' Annual *Report & Accounts*

www.bhiva.org

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Charity information for the year ended *31 December 2023*

Trustees retiring on 24 November 2023

- Dr Becky Metcalfe, retired as New Consultant Doctors' Representative
- Dr Manik Kohli, retired as Trainee Doctors' Representative
- Dr Ashini Fox, retired as Trustee
- Dr Nick Larbalestier, retired as Trustee
- Ms Paula Bibby, retired as Financial Expert Trustee

Charity Trustees from 24 November 2023

Officers

- Professor Yvonne Gilleece, Chair appointed 20 January 2023
- Dr Nicola Mackie, Vice Chair, appointed 25 November 2022
- Dr Tristan Barber, Honorary Secretary, appointed 25 November 2022
- Dr Iain Reeves, Honorary Treasurer, appointed 22 November 2020

Elected Trustees

- Dr Kate Childs, appointed 19 April 2023
- Ms Nadia Naous, appointed 24 November 2023
- Dr Dan Clutterbuck, appointed 24 November 2023
- Dr David Chadwick (appointed 25 November 2022)
- Dr Carol Emerson, appointed 24 November 2023
- Dr Jonathan Underwood (appointed 25 November 2022)

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Specific Trustee Roles

- Dr Hannah Pintilie, New Consultant Doctors' Representative, appointed 24 November 2023
- Professor Caroline Sabin, Editor-in-Chief, *HIV Medicine*, appointed 25 November 2022
- Mr John Jaquiss, UK-CAB Community Representative, appointed as representative 25 November 2022
- Dr Nina Vora, Trainee Doctors' Representative, appointed 24 November 2023

Charity Number

- 1170707

Registered Office and Operational Address

- Spirella Building
  Bridge Road, Letchworth
  Hertfordshire, SG6 4ET

Independent Examiners

- UHY Hacker Young
  PO Box 501
  The Nexus Building, Broadway, Letchworth
  Hertfordshire, SG6 9BL

Bankers

- National Westminster Bank plc
  190 The Broadway, Muswell Hill
  London N10 3SD

About BHIVA

The British HIV Association, (BHIVA), is the leading UK association representing professionals in HIV. Since its inception in 1995, BHIVA has been committed to providing excellent care for people living with and affected by HIV.

BHIVA is a national advisory body on all aspects of HIV care and the association provides a national platform for HIV care issues. BHIVA representatives contribute to international, national and local committees dealing with HIV care. In addition, BHIVA promotes undergraduate, postgraduate and continuing medical education within HIV care.

The association aims to advance professional and public education in the subjects of HIV, including testing, treatment and prevention, and the management of HIV-related illnesses and treatment complications through the promotion of research, dissemination of and the production and promotion of evidence-based guidelines and standards.

Our objectives

BHIVA has four main objectives:

1. To relieve sickness and to protect and preserve health through the development and promotion of good practice in the testing and treatment of HIV and HIV-related illnesses:
2. To advance public and professional education on HIV through education and the promotion, conduct and dissemination of research
3. To promote optimal outcomes for people living with, and affected by, HIV through the development and dissemination of national guidelines and standards, audit and research
4. To support other organisations through activities including collaborative responses to consultations, media representation of HIV, workforce planning and, exceptionally, individual cases of stigma, discrimination or suboptimal care

Long term, continuing to promote best practice within the specialty, ensuring that the care provided for people living with HIV in the UK is world-leading is of primary concern. To achieve that aim, BHIVA must maintain its contribution to the continued growth of the specialty over the next decade by continuing to support training and research in the field of HIV medicine and helping to ensure that the existing excellent national standards of care are maintained.

Education is a primary focus and BHIVA is passionate about promoting and supporting the speciality to deliver undergraduate, postgraduate and continuing medical education within HIV care.

With work still to be done in educating the medical profession, scientific community public about HIV, through the promotion of research and dissemination of research results is central to the association's objectives. Promoting accurate messaging related to HIV and challenging decisions that discriminate against people living with, or affected by, HIV helps overcome outdated beliefs and challenge stigma.

Education is also key to the ongoing development of the speciality and the ability to develop a fully integrated educational programme for members and the wider HIV community is at the heart of the long-term strategy of the association. Promoting and disseminating the latest research through regional, national and international meetings and conferences and publications, and supporting an increasingly diverse range of research studies which aim to improve the health and lives of people living with HIV will help to achieve this.

By increasing the awareness of BHIVA at an international level, BHIVA endeavours to maintain a reputation for excellence education and research. The association's ability to support a range of stakeholders and organisations by providing expert clinical advice on HIV and its management further strengthens BHIVA's international presence.

Activities

BHIVA promotes excellence in HIV care through production of evidence-based, NICE-accredited guidelines. Our antiretroviral treatment guidelines form the basis of national prescribing policies across the UK and are widely read and referenced internationally. BHIVA represents the interests of people with HIV and input from the HIV clinical and research communities through feedback on national prescribing policies. Antiretrovirals moved under the remit of NICE for the first-time last year and BHIVA provided strong written feedback and verbal representation at the NICE Technology Appraisal for the first generation of injectable HIV treatment in 2021. BHIVA works closely with other professional and community organisations to advocate against discriminatory policies and ensure that the needs and priorities of people with HIV are at the heart of decisions that affect them.

BHIVA actively encourages the presentation of original UK research. Abstracts are invited for the annual spring conference, which aims to showcase the best contemporary research into HIV-related topics currently being undertaken in the UK. The annual conference attracts a broad spectrum of participants from experienced HIV specialists to those still in training, HIV researchers from a range of disciplines and community members. Eminent international speakers are invited to present the latest data.

BHIVA supports research in HIV care through its annual Research Awards Scheme. Originally launched in 2006, the programme operates through competitive application. Open to all BHIVA members applicants can submit applications for the funding of research projects that impact on the improvement of clinical care and management of people living with HIV in the UK. A minimum of £30,000 per annum is available, to be distributed amongst the successful applicants according to the quality of the submitted proposals. The awards panel is chaired by an independent chair.

Applications for grants or funding for research or other projects made directly to the association are reviewed by the BHIVA Executive Committee on a quarterly basis and considered based on merit and relevance to the objectives of BHIVA.

HIV Medicine is the official journal of the association and is published by Wiley. *HIV Medicine* is a peer-reviewed journal publishing original articles, reviews and guidelines on all aspects of HIV treatment and diagnosis.

BHIVA also undertakes a wide range of other activities to promote medical education in HIV care and support research. This includes conference feedback meetings, training courses for the Diploma in HIV Medicine examination, web-based e-learning modules as well as international scholarships and exchanges to forge links with international organisations to increase the understanding of the treatment and management of HIV.

A board of 18 trustees are responsible for the work of the association and its activities are carried out by five main sub-committees, all which report to the Executive Committee.
The sub-committees are:

- Audit and Standards
- Conferences
- Education and Scientific
- External Relations
- Guidelines

The Executive Committee review the work carried out by the sub-committees to ensure its activities are in line with the charity's objectives. All trustees sit on at least one sub-committees to facilitate this process and monitor progress.

BHIVA would be unable to flourish without the considerable commitment of time, energy, expertise and dedication by so many individual members of the committees, sub-committees, writing and working groups as well as the vital support through sponsorship from within the pharmaceutical industry.

Year in review

Throughout 2023, BHIVA has continued its commitment to supporting people living with and affected by HIV.

Following our Equity, Equality, Diversity and Inclusion (EEDI) review which was conducted by an independent expert group and presented at our BHIVA Spring meeting, we have established a new EEDI working group to implement the findings of the review and to advise BHIVA's Executive Committee on all guidelines, sub-committees and strategic plans.

We updated many of our guidelines including those on opportunistic infections and antiretroviral therapy, as well as some of our e-learning modules. In addition, we produced rapid guidance on the assessment and management of cardiovascular risk in people living with HIV in response to the REPRIEVE study – the first organisation globally to do this. All our guidelines remain available online on our website and in patient-friendly versions. We have begun a redesign of our website which remains a pillar of BHIVA's information sharing and are looking forward to sharing our upgraded website with a new layout, functionality and colour theme.

BHIVA continued to be a mainstream media commentator on matters relating to HIV, featuring on a wide range of media outlets, including radio and television. The People First Charter has been increasingly adopted by significant HIV organisations nationally and internationally such as Lancet HIV, EACS and HIV in Women's Workshop, moving to remove stigma through non blaming and appropriate use of language in the context of HIV.

BHIVA's conference schedule kicked off with ever-popular virtual CROI feedback sessions. We held our BHIVA Spring Conference 2023 in Gateshead – our first in-person conference since COVID, with excellent feedback. 2023 culminated with our globally themed Autumn Conference and World AIDS Day in Bishopsgate, London - a new venue for BHIVA and very popular with presenters, exhibitors and attendees alike.

Our audit programme is internationally renowned and this year we performed a national audit of engagement in care, the findings of which were presented at our Autumn Conference in November 2023. BHIVA also provided advice and support to the ECDC and EACS on the development of their first Standards of Care.

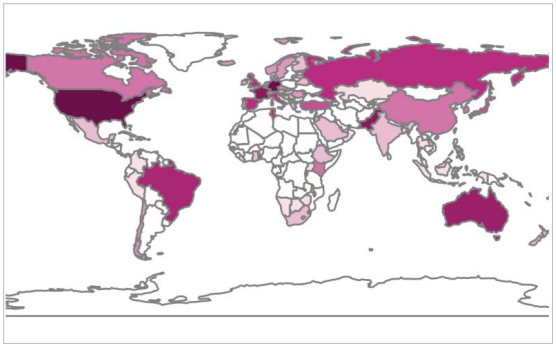
2023 was another busy year for the Education and Scientific sub-committee with the announcement of £70,158 to six successful applicants for our coveted BHIVA Research Awards.

All in all 2023 was a great year for BHIVA – well done everyone!

CIRCULATION

Global reach

In 2023, 7,284 institutions offered access to the latest content in your journal via a Wiley license or a traditional subscription. On this map, darker shading shows where circulation is highest. Countries/regions with no shading may be covered by philanthopic initiatives. In 2023, our philanthropic initiatives extended



Reach by region

This table shows the number of institutions, by region, with access to the latest content in your journal via either a Wiley license or a traditional subscription.

SALES MODEL	2021	2022	2023
Australia & NZ	462	463	463
Canada	88	91	95
China	112	114	149
Europe 3	3,240	3,058	3,046
Japan	178	192	**186**
Rest of World	2,052	2,104	2,151
UK	293	297	307
USA	747	836	887
Grand Total	**7,172**	**7,155**	**7,284**

Reach by access type

In 2023, 7,282 institutions offered access to your journal via a Wiley license, often through a consortium. Of these institutions, 1,738 had access via the 'All Journals license'. 3,297 institutions had access via 'Transformational agreements' which cover both subscription access and open access publishing. In addition, 2 institutions offered access via traditional (online or print) subscriptions.

REGION	2021	2022	2023
Institutions with access via a Wiley license	7,170	7,153	7,282
All Journals license	2,347	1,340	1,738
Transformational agreements	1,398	2,825	3,297
Other licenses	3,425	2,988	2,247
Institutions with access via traditional subscriptions	2	2	2
Online	1	1	1
Print and online	0	0	0
Print	1	1	1
Total	**7,172**	**7,155**	**7,284**

Additional reach: EBSCO

Wiley's arrangement with EBSCO allows us to extend the reach of your journal beyond core academic libraries. In 2023, 1,318 institutions accessed embargoed content of at least one year old from your journal via EBSCO databases.
This is a -2.5% change from 2022.

Social Media Reach

With over 3,000 followers, the BHIVA Facebook page is managed by the External Relations sub-committee and is used as a tool for promoting the work of the association. It carries updates and links to valuable resources produced by both BHIVA and other organisations within the HIV healthcare sector.

The BHIVA X account, also managed by the External Relations subcommittee, has continued to go from strength to strength again in 2023 and now has over 12,500 followers, an increase from over 10,000 followers in 2022. The group post regularly about the latest updates in the field of HIV and there were approximately 850,000 post impressions across the 12 months.

BHIVA's YouTube channel is used to host the latest resources, including a series of educational podcasts covering a range of hot topics in HIV. Following its set up in 2019, the YouTube channel has become an excellent resource for the broadcast of educational content including sessions from conferences and other training materials.

The BHIVA Instagram account has become increasingly active over the year and we now have 1,500 followers.

The work of the Sub-Committees

AUDIT AND STANDARDS SUB-COMMITTEE

Professor Fiona Burns,
Chair Audit & Standards Sub-committee

The BHIVA Audit and Standards sub-committee runs a routine clinical audit program with HIV centres across the UK to improve quality of care. The main 2023 project was a national audit of engagement in HIV care. It included a survey of HIV services' policies and practices, a case-note review of inpatients with HIV to assess admission causes (e.g., undiagnosed or not in care), and a review of outpatients not seen for over a year, focusing on disengagement and re-engagement efforts. Key findings and recommendations were presented at the BHIVA Autumn Conference in November 2023, with individual feedback reports sent to services. A paper is being prepared for submission.

The 2024 BHIVA national audit will aim to assess UK-wide HIV clinical services' documentation of co-medications and provision of vaccinations. Other key areas of focus will include communication with GPs, new BHIVA guidance regarding statins and provision of long-acting injectable ART. The audit will have two parts: a brief survey of services' policies on documentation of co-medications, and a case-note review of outpatients living with HIV who have been on the active outpatient caseload and attended an appointment in the last 12 months.

BHIVA and the UK Health Security Agency (UKHSA) continue to collaborate on understanding the causes and preventable mortality among people with HIV through the National HIV Mortality Review (NHMR). The NHMR working group met twice during this period, involving regional representatives and specialists to review progress. The data collection platform is being updated to give clinicians more autonomy and to integrate with late diagnosis reviews.

The sub-committee reviewed the PROM tool developed through the work led by Prof R Harding and endorsed its appropriateness. They recommended using the HIV positive outcomes measure, whilst further validation is in progress.

BHIVA is collaborating with the British Psychological Society to update psychological support standards for adults with HIV, aiming for publication by the 2024 BHIVA Autumn Conference.

sub-committee members led a survey of emergency departments implementing HIV and hepatitis B/C screening, focusing on the acceptability and understanding of assumed consent. The findings will be presented presented as a poster at the BHIVA 2024 Spring Conference and are being prepared for a journal paper.

Sub-committee members are supporting and advising on the ECDC/EACS Standards of Care. In 2023, they finalised and presented the first two modules—HIV pre-exposure prophylaxis and HIV testing—at the EACS 19th European AIDS Conference. They also aided in the ECDC survey on HIV-related stigma in healthcare,

which gathered over 18,400 participants from 54 countries, including 1,569 from the UK. The report is published here. Modules for 2024 in development include ART initiation, co-morbidity management, and antenatal screening.

Since the last report, the Sub-committee has successfully appointed a Vice Chair. The Sub-committee extends its sincere gratitude to Ann Sullivan and Andrew Freedman, who both retired this year after many years of dedicated service.

BHIVA CONFERENCES SUB-COMMITTEE REPORT

Dr Nicky Mackie,
Chair Conferences Sub-committee

The first organised events of 2023 were the ever-popular Best of CROI webinars. Since these moved to a virtual platform, the feedback to continue in this format has been consistent and resounding. The Conference on Retroviruses and Opportunistic Infections 2023 was a (mainly) face-to-face event that took place in Seattle, Washington in February. BHIVA supported a small working party to attend (made possible by grants from pharmaceutical companies) to review the key research. This group worked hard to produce slides and pre-record talks for the webinars which took place on 2 different evenings shortly after the Conference. We had around 150 attendees at each event and there was a live panel discussion with Q&A after the recordings. Feedback was excellent although many acknowledge how hard it is to fit in so much key data into short talks!

A huge amount of work from the Conferences Committee and the Medivents team went into the planning for the BHIVA Spring Conference at the end of April – a first time for BHIVA in Gateshead. I was particularly excited as this was my first in-person Conference since pre-pandemic! 170 abstracts were submitted for review. The programme featured a variety of invited speakers covering a range of topics including co-morbidities, the care cascade and patient–reported outcome measures; there were 4 oral abstract sessions where novel research was presented by a variety of health care workers

and community representatives; and more than 130 posters. There was also the opportunity to hear the results from the Equality, Equity, Diversion and Inclusion review which resulted in some lively discussion.

	LIVE EVENT	
	BHIVA SPRING 2022	BHIVA SPRING 2023
ABSTRACT SUBMISSIONS	157	170
ABSTRACT ACCEPTED	144	164
ORAL PRESENTATIONS	20	20
POSTER PRESENTATIONS	124	141

The overwhelming enthusiasm to be able to attend a conference in person, meet old friends and colleagues, listen to unique research and state-of-the-art lectures was expressed by multiple attendees and the feedback around content was very positive.

November 2023 was a busy month for the team. The ever-popular BHIVA General Medicine Course was held early in the month – a great opportunity for HIV/GU physicians to hear what's new in the ever-changing world of medicine.

On Friday 24th November, we held our BHIVA Autumn Conference which culminated in a celebration of World AIDS Day. The meeting was held in a venue in Bishopsgate, London (which proved to be a hit! thank you Medivents...) and had a global theme with topics covering migration and HIV, lessons learned for the UK from global policies and practice and opportunistic infection management. The evening event had contributions from all 4 nations across the UK and there was a very buoyant atmosphere at the post-Conference drinks afterwards!

I would like to take this opportunity to thank the Conferences Committee for their hard work and for the enthusiasm that they contribute to the planning of BHIVA's meetings and educational events. I have now completed 3 years as Conference chair (including through the pandemic), a role which I have hugely enjoyed, and I am handing over the reins to Professor Caroline Sabin who I have no doubt will do a fantastic job.

EDUCATION AND SCIENTIFIC SUB-COMMITTEE REPORT

Dr Tristan J Barber, Chair, Education & Scientific Sub-committee

It has been a busy year again for the Education and Scientific sub-committee in 2023, with work on a our Research Awards Programme as well as education, ably led by sub-committee Vice Chair and Education Lead Dr Ashini Fox.
Professor Alison Rodger chaired the BHIVA Research Awards Judging Panel for the second time. These Awards are supported by Gilead Sciences and BHIVA members, providing funding for research projects that will impact on the improvement of clinical care, management, health, and wellbeing of people living with HIV and on the prevention of HIV transmission. Applicants must be from UK based institutions. We announced six successful applicants who were awarded a total of £70,158.16:

- 'Pulmonary MRI assessment in HIV with obstructive lung disease: PuMAH OLD', Dr Paul Collini, University of Sheffield
- 'The impact of ectopic fat deposition on cardiac risk assessment in patients living with HIV. An MR spectroscopy cross-sectional analysis with HIV-negative individuals', Dr Thomas Heseltine, Liverpool University Hospitals Foundation Trust
- 'The effect of HIV-1 on osteoclast differentiation and activity ex vivo among peripubertal children and adolescents', Dr Lisha Jeena, University of Oxford
- 'Who is best placed to lead the care of older people living with HIV? A qualitative study', Dr Howell Jones, University College London
- 'Antibiotic STI prophylaxis and antimicrobial resistance among men-who-have-sex-with-men living with HIV', Dr Manik Kohli, University College London
- 'The role of ddhC in HIV diagnostics', Dr Ravi Mehta, Imperial College London

Sadly no one was eligible for the Don Jeffries Research Award this year, but we are hoping there will be eligible candidates soon.
Professor Maryam Shahmanesh is Chair of the BHIVA Implementation Science Awards judging panel. These awards are supported by ViiV Healthcare. Whilst we did not make awards in 2023, further rounds not mentioned occurred in 2022 and were after the previous report.

Dr Flavien Coukan
Imperial College London
'Modifiable factors to HIV PrEP access: a qualitative study to investigate codesign strategies to develop new PrEP delivery and accessibility recommendations in underserved populations in England'

Dr Mimie Chirwa
Bedfordshire Hospitals NHS Foundation Trust
'HIV testing within faith communities in Luton'

Dr David Lawrence
King's College Hospital NHS Foundation Trust
'Implementing long-acting injectable antiretroviral therapy for people living with HIV who have chronic viraemia'

Dr Shema Tariq
University College London
'The PRIME clinic: implementing holistic support for women living with HIV transitioning through the menopause'

Further funding is being sought to run another round of Implementation Science Awards.
The BHIVA international Partnerships Working Group (IPWG) is chaired by Dr Douglas Fink, supported by Vice Chair Dr Nadia Ahmed.
The BHIVA/Gilead International Exchange Fellowship Awards are designed to support the development of new links between BHIVA and institutions in low- or middle-income countries.

Funding has been secured to run a round of applications in 2024. The BHIVA IPWG also held their first lunchtime workshop at the BHIVA spring conference in April 2023, showcasing work in Indonesia and Nigeria, with another delivered in 2024 (details in next year's report). The Education working group, Chaired by Dr Ashini Fox, has continued to develop our online resources.

In 2023, an E-learning assessment module on HIV-2 management was published and several e-learning modules based on chapters of the opportunistic infection (OI) guidelines were developed to be published post pilot. E-learning modules became open access with the option of completing anonymously which has led to a significant increase in usage. E-learning modules continue to receive positive feedback and be seen as a valuable exam revision resource for the Diploma in HIV Medicine, and as continuing professional development (CPD) for senior clinicians.

Professor Anna Maria Geretti continues to provide a monthly summary of the BMJ journal *Sexually Transmitted Infections* for BHIVA *Members Matters,* and Dr Laura Waters also helpfully provides a summary of the HIV Medicine journal and other highlights.

HIV Medicine (https://onlinelibrary.wiley.com/journal/14681293) is the official journal of BHIVA with all eligible members getting complementary access. The Editors-in-Chief are Professor Caroline Sabin and Professor Jürgen Rockstroh, and the journal achieved an impact factor of 2.8 in 2023.

Future plans

2024 will see some changes. Tristan Barber has stepped down as Chair after 4 years in the role, and the process is underway to find a replacement. Ashini Fox has stepped down as Vice Chair, but remains Education Lead, and Professor Alison Rodger will complete her third and final year as Research Awards Judging Panel Chair.

We are looking forward to continuing to see the subcommittee thrive, including through expanding the educational resources available to members and beyond. The Education and Scientific subcommittee is at the core of BHIVA activities, including in supporting conference delivery, the membership with educational content, and in obtaining funding to support BHIVA's research, implementation science, and international educational exchange programmes.

BHIVA EXTERNAL RELATIONS SUB-COMMITTEE REPORT

Dr Matthew Page,
Chair, External Relations Sub-Committee

The External Relations Subcommittee works in line with BHIVA's objectives to promote good practice in the treatment and care of HIV to its membership and external organisations.

Summary Of Activities

Organisation structure

The External Relations committee membership changes have been maintained since its restructuring in 2021.

Media

BHIVA continues to be a mainstream media commentator on HIV, responding to many media enquries. BHIVA spokespeople were featured on a wide range of media outlets, including, Radio (BBC Radio 4, BBC Radio 5, City Radio, Virgin Radio Pride), television (Talk TV

October 2023 saw the Landmark endorsement for the People First Charter - Lancet HIV. It has since been adopted by numerous organisations internationally.

BHIVA is still in ongoing discussions with the British Boxing Board of Control regarding a ban on boxers living with HIV.

We continue to promote the external BHIVA Equity, Equality Diversity and Inclusion (EEDI) review

We have successfully completed the rounds of media training for BHIVA Executive committee in an attempt to expand our resource to rapid response news items.

Statements

BHIVA have produced position statements on the use of the shingles vaccine for people living with HIV (2023).

Social Media

The External Relations Committee continues to manage BHIVAs social media accounts, which include Twitter, Facebook and Instagram, as well as the HIV Medicine Journal Twitter account. There continues to be growth in followers on all platforms and continues to be an effective method for dissemination of information, and communication with members and external organisations. In this Jun 2023, we have additionally opened a BHIVA LinkedIn account which is doing well.

We have opted to pay for one off analytics for conferences to obtain key information which demonstrates social media impact to our stakeholders.

Succession planning ongoing for BHIVA tweeters – successfully filled posts for present tweeter roles.

Looking Ahead – 2023 and onwards

- Succession planning – key members stepped down from roles – Current vacancy for BHIVA External Relations Vice Chair.
- Successful handover of HIV Medicine social media accounts following the stepping down of the previous tweeter.
- Dr Matthew Page has been successful in his application to remain as BHIVA External Relations Chair.
- We continue to explore avenues to expand the reach of BHIVAs messaging beyond the existing audience

BHIVA GUIDELINES SUB-COMMITTEE REPORT

Dr Clare van Halsema, Chair Guidelines Sub-Committee

BHIVA produces guidelines on a comprehensive range of topics to support clinicians in managing HIV and its complications, as well as working with other organisations to produce co-badged guidelines on HIV prevention, testing and other areas. In a rapidly changing area of health, we provide rapid guideline updates as needed.

Dr Stuart Flanagan took on the chair role in autumn 2023, after Dr Clare van Halsema completed a three-year term. Dr Angela Bailey continued as vice chair and Dr Cathy Nieman Sims continues her permanent role as guidelines coordinator.

The guidelines subcommittee has continued to meet virtually and has agreed not to return to face to face meetings following the COVID pandemic.

Guideline development

A newly updated chapter of the opportunistic infections guideline, being updated chapter by chapter, was published in 2023, on the clinical management of pyrexia of unknown origin.

The full guidance on antiretroviral therapy from 2022 was updated in 2023 with a clarification on cardiovascular risk assessment. The tuberculosis guideline, now undergoing full review, was updated with a change based on a systematic review and to align with WHO on the timing of antiretroviral therapy for people taking TB treatment.

Rapid guidance on statins for people living with HIV, following the REPRIEVE study was published in November 2023. It generated some discussion and feedback, including a letter from a group of cardiologists, and an update was published in early 2024. This is a new area of practice, in which BHIVA has rapidly responded to new research findings.

Rapid guidance usually does not undergo consultation, but feedback is invited using a form alongside the guidance on the BHIVA website. However, we did invite consultation on the rapid guidance on opt-out testing, in view of the importance, lack of published evidence and range of opinions.

Work is ongoing on full guideline updates in viral hepatitis, immunisation, monitoring, HIV in pregnancy and now tuberculosis, in 2024.

Abridged versions of guidelines are published on the BHIVA guidelines app.

Position statements

A position statement was published on shingles vaccine for people living with HIV in December 2023 in response to changes in national recommendation for shingles vaccine

NICE accreditation

We held NICE accreditation for our guideline process until December 2023. NICE has now reviewed its accreditation process and has terminated it as of July 2024. We continue to adhere to the principles of excellence in evidence-based, unbiased guideline production as set out in the guideline development manual.

2024 plans and actions so far

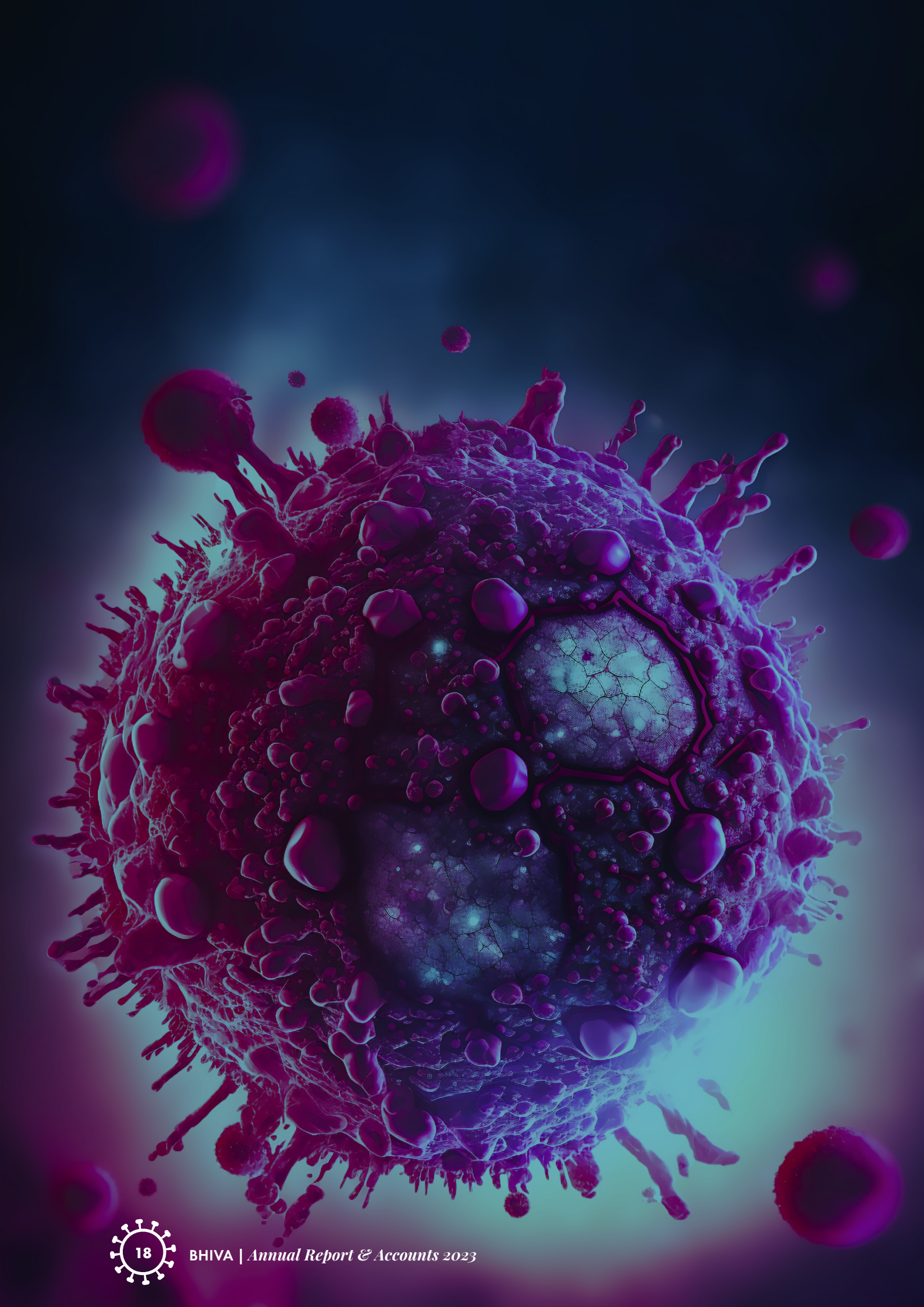
Work is ongoing on chapters of the opportunistic infection (OI) guideline, including non-tuberculous mycobacteria, OIs in pregnancy, central nervous system OIs.
The tuberculosis guideline update has begun.

E-learning modules on the various chapters are written – and the non-tuberculous mycobacteria module is ready as the chapter is published.

A new guideline has been agreed to support engagement in care – the "not in care" guidelines..

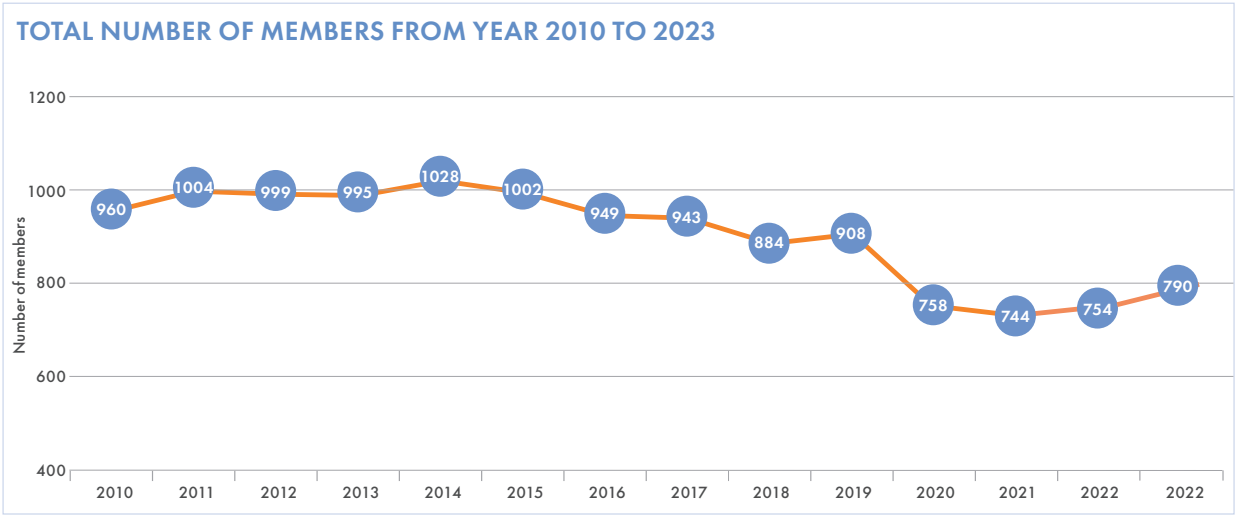
The updated pregnancy guideline is in the final stages of consultation.

With new members of the Guidelines Sub-committee including community representatives, trainee member and members responsible for the app, linkage with the education group for modules, we continue to produce guidance that is of great value to the HIV community.



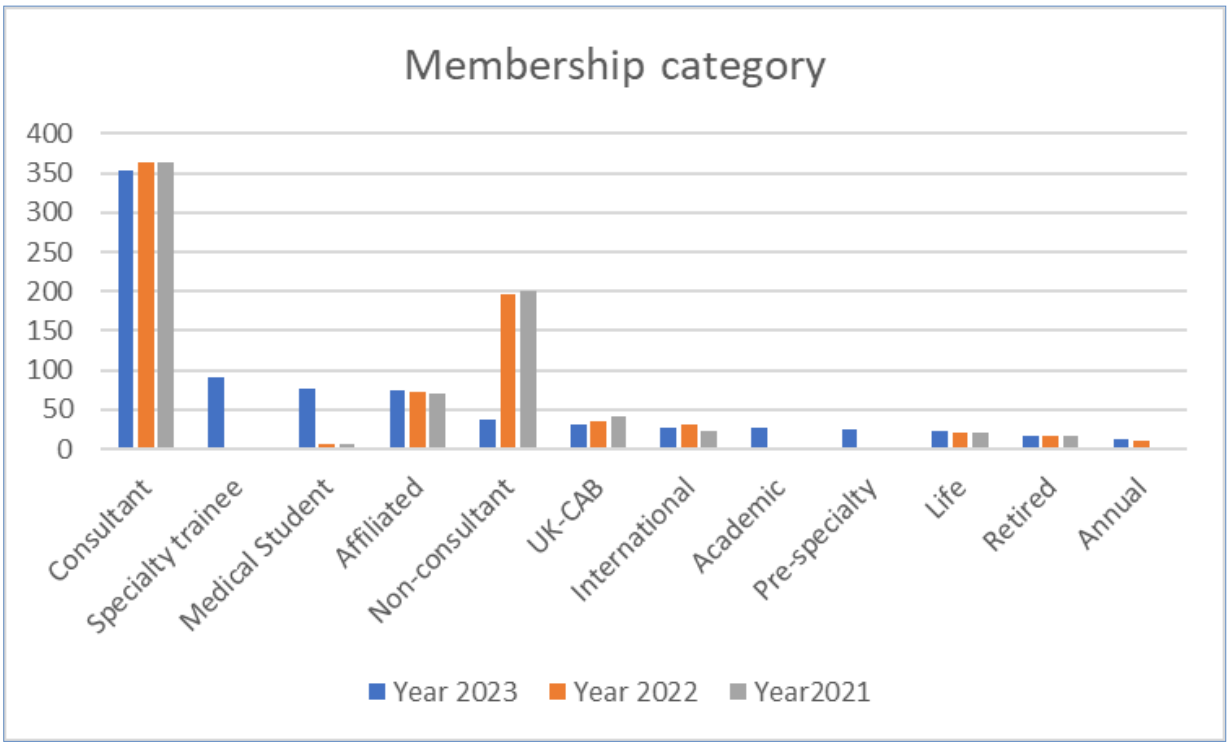
BHIVA membership annual report to 31 October 2023

TOTAL NUMBER OF MEMBERS FROM YEAR 2010 TO 2023

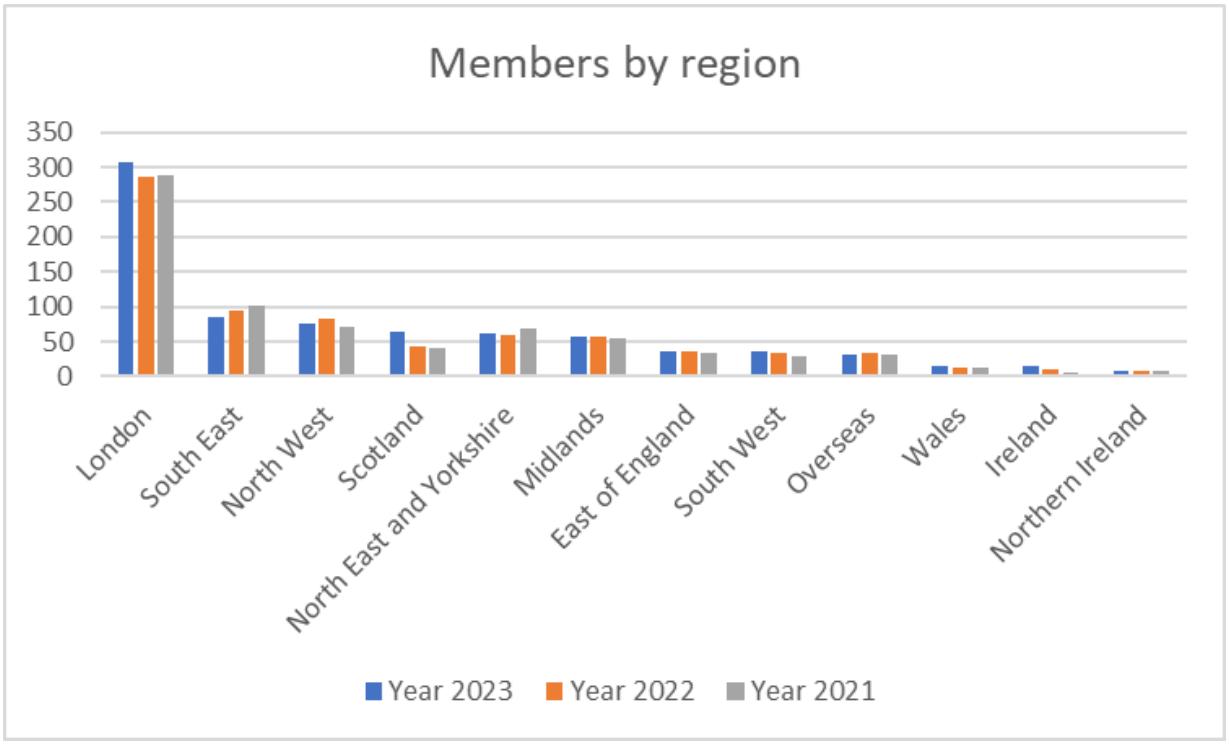


COMPARISONS OF CATEGORY AND REGION

MEMBERSHIP CATEGORY	2023		TREND	2022	
	No	%	%	No	%
Consultant	354	45%	↓	364	48%
Specialty trainee	91	11%	N/A	0	0%
Medical student	76	10%	↑	7	1%
BHIVA Affiliated	74	9%	↓	73	10%
Non-consultant	37	5%	↓	196	26%
BHIVA UK-CAB	30	4%	↓	36	5%
BHIVA International (HMIC/ LMIC)	26	3%	↓	31	4%
Academic, Clinical, Health or Population Scientist	26	3%	N/A	0	0%
Pre-specialty trainee	25	3%	N/A	0	0%
Life member	22	3%	=	20	3%
Retired consultant	17	2%	=	16	2%
Annual member	12	2%	↑	11	1%
Total BHIVA members	**790**	**100%**		**754**	**100%**



COMPARISONS OF CATEGORY AND REGION



SUMMARY OF MEMBERS NOT RENEWING BY 31 OCTOBER 2023

MEMBERS NOT RENEWED	2023	2022	2021	2020	2019	2018	2017	2016	2015	2014	2013	2012
Total cancellations	33	18	19	39	20	23	29	40	39	33	40	38
Not renewed (lapsed)	127	69	94	212	101	149	116	112	109	79	99	79
Total	**160**	**87**	**113**	**251**	**121**	**172**	**145**	**152**	**148**	**112**	**139**	**117**

REASON FOR CANCELLATION	YEAR 2023		TREND	YEAR 2022	
	No	%	%	No	%
Retired	14	43%	↑	6	33%
No reason given/Other	7	21%	↓	5	28%
Medical Student unsubscribed	5	15%	N/A	0	0%
Parental leave	4	12%	↑	3	17%
Financial pressures	2	6%	↓	0	0%
No longer working in HIV	1	3%	↓	3	17%
Sabbatical leave	0	0%	↓	1	5%
Total cancelled members	**33**	**100%**		**18**	**100%**

PREVIOUS MEMBERSHIP CATEGORY	YEAR 2023		TREND	YEAR 2022	
	No	%	%	No	%
Affiliated	15	9%	↑	9	10%
Consultant	46	29%	↓	18	21%
International	12	7%	↓	3	3%
Medical student	6	4%	↑	1	1%
Non-consultant	65	41%	↑	45	52%
Retired	4	3%	↑	5	6%
UK-CAB	12	7%	↑	6	7%
Total non-renewed members	**160**	**100%**		**87**	**100%**

Structure, governance and management

BHIVA is a Charitable Incorporated Organisation (as of 12 December 2016) governed by its Constitution and registered as a charity with the Charity Commission.

BHIVA is a membership association currently governed by a Board of 18 elected trustees who make up the Executive Committee including four officer posts of Chair, Vice Chair, Honorary Secretary and Honorary Treasurer.

BHIVA endeavours to ensure that the specialty is well represented on the Executive Committee to ensure that local challenges and issues that affect all those working within the field are addressed UK wide. Trustees are drawn from across the HIV sector and include clinicians and other healthcare professionals, academics, a representative from the UK-CAB as well as a trainee Doctors' representative and a new Consultant Doctors' representative.

The methods adopted for the recruitment and appointment of new trustees are as follows:

- A list of nominees is forwarded to all eligible members of the association with a request for their selections to fill the vacancies
- The election scrutineer will normally be the immediate past chair of the association or another person nominated by the Executive Committee
- The results of the election are declared at the Annual General Meeting.

Nominees are required to complete a trustee declaration form, a conflict-of-interest form and a skills assessment form at time of nomination. All members of the Executive Committee give their time voluntarily and receive no paid benefits from the charity.

On joining the BHIVA Executive Committee, trustees are provided with an induction pack that includes an outline of the role and expectations, a copy of the constitution, relevant policy and administration documents required to carry out the role as well as Charity Commission information about the responsibilities of becoming a charity trustee. Each new trustee also undertakes a tailored induction programme and is offered mentoring support from existing trustees.

Beyond their governance duties, trustees are expected to take an active role in the work of the charity according to their expertise through engagement with at least one of the five specialist sub-committees. Each sub-committee manages the activities of the charity and is led by a chair and vicechair. Under the sub-committees also sit a variety of specialist working and writing groups, led by an elected or appointed BHIVA member, who has specific responsibilities and bring a depth of knowledge and expertise to the sub-committees.

The trustees hold quarterly Executive Committee meetings to review the activities of the charity and consider its plans.

To retain its position at the forefront of HIV care, BHIVA is also affiliated with all the other key charities and associations who work within the field including:

- Chiva
- British Dietetic Association HIV Care Specialist Group (BDA)
- HIV Pharmacy Association (HIVPA)
- National HIV Nurses Association (NHIVNA)
- HIV Trainee Association (HIVTA)
- Rehabilitation in HIV Association (RHIVA)
- Society of Sexual Health Advisers (SSHA)
- UK Community Advisory Board (UK-CAB)

BHIVA has developed important links with other organisations, encouraging exchange of information between national and international centres including:

- British Psychological Society (BPS)
- Federation of Infection Societies (FIS)
- International AIDS Society (IAS)
- European AIDS Clinical Society (EACS)
- Medical Research Council (MRC)
- National AIDS Trust (NAT)
- Terrence Higgins Trust (THT)
- University of Liverpool Drug Interaction website.
- HIV Glasgow Conference

Financial review

BHIVA continues to face some financial headwinds arising from increased costs and downward pressure on income.

Increased costs have largely been driven by inflation and relate to increases in conference venue costs, operational costs, and pay uplifts for staff involved in, for example, the production of guidelines. Income from HIV medicine remained reasonably stable in 2023, but it is anticipated that this will fall in 2024. While membership has increased in number, owing to the type of membership class, there has been a slight fall in income from this source. There has also been a modest fall in overall income from the conferences, although registration has held up well. BHIVA has benefited from a modest increase in pharmaceutical sponsorship, which remains an important source of annual income.

There has been a modest decline in net cash and cash equivalents held by BHIVA and it is anticipated that this will continue in 2024 to cover costs such as the website redesign. There was a small improvement in the value of and return on the investment fund. It is anticipated that this will accelerate in 2024, although significant uncertainty remains about future performance, in the context of current economic and geopolitical circumstances.

Overall, BHIVA remains in a reasonably good financial position and there are no serious concerns about our ability to continue charitable activities in the near future. Further scrutiny of costs continues as well as looking at opportunities to raise income. Work towards a more granular approach to budgeting has been undertaken in 2024 and will continue in 2025. Major risks to BHIVA's continuing charitable activities remain the reduction in pharmaceutical company sponsorship and wider economic uncertainty.

Statement of Directors' and Trustees' responsibilities

The trustees are responsible for preparing a trustees' annual report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales requires the charity trustees to prepare financial statements for each year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, of the charity for that period. In preparing the financial statements, the trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- Observe the methods and principles in the applicable Charities SORP;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures that must be 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 in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the applicable Charities (Accounts and Reports) Regulations, and the provisions of the Trust deed. They are also responsible for safeguarding the assets of the charity and taking reasonable steps for the prevention and detection of fraud and other irregularities.

The trustees are responsible for the maintenance and integrity of the charity and financial information included on the charity's website in accordance with legislation in the United Kingdom governing the preparation and dissemination of financial statements.

TRUSTEE DECLARATION

I declare that:

- I am over age 18.
- I am not an undischarged bankrupt.
- I have not previously been removed from trusteeship of a charity by a Court or the Charity Commission.
- I am not under a disqualification order under the Company Directors' Disqualification Act 1986.
- I am, in the light of the above, not disqualified by the Charities Act 1993 (section 72) from acting as a charity trustee.
- I undertake to fulfil my responsibilities and duties as a trustee of the British HIV Association (BHIVA) in good faith and in accordance with the law and within the objects of BHIVA.

I do not have any financial interests in conflict with those of BHIVA (either in person or through family or business connections) except those that I have formally notified in a declaration of interest statement. I will specifically notify any such interest at any meeting where trustees are required to make a decision, which affects my personal interests, and I will absent myself entirely from any decision on the matter and not vote on it.

Financial Statements for the year ended 31 December 2023

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LEGAL AND ADMINISTRATIVE INFORMATION

Trustees
Professor Y Gilleece
Dr T Barber
Dr D Clutterbuck
Dr L N Siriwardena
Dr H Pintilie
Ms N Naous
Dr C Emerson
Dr K Childs
Mr J R Jaquiss
Dr N Mackie
Dr D Chadwick
Professor C Sabin
Dr I Reeves
Dr J Underwood

Charity number
1170707

Principal address
BHIVA Secretariat, Spirella Building, Bridge Road , Letchworth Garden City, Herts SG6 4ET

Independent examiner
UHY Hacker Young
Suite 501
The Nexus Building
Broadway
Letchworth Garden City
Herts
SG69BL

Bankers
National Westminster Bank plc, 190 The Broadway, Muswell Hill, London N10 3SO
Santander Bank, Bootle, Merseyside L30 4GB

Solicitors
Stone King LLP, Boundary House, 91 Charterhouse Street London EC1M 6HR

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) FOR THE YEAR ENDED 31 DECEMBER 2023

The trustees present their annual report and financial statements for the year ended 31 December 2023.

The financial statements have been prepared in accordance with the accounting policies set out in note 1 to the financial statements and comply with the charity's [governing document], the Companies Act 2006 and "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).

Objectives and activities

Public benefit

The trustees have paid due regard to guidance issued by the Charity Commission in deciding what activities the charity should undertake.

Achievements and performance

Significant activities and achievements against objectives

Financial review

Reserves policy

It is the policy of the charity that unrestricted funds which have not been designated for a specific use should be maintained at a level equivalent to between three and six month's expenditure. The trustees consider that reserves at this level will ensure that, in the event of a significant drop in funding, they will be able to continue the charity's current activities while consideration is given to ways in which additional funds may be raised. This level of reserves has been maintained throughout the year.

Structure, governance and management

The charity is a company limited by guarantee .... .

The trustees, who are also the directors for the purpose of company law, and who served during the year and up to the date of signature of the financial statements were:

Professor Y Gilleece
Dr T Barber
Dr D Clutterbuck
Dr L N Siriwardena
Dr H Pintilie
Ms N Naous
Dr C Emerson
Dr K Childs
Mr J R Jaquiss
Dr N Mackie
Dr D Chadwick
Professor C Sabin
Dr I Reeves
Dr J Underwood

Recruitment and appointment of trustees

[Details of method of recruitment and appointment of trustees.]

None of the trustees has any beneficial interest in the company. All of the trustees are members of the company and guarantee to contribute £1 in the event of a winding up.

The company's current policy concerning the payment of trade creditors is to follow the CBI's Prompt Payers Code (copies are available from the CBI, Centre Point, 103 New Oxford Street, London WC1A 1DU).

The company's current policy concerning the payment of trade creditors is to:

- settle the terms of payment with suppliers when agreeing the terms of each transaction;
- ensure that suppliers are made aware of the terms of payment by inclusion of the relevant terms in contracts; and
- pay in accordance with the company's contractual and other legal obligations.

Trade creditors of the company at the year end were equivalent to XX day's purchases, based on the average daily amount invoiced by suppliers during the year.

Organisational structure

[Details of organisational structure.]

The trustees' report was approved by the Board of Trustees.

.....

Dr I Reeves

Trustee

Date: 25/OCT/2024

INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF BRITISH HIV ASSOCIATION

I report to the trustees on my examination of the financial statements of British HIV Association (the charity) for the year ended 31 December 2023.

Responsibilities and basis of report

As the trustees of the charity (and also its directors for the purposes of company law) you are responsible for the preparation of the financial statements in accordance with the requirements of the Companies Act 2006 (the 2006 Act).

Having satisfied myself that the financial statements of the charity are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of the charity's financial statements carried out under section 145 of the Charities Act 2011 (the 2011 Act). In carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

Independent examiner's statement

Since the charity's gross income exceeded £250,000 your examiner must be a member of a body listed in section 145 of the 2011 Act. I confirm that I am qualified to undertake the examination because I am a member of the Institute of Chartered Accountants in England and Wales, which is one of the listed bodies.

I have completed my examination. I confirm that no matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1 accounting records were not kept in respect of the charity as required by section 386 of the 2006 Act; or
2 the financial statements do not accord with those records; or
3 the financial statements do not comply with the accounting requirements of section 396 of the 2006 Act other than any requirement that the accounts give a true and fair view which is not a matter considered as part of an independent examination; or
4 the financial statements have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102).

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the financial statements to be reached.

Alison Price FCA
Suite 501
The Nexus Building
Broadway
Letchworth Garden City
Herts
SG6 9BL

Dated: 28 October 2024

CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31 DECEMBER 2023

	Notes	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £
Income from:							
Donations and legacies	2	30,025	-	30,025	480	43,780	44,260
Charitable activities	3	777,793	-	777,793	783,468	61,500	844,968
Investments	4	31,442	-	31,442	30,558	-	30,558
Total income		839,260	-	839,260	814,506	105,280	919,786
Expenditure on:							
Raising funds		-	-	-	12,354	-	12,354
Charitable activities	5	998,133	5,554	1,003,687	941,049	20,709	961,758
Total expenditure		998,133	5,554	1,003,687	953,403	20,709	974,112
Net gains/(losses) on investments	8	146,412	-	146,412	(312,918)	-	(312,918)
Net income/(expenditure) and movement in funds		(12,461)	(5,554)	(18,015)	(451,815)	84,571	(367,244)
Reconciliation of funds:							
Fund balances at 1 January 2023		1,894,018	121,992	2,016,010	2,345,833	37,421	2,383,254
Fund balances at 31 December 2023		1,881,557	116,438	1,997,995	1,894,018	121,992	2,016,010

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

CIO STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31 DECEMBER 2023

	Notes	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £
Income from:							
Donations and legacies	2	30,025	-	30,025	480	43,780	44,260
Charitable activities	3	777,793	-	777,793	721,371	61,500	782,871
Investments	4	31,422	-	31,422	30,558	-	30,558
Total income		839,240	-	839,240	752,409	105,280	857,689
Expenditure on:							
Raising funds		-	-	-	12,357	-	12,357
Charitable activities	5	993,431	5,554	998,985	798,558	20,709	819,267
Total expenditure		993,431	5,554	998,985	810,915	20,709	831,624
Net gains/(losses) on investments	8	146,412	-	146,412	(312,918)	-	(312,918)
Net income/(expenditure) and movement in funds		(7,779)	(5,554)	(13,333)	(371,424)	84,571	(286,853)
Reconciliation of funds:							
Fund balances at 1 January 2023		1,960,639	121,992	2,082,631	2,332,063	37,421	2,369,484
Fund balances at 31 December 2023		1,952,860	116,438	2,069,298	1,960,639	121,992	2,082,631

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

The notes on pages 9 to 19 form part of these financial statements.

CONSOLIDATED BALANCE SHEET
AS AT 31 DECEMBER 2023

	Notes	2023 £	2023 £	2022 £	2022 £
Fixed assets					
Tangible assets	10		-		32
Investments	11		1,621,712		1,509,302
			1,621,712		1,509,334
Current assets					
Debtors	13	380,432		296,595	
Cash at bank and in hand		459,381		540,946	
		839,813		837,541	
Creditors: amounts falling due within one year	14	(463,530)		(330,865)	
Net current assets			376,283		506,676
Total assets less current liabilities			1,997,995		2,016,010
Net assets excluding pension liability			1,997,995		2,016,010
The funds of the charity					
Restricted income funds	16		116,438		121,992
Unrestricted funds			1,881,557		1,894,018
			1,997,995		2,016,010

The notes on pages 9 to 19 form part of these financial statements.

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 December 2023.

The directors acknowledge their responsibilities for complying with the requirements of the Companies Act 2006 with respect to accounting records and the preparation of financial statements.

The members have not required the company to obtain an audit of its financial statements for the year in question in accordance with section 476.

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The financial statements were approved by the trustees on .....25/Oct/2024.....

.....
Dr I Reeves
Trustee

Company registration number (England and Wales)

CONSOLIDATED BALANCE SHEET
AS AT 31 DECEMBER 2023

	Notes	2023 £	2023 £	2022 £	2022 £
Fixed assets					
Tangible assets	10		-		32
Investments	11		1,621,712		1,509,302
			1,621,712		1,509,334
Current assets					
Debtors	13	470,332		436,519	
Cash at bank and in hand		423,026		464,846	
		893,358		901,365	
Creditors: amounts falling due within one year	14	(445,772)		(328,068)	
Net current assets			447,586		573,297
Total assets less current liabilities			2,069,298		2,082,631
Net assets excluding pension liability			2,069,298		2,082,631
The funds of the charity					
Restricted income funds	16		116,438		121,992
Unrestricted funds			1,952,860		1,960,639
			2,069,298		2,082,631

The notes on pages 9 to 19 form part of these financial statements.

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 December 2023.

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The members have not required the company to obtain an audit of its financial statements for the year in question in accordance with section 476.

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The financial statements were approved by the trustees on 25/oct/2024

Dr I Reeves
Trustee

Company registration number (England and Wales)

CONSOLIDATED STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 DECEMBER 2023

	Notes	2023 £	2023 £	2022 £	2022 £
Cash flows from operating activities					
Cash absorbed by operations	20		(147,009)		(99,612)
Investing activities					
Purchase of investments		(246,284)		(32,502)	
Proceeds from disposal of investments		280,286		80,559	
Investment income received		31,442		30,558	
Net cash generated from investing activities			65,444		78,615
Net cash used in financing activities			-		-
Net decrease in cash and cash equivalents			(81,565)		(20,997)
Cash and cash equivalents at beginning of year			540,946		561,943
Cash and cash equivalents at end of year			459,381		540,946

The notes on pages 9 to 19 form part of these financial statements.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2023

1 Accounting policies

1.1 Accounting convention

The financial statements have been prepared in accordance with the charity's governing document, the Companies Act 2006, FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" ("FRS 102") and the Charities SORP "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). The charity is a Public Benefit Entity as defined by FRS 102.

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 £.

The financial statements have been prepared under the historical cost basis except for the modification to a fair value basis for certain financial instruments as specified in the accounting policies.

Basis of consolidation

The results of BHIVA Trading Ltd have been consolidated on a line by line basis.

1.2 Going concern

In light of the cost of living crisis, the trustees hove assessed whether the use of going concern is appropriate and have considered possible events or conditions that might cast significant doubt on the ability of the charitable company to continue as a going concern. The trustees have made this assessment for a period of at least one year from the date of the approval of these financial statements. In particular, the trustees have considered the charitable company's forecasts and projections and hove token account of pressures on fee income. After making enquiries, the trustees hove concluded that there is a reasonable expectation that the charitable company has adequate resources to continue in operational existence for the foreseeable future. The charitable company therefore continues to adopt the going concern basis in preparing its financial statements.

1.3 Fund accounting

Unrestricted funds are available for use at the discretion of the trustees in furtherance of their charitable objectives.

Designated funds are reserves which have been earmarked for particular uses by the trustees.

Restricted funds are subject to specific conditions by donors or grantors as to how they may be used. The purposes and uses of the restricted funds are set out in the notes to the financial statements.

1 Accounting policies **(Continued)**

1.4 Income

Grants are recognised as income over the period to which they relate. Any grant funding received in advance is recognised as deferred income on the balance sheet.

All other incoming resources are recognised when the charity is entitled to the income, there is certainty of receipt and the monetary value can be measured with reasonable accuracy.

All income is recognised once the Charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably. In pursuit of its charitable objectives, the Charity organises and hosts conferences, for which registration fees, sponsorship income, exhibition stand income and other sundry income is received, Where this income is received in advance of the given conference toking place, it is treated as deferred income and included within creditors in the accounts. The income is released once the conference has taken place. income from membership subscriptions is recognised in line with the period to which it relates. Income from royalties is recognised in line with the period to which it relates. Income from grants and donations are recognised when the Charity has been notified in writing of both the amount and settlement dole. In the event thot a grant or donation is subject to conditions that require a level of performance before the Charity is entitled to the funds, the income is deferred and not recognised until those conditions are fully met, or the fulfilment of those conditions is wholly within the control of the Charity and its probable that those conditions will be fulfilled in the reporting period.

1.5 Expenditure

Expenditure is accounted for on an accruals basis. Overheads and other costs not directly attributable to particular projects are apportioned to the relevant funds based on management estimates of the amount attributable to that activity in the year, either by reference to staff, time or space occupied, as appropriate.

Costs relating to a particular activity are allocated directly and others are apportioned on an appropriate staff basis. All costs are allocated between the expenditure categories of the Statement of Financial Activities on a basis designated to reflect the use of the resources.

1.6 Tangible fixed assets

Tangible fixed assets are initially measured at cost and subsequently measured at cost or valuation, net of depreciation and any impairment losses.

Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Computers	3 years straight line

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in the statement of financial activities.

1.7 Fixed asset investments

Fixed asset investments are initially measured at transaction price excluding transaction costs, and are subsequently measured at fair value at each reporting date. Changes in fair value are recognised in net income/(expenditure) for the year. Transaction costs are expensed as incurred.

Interests in subsidiaries are initially measured at cost and subsequently measured at cost less any accumulated impairment losses. The investments are assessed for impairment at each reporting date and any impairment losses or reversals are recognised immediately in profit or loss.

A subsidiary is an entity by the charitable company. Control is the power to govern the financial and operating policies of the entity so as to obtain benefits from its activities.

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2023

1 Accounting policies **(Continued)**

1.8 Impairment of fixed assets

At each reporting end date, the charity reviews the carrying amounts of its tangible assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any).

1.9 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

1.10 Financial instruments

The charity has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the charity's balance sheet when the charity becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

Basic financial assets

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price including transaction costs and are subsequently carried at amortised cost using the effective interest method unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts discounted at a market rate of interest. Financial assets classified as receivable within one year are not amortised.

Basic financial liabilities

Basic financial liabilities are initially measured at transaction price.

Derecognition of financial liabilities

Financial liabilities are derecognised when the charity's contractual obligations expire or are discharged or cancelled.

1.11 Taxation

The Charity is considered to pass the tests set out in Paragraph 1 Schedule of 6 of the Finance Act 2010 and therefore it meets the definition of a charitable company for UK corporation tax purposes. Accordingly, the Charity is potentially exempt from taxation in respect of income or capital gains received within categories covered by Chapter 3 Part 11 of the Corporation Tax Act 2010 or Section 256.

The trading subsidiary is not exempt for corporation tax purposes. The tax currently payable is based on the taxable profit for the year. Taxable profit differs from net profit in the profit or loss account because it excludes items of income or expense that are taxable or deductible in other years and it further excludes items that are never taxable or deductible. The company's liability for current tax is calculated using tax rates that have been enacted or substantively enacted by the reporting end date.

1.12 Significant judgements and estimates

No items in these financial statements include significant judgements and estimates that management has made in the process of applying these accounting policies or that have a significant risk of causing material adjustment to the book value of assets and liabilities within the next financial year.

2 Income from donations and legacies

	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £
Donations	25	-	25	-	280	280
Grants	30,000	-	30,000	480	43,500	43,980
	30,025	-	30,025	480	43,780	44,260

3 Income from charitable activities

	Unrestricted 2023 £	Total 2023 £	Unrestricted 2022 £	Restricted 2022 £	Total 2022 £
Membership Subscriptions	103,137	103,137	106,480	-	106,480
Major Sponsorship Fees	156,000	156,000	142,700	-	142,700
HIV medicine royalty & DAIG subscription	173,666	173,666	166,044	-	166,044
Conference registration fees	120,500	120,500	101,312	-	101,312
Exhibition stands	223,490	223,490	263,740	-	263,740
Other conference income	500	500	692	11,500	12,192
MAC AIDs Fund	-	-	-	50,000	50,000
Miscellaneous income	500	500	2,500	-	2,500
	777,793	777,793	783,468	61,500	844,968
Analysis by fund					
Unrestricted funds	777,793	777,793	783,468	-	783,468
Restricted funds	-	-	-	61,500	61,500
	777,793	777,793	783,468	61,500	844,968

4 Income from investments

	Unrestricted funds 2023 £	Unrestricted funds 2022 £
Income from listed investments	23,635	29,665
Interest receivable	7,807	893
	31,442	30,558

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2023

5 Expenditure on charitable activities

	Total Funds 2023 £	Total Funds 2022 £
Direct costs		
Subsides to affiliated associations and donations	10,000	10,000
Research awards	20,352	9,103
Conferences, courses and events	503,562	475,001
National clinical audit	28,780	27,488
HIV medicine, guidelines and educational tools	52,638	85,770
Website and app development and maintenance	38,223	35,295
	653,555	642,657
Share of support and governance costs (see note 6)		
Support	350,132	319,101
	1,003,687	961,758
Analysis by fund		
Unrestricted funds	998,133	941,049
Restricted funds	5,554	20,709
	1,003,687	961,758

6 Analysis of support costs

	Total 2023 £	Total 2022 £
Secretariat fees	214,144	212,325
Establishment, commitee and communications	64,781	43,432
Accountancy and bookkeeping fees	9,160	13,691
Auditors remuneration	9,400	9,000
Legal and professional fees	42,079	21,353
Bank and currency charges	3,713	4,167
Irrecoverable VAT	6,823	14,947
Depreciation	32	186
	350,132	319,101

7 Key management personnel

The CIO considers its key management personnel to be the Trustees. The Trustees give their time and expertise without any form of remuneration or other benefit in kind as noted below.

During the year, no trustees received any remuneration or other benefits (2022: £Nil). During the year, trustees received reimbursed expenses or had expenses paid directly to a third party on their behalf totalling £11,460 (2022: £36,224).

The CIO has no employees and therefore, no employee received emoluments over £60,000 per annum.

8 Gains and losses on investments

Gains/(losses) arising on:	Unrestricted funds 2023 £	Unrestricted funds 2022 £
Revaluation of investments	131,631	(309,015)
Sale of investments	14,781	(3,903)
	146,412	(312,918)

9 Taxation

The charity is exempt from taxation on its activities because all its income is applied for charitable purposes. The trading subsidiary is not exempt for corporation tax purposes.

10 Tangible fixed assets

Group and CIO

	Computers £
Cost	
At 1 January 2023	1,656
At 31 December 2023	1,656
Depreciation and impairment	
At 1 January 2023	1,624
Depreciation charged in the year	32
At 31 December 2023	1,656
Carrying amount	
At 31 December 2023	-
At 31 December 2022	32

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2023

11 Fixed asset investments

Group and CIO

	Listed investments £
Cost or valuation	
At 1 January 2023	1,509,302
Additions	246,284
Valuation changes	146,412
Disposals	(280,286)
At 31 December 2023	1,621,712
Carrying amount	
At 31 December 2023	1,621,712
At 31 December 2022	1,509,302

All investments are carried at their fair value. Investment in equities and fixed interest securities are all traded in quoted public markets, primarily in the London Stock Exchange. Holdings in common investment funds, unit trusts and open-ended investment companies are at the bid price. Asset sales and purchases are recognised at the dote of trade at cost (that is their transaction value).

The trustees delegate the management of their investments to Rathbones. The Charity is operating an investment policy that provides a degree of diversification of holdings within different shares and unit trust investments. The charity has invested in a range of holdings in order to protect against exposure to volatility in the market to reduce risk and preserve capital.

The charity does not make use of derivatives and similar complex financial instruments as it takes the view that investments are held for their longer term growth and annual income.

The charity has no material investment holdings in markets subject to exchange controls or trading restrictions.

The Total net gains on investments as per the Statement of Financial Activities comprises realised gains of £14,781 and unrealised revaluation gains of £131,631.

12 Subsidiaries

BHIVA Trading Limited is a private company limited by shares which was incorporated in England and Wales on 9 December 2019. It is 100% owned and controlled by the British HIV Association.

Name of undertaking	Registered office	Company number	Class of shares held	Holding
BHIVA Trading Ltd	Devonshire Business Centre, Works Road, Letchworth, SG6 1GH	12353562	Ordinary	100%

12 Subsidiaries **(Continued)**

The aggregate capital and reserves and the result for the year of subsidiaries was as follows:

Name of undertaking	Profit/(Loss)	Capital and Reserves
	£	£
BHIVA Trading Ltd	(4,682)	(71,299)

13 Debtors

Amounts falling due within one year:	Group 2023 £	Group 2022 £	CIO 2023 £	CIO 2022 £
Trade debtors	211,198	137,959	211,198	122,886
Amounts owed by subsidiary undertakings	-	-	89,167	154,167
Other debtors	57,230	34,758	57,963	35,589
Prepayments and accrued income	112,004	123,878	112,004	123,877
	380,432	296,595	470,332	436,519

14 Creditors: amounts falling due within one year

	Group 2023 £	Group 2022 £	CIO 2023 £	CIO 2022 £
Corporation tax payable	3,148	3,148	-	-
Deferred income	185,631	30,320	185,631	30,320
Trade creditors	235,192	257,217	235,192	257,652
Other creditors	17,210	(37)	2,600	(121)
Accruals	22,349	40,217	22,349	40,217
	463,530	330,865	445,772	328,068

15 Deferred income

	Group 2023 £	Group 2022 £	CIO 2023 £	CIO 2022 £
Deferred income is included within:				
Current liabilities	185,631	30,320	185,631	30,320
Movements in the year:				
Deferred income at 1 January 2023	30,320	55,400	30,320	55,400
Released from previous periods	(30,320)	(55,400)	(30,320)	(55,400)
Resources deferred in the year	185,631	30,320	185,631	30,320
Deferred income at 31 December 2023	185,631	30,320	185,631	30,320

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2023

16 Restricted funds

The restricted funds of the charity comprise the unexpended balances of donations and grants held on trust subject to specific conditions by donors as to how they may be used.

	At 1 January 2023	Incoming resources	Resources expended	At 31 December 2023
	£	£	£	£
Website development fund	2,980	-	(1,900)	1,080
Gilead podcasts fund	27,617	-	(3,654)	23,963
Gilead Pakistan fund	3,190	-	-	3,190
Gilead best of Croi & ViiV Research awards	88,205	-	-	88,205
	121,992	-	(5,554)	116,438

Previous year:	At 1 January 2022	Incoming resources	Resources expended	At 31 December 2022
	£	£	£	£
Website development fund	2,980	-	-	2,980
Gilead podcasts fund	27,617	-	-	27,617
Gilead Pakistan fund	3,190	-	-	3,190
Gilead best of Croi & ViiV Research awards	3,634	105,280	(20,709)	88,205
	37,421	105,280	(20,709)	121,992

The income and expenditure of the trading subsidiary, BHIVA Trading Limited, is presented separately above. These results are consolidated into the overall consolidated financial statements on a line by line basis.

Research awards fund
Originally launched in 2016, the BHIVA research awards are intended to provide funding for research projects that will improve the clinical care and management of people living with HIV in the UK. Income is received annually from Gilead. The fund is expended by was of making awards to individuals.

Website development fund
This fund represents funding received specifically for the development of the BHIVA website. Unspent funds have been carried forward to be utilised in subsequent years.

Gilead podcasts fund
This fund represents funding received specifically for the production of BHIVA podcasts. These podcasts will take place in 2020-21. Accordingly, the unspent funds have been carried forward at the balance sheet date.

Gilead Pakistan Fund
Gilead Sciences Inc. has partnered with 12 leading companies in Pakistan as part the Corporate Coalition for Viral Hepatitis Elimination in Pakistan (CCVHEP) program to support the Government of Pakistan's effort to eliminate viral hepatitis in Pakistan by 2030. This funding was specifically used by the charity to cover the costs of 3 people to attend a conference and speak on behalf of BHIVA training with the Pakistan military.

17 Unrestricted funds

The unrestricted funds of the charity comprise the unexpended balances of donations and grants which are not subject to specific conditions by donors and grantors as to how they may be used. These include designated funds which have been set aside out of unrestricted funds by the trustees for specific purposes.

	At 1 January 2023	Incoming resources	Resources expended	Gains and losses	At 31 December 2023
	£	£	£	£	£
General funds	1,960,641	839,240	(993,431)	146,412	1,952,862
Trading subsidiary	(66,623)	20	(4,702)	-	(71,305)
	1,894,018	839,260	(998,133)	146,412	1,881,557

Previous year:	At 1 January 2022	Incoming resources	Resources expended	Gains and losses	At 31 December 2022
	£	£	£	£	£
General funds	2,332,063	752,409	(810,913)	(312,918)	1,960,641
Trading subsidiary	13,770	62,097	(142,490)	-	(66,623)
	2,345,833	814,506	(953,403)	(312,918)	1,894,018

18 Analysis of net assets between funds

	Unrestricted funds 2023	Restricted funds 2023	Total 2023
	£	£	£
At 31 December 2023:			
Investments	1,621,712	-	1,621,712
Current assets/(liabilities)	259,845	116,438	376,283
	1,881,557	116,438	1,997,995

	Unrestricted funds 2022	Restricted funds 2022	Total 2022
	£	£	£
At 31 December 2022:			
Tangible assets	32	-	32
Investments	1,509,302	-	1,509,302
Current assets/(liabilities)	384,684	121,992	506,676
	1,894,018	121,992	2,016,010

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)
FOR THE YEAR ENDED 31 DECEMBER 2023

19 Related party transactions

A trustee was paid £nil (2022: £13,602) for providing media services to the charity. Services were provided on an arm's length basis.

A trustee was also paid £nil (2022: £14,952) for professional services offered to the charity.

20 Cash generated from operations

	2023 £	2022 £
Net income/(expenditure) for the year	(18,015)	(367,244)
Adjustments for:		
Investment income recognised in statement of financial activities	(31,442)	(30,558)
(Gain)/loss on disposal of investments	(14,781)	3,904
Fair value gains and losses on investments	(131,631)	309,015
Depreciation of tangible fixed assets	32	186
Movements in working capital:		
(Increase)/decrease in debtors	(83,837)	159,768
Increase/(decrease) in creditors	132,665	(174,683)
Cash absorbed by operations	(147,009)	(99,612)

21 Analysis of changes in net funds

The charity had no material debt during the year.

UHY Hacker Young
Chartered Accountants

23083/1318926
23 October 2024

UHY Hacker Young
PO Box 501
The Nexus Building
Broadway
Letchworth Garden City
Herts SG6 9BL

Phone +44 1462 687333
Fax +44 1462 687334
Email letchworth@uhy-uk.com
Web www.uhy-uk.com/letchworth

Also in Cambridge and Huntingdon

The Board of Trustees
British HIV Association
Spirella Building
Bridge Road
Letchworth Garden City
Herts
SG6 4ET

Dear Sirs

During the course of our independent examination of your accounts for the year ending 31 December 2023, the following representations were made to us by the management and Council. Please read these representations carefully and if you agree with our understanding, please sign and return a copy of this letter to us as confirmation of this.

Representation

1 You acknowledged as trustees your responsibility for making accurate representations to us and for the accounts which we have prepared for the charity.

2 You confirmed that all accounting records had been made available to us for the purpose of the independent examination and that all the transactions undertaken by the charity had been properly reflected and recorded in the accounting records. All other records and related information, including minutes of all management and trustees' meetings, had been made available to us.

3 You confirmed that the charity had no liabilities or contingent liabilities other than those disclosed in the accounts.

4 You confirmed that there have been no events since the balance sheet date which required disclosing or which would materially affect the amounts in the accounts, other than those already disclosed or included in the accounts.

5 You confirmed that the charity has not had, at any time during the period, any arrangement, transaction or agreement to provide credit facilities (including advances and credits granted by the charity) for trustees, nor to provide guarantees of any kind on behalf of the trustees.

PTO

UHY WKH Limited, trading as UHY Hacker Young, is registered in England and Wales No. 8853746. Regulated by the Institute of Chartered Accountants in England and Wales for a range of investment business activities.

The Company's Directors are referred to as Partners and a list of their names and professional qualifications can be viewed at the Company's registered office and on-line at www.uhy-uk.com/Letchworth.

A member of the UHY Hacker Young Group of independent UK partnerships.
A member of UHY International, a network of independent accounting and consulting firms.

INVESTORS IN PEOPLE
ICAEW CHARTERED ACCOUNTANTS

UHY Hacker Young
Chartered Accountants

Continued 2
British HIV Association

6 You confirmed that you have disclosed to us all related party transactions relevant to the charity and that you are not aware of any further related party matters that require disclosure.

7 You confirmed that the charity has not contracted for any capital expenditure other than as disclosed in the accounts.

8 You confirmed you are not aware of any possible or actual instance of non-compliance with laws and regulations which provide a legal framework within which the charity conducts its business and which are central to the charity's ability to conduct its business.

9 You confirmed that, having considered your expectations and intentions for the next twelve months and the availability of working capital, the charity is a going concern.

10 You confirmed the following specific representations made to us during the course of preparing your accounts and our independent examination:

a. You confirmed there were no employees during the year
b. You confirmed that all liabilities relating to the year ended 31 December 2023 had been fully recognised.

Yours faithfully

UHY Hacker Young

We confirm that we have read and understood the contents of this letter and agree that it accurately reflects the representations made to you by the trustees during the course of preparing the charity's accounts.

.....

On behalf of the board of trustees

Date 25/OCT/2024

UHY WKH Limited, trading as UHY Hacker Young, is registered in England and Wales No. 8853746. Regulated by the Institute of Chartered Accountants in England and Wales for a range of investment business activities.

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INVESTORS IN PEOPLE | Gold

ICAEW CHARTERED ACCOUNTANTS

BHIVA
British HIV Association

www.bhiva.org

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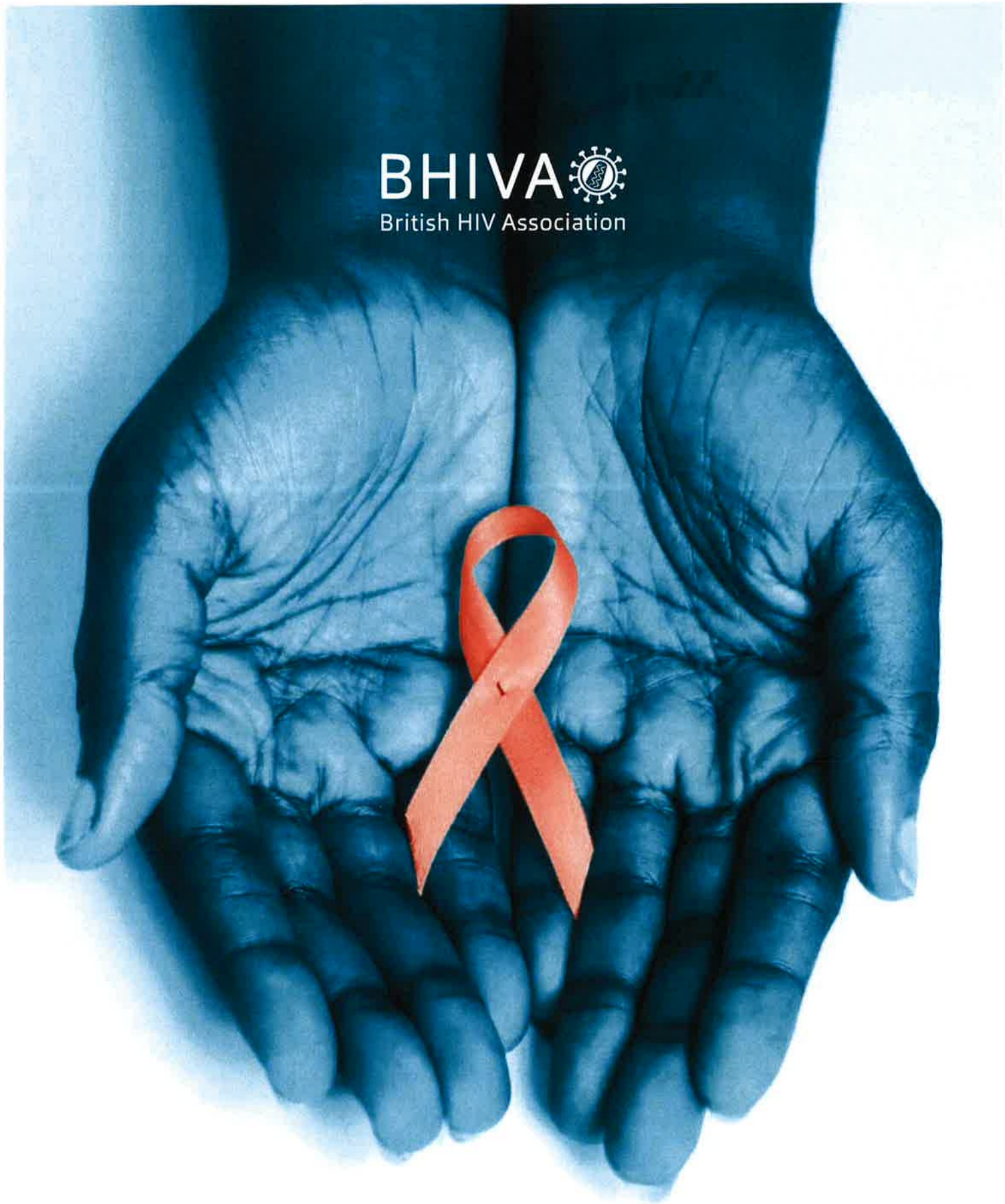
BRITISH HIV ASSOCIATION

England & Wales - Charity number 1170707

Accounts



2022 Trustees' Annual *Report & Accounts*

www.bhiva.org

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Charity Information for the year ended *31 December 2022*

Trustees retiring

- Dr Laura Waters, retired as Chair
- Professor Caroline Sabin, retired as Vice Chair
- Dr Ranjababu Kulasegaram, retired as Trustee
- Dr Clare van Halsema, retiring as Trustee

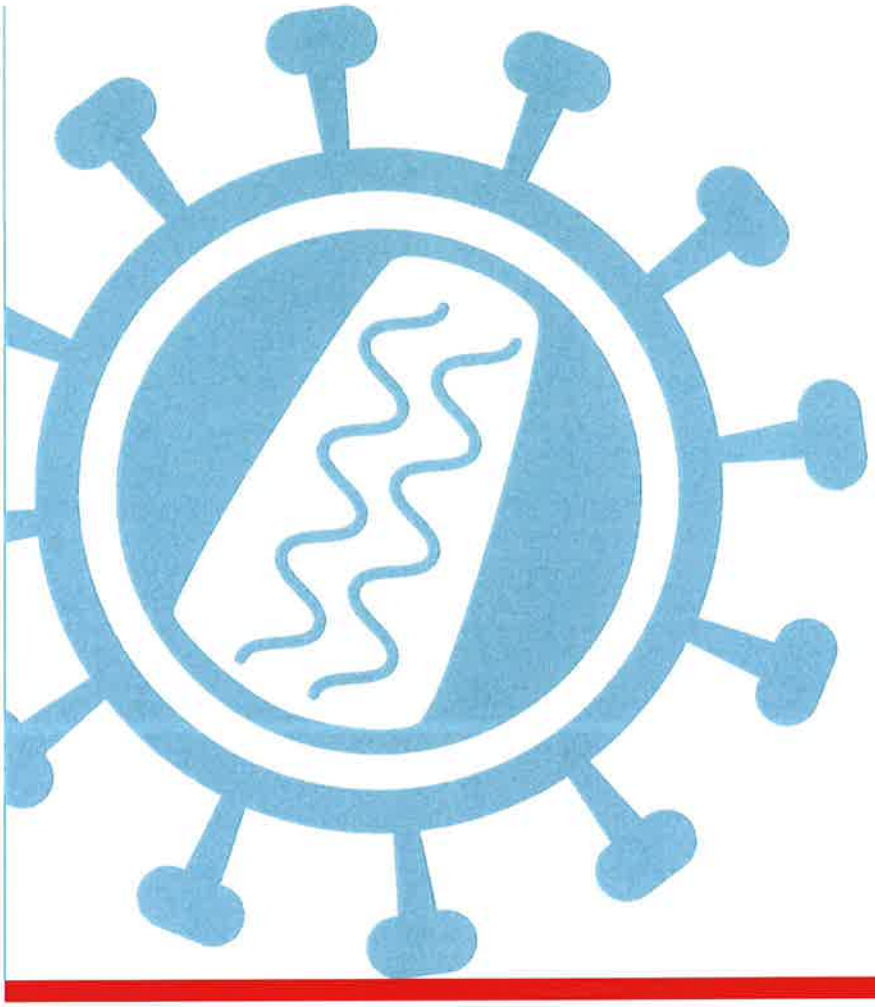
Charity Trustees

Officers

- Professor Yvonne Gilleece, Chair appointed 25 November 2022
- Dr Nicola Mackie, Vice Chair, appointed 25 November 2022
- Dr Tristan Barber, Honorary Secretary, appointed 25 November 2022
- Dr Iain Reeves, Honorary Treasurer, appointed 22 November 2020

Elected Trustees

- Dr Daniel Clutterbuck, appointed 22 November 2020
- Dr Ashini Fox, appointed 22 November 2020
- Dr Nick Larbalestier, appointed 22 November 2020



BHIVA
British HIV Association

- Dr David Chadwick, reappointed 25 November 2022
- Dr Jonathan Underwood, reappointed 25 November 2022

Specific Trustee Roles

- Dr Rebecca Metcalfe, New Consultant Doctors' Representative, appointed 22 November 2020
- Professor Caroline Sabin, Editor-in-Chief, *HIV Medicine*, appointed 25 November 2022
- Miss Jo Josh, UK-CAB Community Representative, appointed as acting representative 17 September 2019, appointed as representative 22 November 2020
- Dr Manik Kohli, Trainee Doctors' Representative, appointed November 2021
- Ms Paula Bibby, Finance Trustee

Charity Number

- 1170707

Registered Office and Operational Address

- Medivents Limited
  Devonshire Business Centre
  Works Road
  Letchworth
  Hertfordshire SG6 4ET

Independent Auditors

- Moore Kingston Smith LLP
  4 Victoria Square, St Albans,
  Hertfordshire AL1 3TF

Bankers

- National Westminster Bank plc
  190 The Broadway, Muswell Hill
  London N10 3SD

"Thank you for all you do to help support community organisations and the wider sector."

Community BHIVA member

About BHIVA

The British HIV Association, (BHIVA), is the leading UK association representing professionals in HIV. Since its inception in 1995, BHIVA has been committed to providing excellent care for people living with and affected by HIV.

BHIVA is a national advisory body on all aspects of HIV care and the association provides a national platform for HIV care issues. BHIVA representatives contribute to international, national and local committees dealing with HIV care. In addition, BHIVA promotes undergraduate, postgraduate and continuing medical education within HIV care.

The association aims to advance professional and public education in the subjects of HIV, including testing, treatment and prevention, and the management of HIV-related illnesses and treatment complications through the promotion of research, dissemination of and the production and promotion of evidence-based guidelines and standards.

Our objectives

BHIVA has four main objectives:

1. To relieve sickness and to protect and preserve health through the development and promotion of good practice in the testing and treatment of HIV and HIV-related illnesses:
2. To advance public and professional education on HIV through education and the promotion, conduct and dissemination of research
3. To promote optimal outcomes for people living with, and affected by, HIV through the development and dissemination of national guidelines and standards, audit and research
4. To support other organisations through activities including collaborative responses to consultations, media representation of HIV, workforce planning and, exceptionally, individual cases of stigma, discrimination or suboptimal care.

Long term, continuing to promote best practice within the specialty, ensuring that the care provided for people living with HIV in the UK is world-leading is of primary concern. To achieve that aim, BHIVA must maintain its contribution to the continued growth of the specialty over the next decade by continuing to support training and research in the field of HIV medicine and helping to ensure that the existing excellent national standards of care are maintained.

Education is a primary focus and BHIVA is passionate about promoting and supporting the speciality to deliver undergraduate, postgraduate and continuing medical education within HIV care.

With work still to be done in educating the medical profession, scientific community public about HIV, through the promotion of research and dissemination of research results is central to the association's objectives. Promoting accurate messaging related to HIV and challenging decisions that discriminate against people living with, or affected by, HIV helps overcome outdated beliefs and challenges stigma.

Education is also key to the ongoing development of the specialty and the ability to develop a fully integrated educational programme for members and the wider HIV community is at the heart of the long-term strategy of the association. Promoting and disseminating the latest research through regional, national and international meetings and conferences and publications, and supporting an increasingly diverse range of research studies which aim to improve the health and lives of people living with HIV will help to achieve this.

By increasing the awareness of BHIVA at an international level, BHIVA endeavours to maintain a reputation for excellence in education and research. The association's ability to support a range of stakeholders and organisations by providing expert clinical advice on HIV and its management further strengthens BHIVA's international presence.

Activities

BHIVA promotes excellence in HIV care through production of evidence-based, NICE-accredited guidelines. Our antiretroviral treatment guidelines form the basis of national prescribing policies across the UK and are widely read and referenced internationally. BHIVA represents the interests of people living with HIV and input from the HIV clinical and research communities through feedback on national prescribing policies.

BHIVA works closely with other professional and community organisations to advocate against discriminatory policies and ensure that the needs and priorities of people living with HIV are at the heart of decisions that affect them.

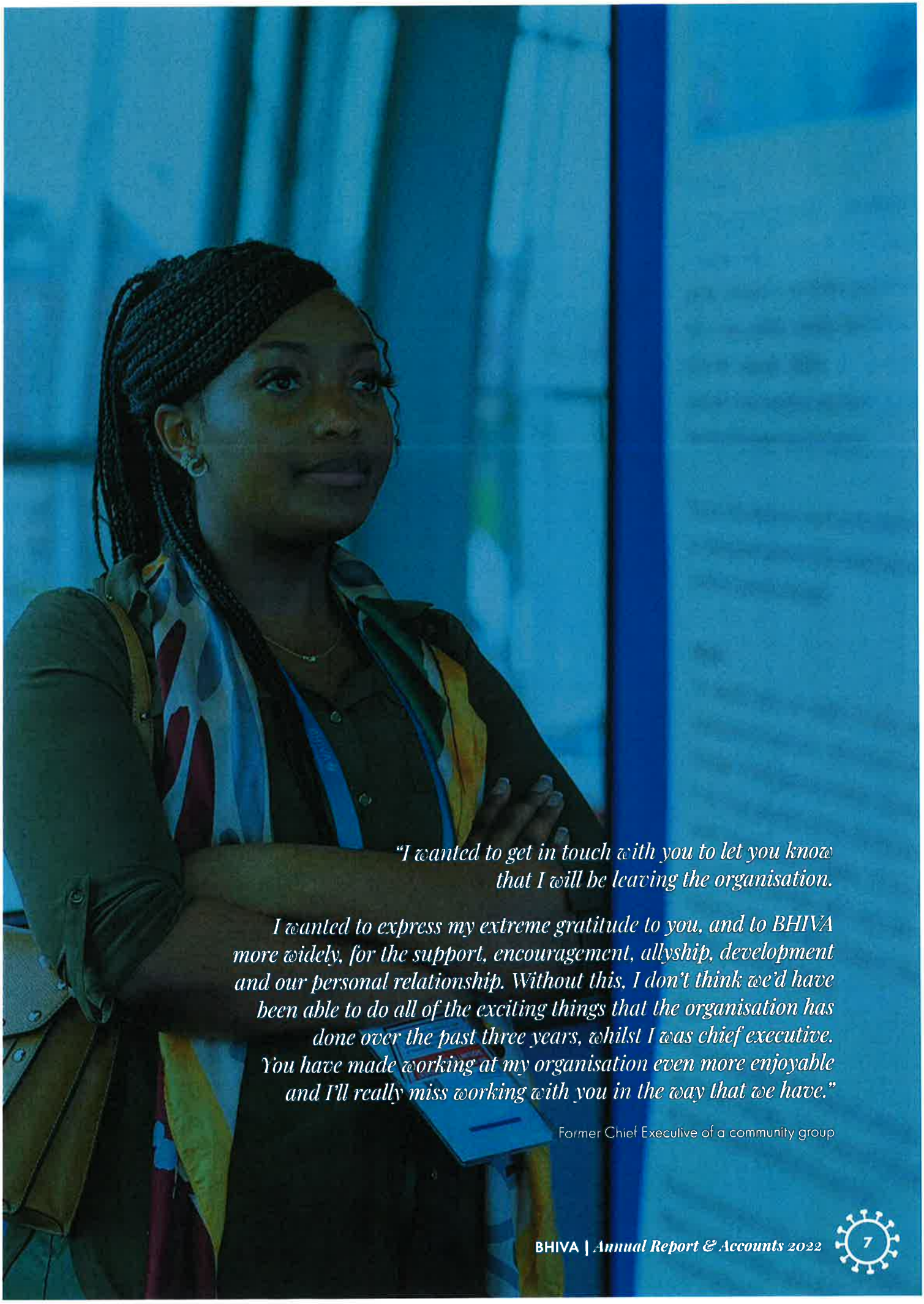
BHIVA actively encourages the presentation of original UK research. Abstracts are invited for the annual spring conference, which aims to showcase the best contemporary research into HIV-related topics currently being undertaken in the UK. The annual conference attracts a broad spectrum of participants from experienced HIV specialists to those still in training, HIV researchers from a range of disciplines and community members. Eminent international speakers are invited to present the latest data.

BHIVA supports research in HIV care through its annual research awards scheme. Originally launched in 2006, the programme operates through competitive application. Open to all BHIVA members to submit applications can submit applications for the funding of research projects that impact on the improvement of clinical care and management of people living with HIV in the UK. A minimum of £30,000 per annum is available, to be distributed amongst the successful applicants according to the quality of the submitted proposals. The awards panel is chaired by an independent chair.

Applications for grants or funding for research or other projects made directly to the association are reviewed by the BHIVA Executive Committee on a quarterly basis and considered based on merit and relevance to the objectives of BHIVA.

HIV Medicine is the official journal of the association and is published by Wiley. *HIV Medicine* is a peer-reviewed journal publishing original articles, reviews and guidelines on all aspects of HIV treatment and diagnosis.

BHIVA also undertakes a wide range of other activities to promote medical education in HIV care and support research. This includes conference feedback meetings, training courses for the Diploma in HIV Medicine examination, web-based e-learning modules as well as international scholarships and exchanges to forge links with international organisations to increase the understanding of the treatment and management of HIV.



"I wanted to get in touch with you to let you know that I will be leaving the organisation.

I wanted to express my extreme gratitude to you, and to BHIVA more widely, for the support, encouragement, allyship, development and our personal relationship. Without this, I don't think we'd have been able to do all of the exciting things that the organisation has done over the past three years, whilst I was chief executive. You have made working at my organisation even more enjoyable and I'll really miss working with you in the way that we have."

Former Chief Executive of a community group

A board of 14 trustees are responsible for the work of the association and its activities are carried out by five main subcommittees, all which report to the Executive Committee. The subcommittees are:

- Audit and Standards
- Conferences
- Education and Scientific
- External Relations
- Guidelines

The Executive Committee review the work carried out by the subcommittees to ensure its activities are in line with the charity's objectives. All trustees sit on at least one subcommittee to facilitate this process and to monitor progress.

BHIVA would be unable to flourish without the considerable commitment of time, energy, expertise and dedication by so many individual members of the committees, subcommittees, writing and working groups as well as the vital support through sponsorship from within the pharmaceutical industry.

Year in review

BHIVA has continued to play a major role in supporting people living with HIV, and their care providers, following the COVID-19 pandemic, by providing regular updates to guidelines on risk and vaccination, including non-technical summaries tailored to readers in the HIV community. In addition, supporting and contributing to research, data collection, presenting information at national and international meetings, and collaborating with other organisations such as UKHSA.

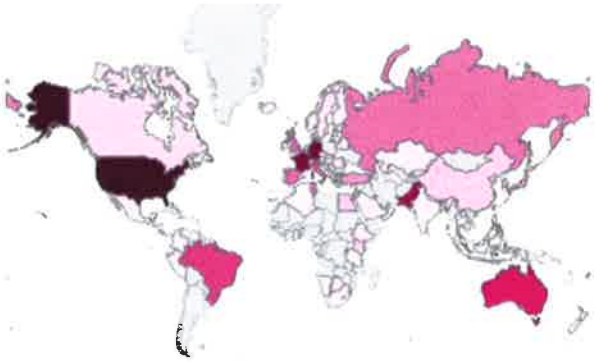
BHIVA assessed levels of inclusivity in its organisation and practices, with the first stage being a review into Equity, Equality, Diversity and Inclusion (EEDI), which was conducted by independent consultants, with support from BHIVA's Equity, Equality, Diversity and Inclusion Review Advisory Group. A wide-ranging survey sought responses from both current and past BHIVA members and non-members with an interest in HIV through work or personal experience.

The BHIVA website is the association's central hub for information. Attracting over 15,000 visitors in 2022, it has continued to be the go-to place for the latest updates on guidelines and HIV news. The official journal of BHIVA, *HIV Medicine*, is a peer-reviewed journal is specifically aimed at researchers and clinicians with responsibility for treating those living with HIV. It is the official journal of the British HIV Association (BHIVA), the European AIDS Clinical Society (EACS) and the Deutsche AIDS-Gesellschaft e.V. (DAIG), and is published by Wiley. It aims to provide an outlet for the publication of international research papers, embracing clinical, pharmacological, epidemiological, ethical, preclinical and in vitro studies. It is the flagship publication of the association available to all members in either printed or online format and brings in vital revenue through royalty subscriptions. For the first time, on International Women's Day on 8th March 2022, *HIV Medicine* published an issue focussed on HIV and women, including papers relating to the optimal clinical management of women with HIV, service and care provision for transgender women, the screening for and management of comorbidities, issues around pregnancy and pregnancy outcomes, as well as ageing and menopause and the barriers to participation in clinical research for women living with HIV.

HIV MEDICINE JOURNAL

Global reach

In 2022, 7,155 institutions offered access to the latest content in your journal via either a Wiley license or a traditional (title-by-title) subscription. On this map, darker shading shows where circulation is highest. Countries shaded in grey may be covered by philanthropic initiatives.



In 2022, our philanthropic initiatives extended low-cost or free access to current content to 4,304 developing world institutions.

Reach by access type

In 2022, 7,153 institutions offered access to your journal via a Wiley license, often through a consortium. Of these institutions, 1,340 had access via the "All Journals license". 2,825 institutions had access via "Transformational agreements" which cover both subscription access and open access publishing. In addition, 2 institutions offered access via traditional (online or print) subscriptions.

Additional reach: EBSCO

Wiley's arrangement with EBSCO allows us to extend the reach of your journal beyond core academic libraries. In 2022, 1,352 institutions accessed embargoed content of at least one year old from your journal via EBSCO databases. This is a -4.0% change from 2021.

SALES MODEL	2020	2021	2022
Institutions with access via a Wiley license	**7,395**	**7,170**	**7,153**
All Journals license	2,954	2,347	1,340
Transformational agreements	961	1,398	2,825
Other licenses	3,480	3,425	2,988
Institutions with access via traditional subscriptions	**2**	**2**	**2**
Online	1	1	1
Print and online	0	0	0
Print	1	1	1
Total	**7,397**	**7,172**	**7,155**

Reach by region

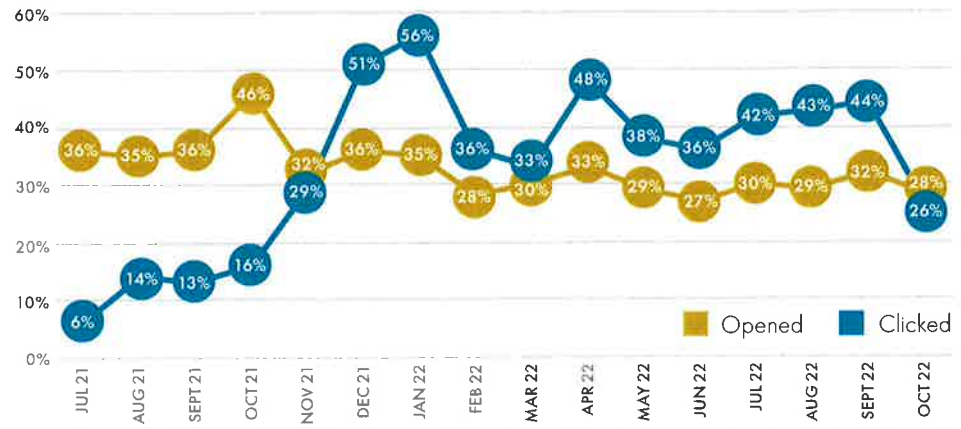
This table shows the number of institutions, by region, with access to the latest content in your journal via either a Wiley license or a traditional (title-by-title) subscription.

REGION	2020	2021	2022
Australia & NZ	462	462	463
Canada	89	88	91
China	108	112	114
Europe	3,358	3,240	3,058
Japan	173	178	192
Rest of World	2,096	2,052	2,104
UK	315	293	297
USA	796	747	836
Grand Total	**7,397**	**7,172**	**7,155**

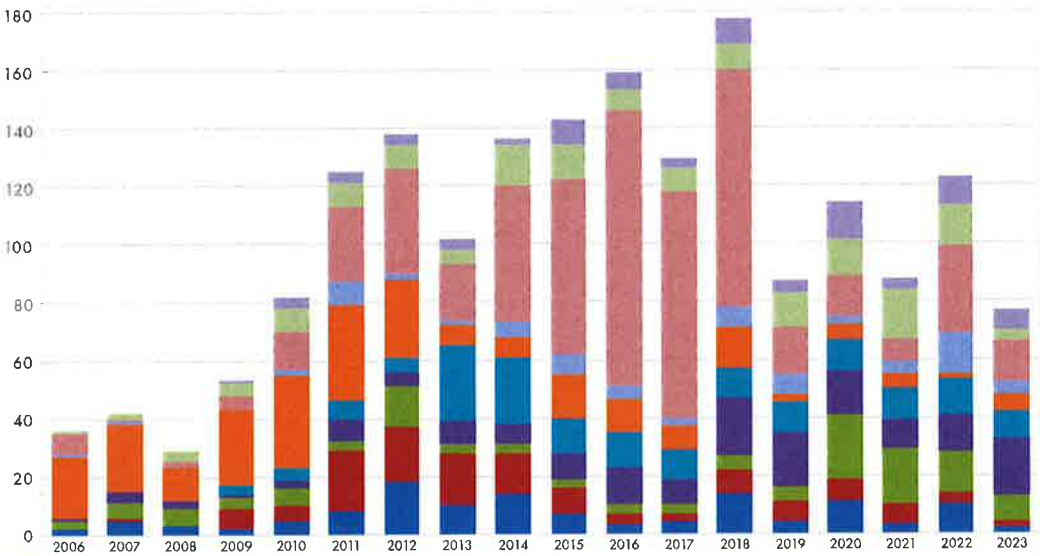
BHIVA *Members Matters*

The BHIVA monthly e-newsletter is distributed to all members and includes the latest information and updates in the field of HIV for the healthcare community. It is seen as a vital tool for keeping members up to date and was particularly invaluable in keeping the membership fully informed of the latest data and research during the COVID-19 pandemic.

MEMBERS MATTERS EMAIL ENGAGEMENT



EMAILS TO ALL BHIVA MEMBERS 2006 TO DATE



	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Adult	-	-	-	1	4	4	4	4	2	9	6	3	9	4	13	4	10	7
Awards	1	2	4	4	8	8	8	5	14	12	7	8	9	12	12	17	14	4
Conference	7	1	2	5	13	26	36	19	47	60	95	78	82	16	14	8	30	14
Consultations	1	1	-	-	2	8	2	2	5	7	5	3	7	7	3	4	14	4
Education	21	23	11	26	32	33	27	7	7	15	11	8	14	3	5	5	2	6
Enews	-	-	-	3	4	6	5	26	23	12	12	10	10	10	11	11	12	9
Governance	1	4	3	1	3	8	5	8	7	9	13	9	20	19	15	10	13	20
Guidelines	3	5	6	4	6	3	14	3	3	3	3	3	5	5	22	19	14	9
Industry	-	1	-	7	5	21	19	18	14	9	4	3	8	7	8	7	4	2
Membership	2	5	3	2	5	8	18	10	14	7	3	4	14	4	11	3	10	2

Social Media Reach

With over 3,000 followers, the BHIVA Facebook page is managed by the External Relations subcommittee and is used as a tool for promoting the work of the association. It carries updates and links to valuable resources produced by both BHIVA and other organisations within the HIV healthcare sector.

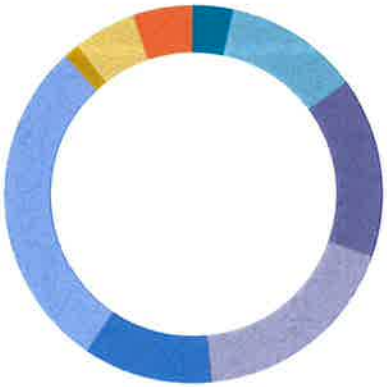
The BHIVA X account, also managed by the External Relations subcommittee, has continued to go from strength to strength again in 2022 and now has over 12,000 followers, an increase from over 10,000 followers in 2021. The group post regularly about the latest updates in the field of HIV and there were approximately 850,000 post impressions across the 12 months.

BHIVA's YouTube channel is used to host the latest resources, including a series of educational podcasts covering a range of hot topics in HIV. Following its set up in 2019, the YouTube channel has become an excellent resource for the broadcast of educational content including sessions from conferences and other training materials.

The BHIVA Instagram account has become increasingly active over the year and we now have 1,500 followers.

WHERE DID BHIVA INCOME COME FROM IN 2022?

This year, BHIVA generated income of £919,786 from a cross sections of sources including sponsorship from commercial companies from within the healthcare sector, registration fees through its education and training activities, journal income and members' subscriptions. A reclassification of income relating to the 2022 Conference on Retroviruses and Opportunistic Infections (CROI) has meant that BHIVA is reporting a slightly reduced income than originally forecast which has resulted in a small deficit. However, income continues to be widespread across a number of sources which ensures that BHIVA is not reliant on too few revenue streams.



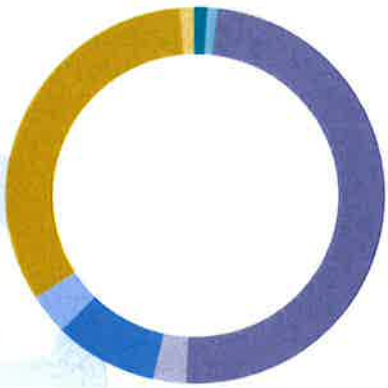
Investment Income	30,558
Memebership Subscriptions	106,480
Major Sponsorship Fees	142,700
HIV Medicine Royalty	166,044
Conference Registration Fees	101,312
Exhibition Stands	263,740
Other Conference Income	12,192
MAC AID Funds	50,000
Other	46,760

WHAT DID BHIVA SPEND MONEY ON IN 2022?

BHIVA spent £974,112 on core activities including the facilitation of its education and training initiatives including its two annual conferences, the delivery of the flagship Research Awards programme, the annual clinical audit and supporting its members with international partnership activities.

Following the reclassification of CROI income as mentioned above, this has left the charity with an immaterial deficit of £54,326. However, BHIVA has sufficient reserves available to cover this shortfall to ensure that the ongoing running costs of the charity are not affected. BHIVA continues to present itself as a going concern.

BHIVA continues to support a range of activities to align with its aims of advancing education and providing guidance for health care professionals in the field of HIV through its conferences, courses, guidelines and educational tools as well as supporting other organisations with its activities in disseminating the latest information and research.



Subsidies to Affiliated Associations and Donations	10,000
Research Awards	9,103
Conferences, Courses and Events	475,001
National Clinical Audit	27,488
HIV Medicine, Guidelines and Educational Tools	85,770
Website and App Development and Maintenance	35,295
Support Costs	319,101
Raising Funds	12,354

The work of the subcommittees

AUDIT AND STANDARDS SUBCOMMITTEE REPORT

Professor Fiona Burns,
Chair Audit & Standards Subcommittee

The BHIVA Audit and Standards Subcommittee carries out a routine audit programme involving clinical centres across the UK to assist in enhancing the quality of care provided by clinical services. The main project for the year was a national audit of routine monitoring of adults living with HIV throughout the COVID-19 pandemic. The audit aimed to get a national picture of how much routine HIV monitoring was disrupted by the pandemic, how clinical services worked to maintain care standards and current care delivery at the time of data collection (May–August 2022). The key findings and recommendations were presented at the BHIVA Autumn Conference in November 2022. Individual feedback reports have been circulated to participating services.

The 2023 BHIVA national audit will focus on engagement in HIV care. This will involve a survey of HIV clinical services' policies and practice to support care engagement. A case-note review of inpatients living with HIV, focussed on circumstances resulting in admission and in particular whether this was due to being undiagnosed or to being diagnosed but not in receipt of care. A case-note review of outpatients living with HIV who have not been seen for over a year, focussed on the circumstances prior to disengagement and the efforts made to re-engage them back into care.

There continues to be collaboration between BHIVA and the UK Health Security Agency to improve understanding of causes of death causes of death and preventable mortality among people with HIV, to promote quality of care at the end of life, and to monitor progress towards the UNAIDS/Fast Track City Initiative target of zero HIV-related preventable deaths. The 2021 findings were presented at the BHIVA Spring Conference in Newcastle in April 2023.

Also, in collaboration with the UK Health Security Agency, there has been a standard form introduced for reporting individuals diagnosed with advanced HIV. The aim is to reduce the negative impacts of late diagnosis through improved targeting and offering of HIV testing. There has been a pilot conducted in South East England, on the feasibility of reporting more detailed data, findings from this are being analysed.

The latest phase of work led by Prof R Harding towards implementing a Patient Related Outcome Measure (PROM) for assessing the quality of life among people with HIV has been published in *HIV Medicine*. This demonstrated the validity, reliability and responsiveness properties of the PROM tool, which is freely available for anyone to use. The Audit and Standards Subcommittee are reviewing the PROM tool for appropriateness to endorse and recommend for use in routine HIV outpatient settings.

BHIVA is collaborating with the British Psychological Society to update Standards for psychological support for adults living with HIV. The project group have undertaken a survey, with

members of involved organisations, about how they have used the existing standards and what changes they would like to see in an updated version. The responses have been collated and will feed in to the revision process. The project group aim to launch the revised standards around World Mental Health Day in October 2023.

A member of the Audit and Standards Subcommittee is leading a group which aims to conduct a qualitative survey of emergency departments which have introduced HIV/hepatitis B&C screening with information provided via leaflets/posters rather than requiring direct consent from every individual.

CONFERENCES SUBCOMMITTEE REPORT

Dr Nicola Mackie, Chair, Conferences Subcommittee

There was huge optimism (and fingers crossed...) that 2022 would be a year that we could return to some normality in terms of conferences. Our first organised events of the year were the ever-popular Best of CROI events. BHIVA has always provided feedback and review of the key research from the Conference on Retroviruses and Opportunistic Infections (CROI). Despite speculation that this conference would be 'in person', it ended up as an entirely virtual meeting. All credit to our working party who successfully negotiated the time differences and on-line platform to review the data. We decided to continue to provide the feedback via 2 pre-recorded webinars which took place in March. There was a live panel discussion with Q&A at each event after the recordings and the feedback from the 583 delegates who joined the webinars was excellent.

A huge amount of work from the Conferences Committee and the Medivents team went into the planning for what became our first face-to-face Spring Conference post the pandemic. This took place in Manchester over 3 days in April. More than 150 abstracts were submitted for review.

LIVE EVENT	BHIVA SPRING 2020	BHIVA BASHH SPRING 2021	BHIVA SPRING 2022
ABSTRACTS SUBMISSIONS	216	225	157
ABSTRACTS ACCEPTED	208	216	144
ORAL PRESENTATIONS	30	24	20
POSTER PRESENTATIONS	174	190	124

The conference attracted delegates from across the field of HIV including health care professionals, community representatives, academics and industry.

DELEGATES BY ROLE

The programme featured more than 40 speakers covering topics including pregnancy and HIV, COVID-19, management of HIV-related chronic pain and mortality, with plenary speakers also covering malignancy, antiretroviral therapy, opportunistic infections, and hepatitis B.

BHIVA also worked with other organisations to develop sessions including Fast Track Cities, Terrence Higgins Trust, UK Community Advisory Board (UK-CAB), Children's HIV Association (Chiva), George House Trust, Waverley Care and Supporting Women with HIV Information Network (SWIFT).

I was sadly unable to attend this conference but the overwhelming enthusiasm and delight at being able to attend a conference in person, meet old friends, hear unique research and state-of-the-art lectures was expressed by multiple attendees and the feedback around content was very positive.

In November 2022, we held our BHIVA Autumn Conference as a face-to-face meeting at the Royal College of Physicians in London. More than 294 delegates attended and there was a multidisciplinary theme with contributions from NHIVNA, HIVPA and CHIVA. This was a universal success and led to stimulating discussions. The day culminated in a celebration of World AIDS Day where we highlighted achievements in the field and heard (and sung along with) the Joyful Noise choir.

We look forward to 2023 and in particular the BHIVA Spring Conference which will be held for the first time in Gateshead.

I would like to take this opportunity to thank the Conferences Committee for their hard work and for the enthusiasm that they contribute to the planning of BHIVA's meetings and educational events.

EDUCATION AND SCIENTIFIC SUBCOMMITTEE REPORT

Dr Tristan Barber, Chair, Education and Scientific Subcommittee

A more usual service post the COVID-19 pandemic occurred for the Education and Scientific subcommittee in 2022. Dr Ashini Fox has been an excellent and supportive Vice Chair of the subcommittee, as well as committed and enthusiastic lead for the Education group.

Professor Alison Rodger was Chair of the BHIVA Research Awards Judging Panel for the first time in 2022. These Awards are supported by Gilead Sciences and BHIVA members, providing funding for research projects that will impact on the improvement of clinical care, management, health, and wellbeing of people living with HIV and on the prevention of HIV transmission. Applicants must be from UK based institutions. We awarded a total of £33,469.36 in 2022 to three successful applicants:

- Dr Douglas Fink
  Pilot study of prevalence and activity of anti-interferon auto antibodies in people living with HIV
- Dr Harriet Groom
  Mechanism for a novel determinant of viral load in individuals of African origin living with HIVt
- Dr Rachel MacCann
  Investigation of Interactions between the Microbiome and Inflammatory Phenotypes and their Relationship to Clinical Outcomes in People with HIV

The criteria for the Don Jeffries Research Award have been revised by the Committee and no award was made in the 2022 round. Professor Maryam Shahmanesh is Chair of the BHIVA Implementation Science Awards judging panel. These awards are supported by ViiV Healthcare. One successful application, Dr Daniella Chilton, was awarded £25,340 in 2022 for her pilot proposal 'Patient activation measure to support personalised care and pathway stratification in HIV services'.

Nine excellent research award applications have been received in 2023 and the Judging Panel takes place on 14th July. The Implementation Science Awards process has been harmonised with the BHIVA Research Awards and three implementation science applications have been received with judging also to take place on 14th July.

The BHIVA international Partnerships Working Group is chaired by Dr Douglas Fink, supported by Vice Chair Dr Nadia Ahmed. The BHIVA/Gilead International Exchange Fellowship Awards are designed to support the development of new links between BHIVA and institutions in low or middle income countries. Last awards were made in 2021 with one previous award holder withdrawing due to the Russian invasion of Ukraine making their planned Exchange sadly untenable. We plan to run a future round now that international travel looks more feasible, and have also re-established connections in Pakistan through Dr Clare van Halsema, who is hoping to develop some online training resources supported by BHIVA for delivery to teams on the ground in Pakistan.

In terms of education, Dr Ashini Fox has continued to develop our online resources, which we hope will be better supported by a planned wholesale reworking and investment of the BHIVA website. The ART guidelines were finally updated with an accompanying online resource delivered by Dr Laura Waters. Our online modules receive excellent feedback and continue to provide CPD and education for senior doctors, those in training and, also, our international members.

Professor Anna Maria Geretti provides a monthly summary of the BMJ journal Sexually Transmitted Infections for BHIVA Members Matters, and Dr Laura Waters also helpfully provides a summary of the *HIV Medicine* journal and other highlights.

HIV Medicine (https://onlinelibrary.wiley.com/journal/14681293) is the official journal of BHIVA with all eligible members getting complementary access. The Editors-in-Chief are Professor Caroline Sabin and Professor Jürgen Rockstroh, under whose leadership the Journal goes from strength to strength, achieving an impact factor of 3.094 in 2022.

Future plans

We are looking forward to continuing our work, including explaining the educational resources available to members through pod and webcasts, eLearning, and via the international group, to ensure a breadth and depth of education for all, including our community members and representatives. The Education and Scientific subcommittee will continue to be at the core of BHIVA activities, including in supporting conference delivery, supporting our membership with educational content, and obtaining funding to support our research, implementation science, and international educational exchange programmes.

EXTERNAL RELATIONS SUBCOMMITTEE REPORT

Dr Matthew Page, Chair, External Relations Subcommittee

The External Relations Subcommittee works in line with BHIVA's objectives to promote good practice in the treatment and care of HIV to its membership and external organisations.

Media

BHIVA continues to be a mainstream media commentator on HIV, responding to many media enquiries. BHIVA spokespeople were featured on a wide range of media outlets, including, Radio (BBC Radio 4, BBC Radio 5, City Radio, Virgin Radio Pride), television (Good Morning Britain, BBC News, ITN News for Channel 4) and print (Pink News, GB News, Mail online and Mail on Sunday)

BHIVA have campaigned for people living with HIV to be able to donate eggs or sperm – writing a joint letter with the National Aids Trust to the Advisory Committee on the Safety of Blood, Tissue and Organs (SaBTO). An opinion piece article was also published in the BMJ regarding this topic by BHIVA Executive Committee members (Nov 2022).

BHIVA have been working with Childrens HIV Association (CHIVA) and The Terrence Higgins Trust (THT) to support pregnant women and women with children in the Ukraine with access to care and medication.

We have promoted the external BHIVA Equity, Equality, Diversity and Inclusion (EEDI) review. We have successfully completed the rounds of media training for BHIVA Executive Committee in an attempt to expand our resource to rapid response news items.

Statements, Monkeypox response

Throughout the MonkeyPox outbreak BHIVA has produced rapid response documents for guidance of MonkeyPox. We also released a position statement on HIV, the law and the work of the clinical team and HIV and mixed infant feeding in 2022.

Website and BHIVA App

The subcommittee regularly maintains the BHIVA website. In 2022 BHIVA added a new HIV-2 e-learning module based on the guidelines. In 2023 we plan to update the security of our website.

Social Media

The committee continues to manage BHIVAs social media accounts, which include Twitter, Facebook and Instagram, as well as the *HIV Medicine* journal Twitter account. There continues to be growth in followers on all platforms, and they continue to be an effective method for dissemination of information, and communication with members and external organisations.

Looking Ahead – 2023 and onwards

- Media training for expert BHIVA members – ongoing – The next phase is opening up training opportunities to the External Relations Committee Members.
- BHIVA External Relations Campaign – BHIVA Unsung Heroes – we plan to promote this initiative at the annual Spring BHIVA Spring Conference 2023, and launch the campaign at the end of June 2023. The purpose is to recognise the achievements of those involved with HIV care, education and activism who may not usually have their work highlighted. Participants will be nominated by their peers.
- Reviewing ways to improve interaction with our social media outlets (e.g. short video clips [reels], and exploring the use of a regular short podcast).

GUIDELINES SUBCOMMITTEE REPORT

Dr Clare van Halsema, Chair, Guidelines Subcommittee

BHIVA produces guidelines on a comprehensive range of topics to support clinicians in managing HIV and its complications, as well as working with other organisations to produce co-badged guidelines on HIV prevention, testing and other areas.

The guidelines subcommittee has continued to meet virtually, permitting maximal participation across the UK and reducing travel and costs.

We continue to be responsive to need, issuing rapid guidance on mpox (formerly monkeypox) in terms of treatment in the context of HIV and vaccination for people at risk and rapid guidance on long acting, injectable antiretroviral therapy as it became available in February 2022. This has since been included in the full, 2022 update of our flagship guideline, the antiretroviral therapy guideline 2022.

Guideline production

BHIVA guideline on antiretroviral treatment for adults living with HIV-2, 2022: published in *HIV Medicine* in December 2022 (PMID 36504313) are a full update of the 2015 guideline and include guidance on injectable antiretroviral therapy (cabotegravir/rilpivirine), following rapid guidance in 2022. The guideline is accompanied by a non-technical summar of the guideline and a short, separate non-technical summary of injectable ART. There is an accompanying webcast and the e-learning working group launched an e-learning module to assist clinicians with continuing professional development.

Discussion on updating the malignancy guidelines led to a decision, rather than write a full update, to signpost the high quality European guidelines on opportunistic infection prophylaxis from EACS

and Kaposi sarcoma from the European Society of Medical Oncology. A non-technical summary has been commissioned and is in progress.

Guidelines under review in 2022, pending publication at the end of the year are:

- Viral hepatitis
- Immunisation
- Monitoring
- Further chapters of the opportunistic infection guideline, including non-tuberculous mycobacteria, central nervous system infections and pyrexia of unknown origin.
- HIV in pregnancy

A rapid guideline on assumed consent for opt-out blood-borne virus testing in emergency departments was written, with consultation planned for 2023, to support the current, nationally funded roll out of testing in areas of extremely high HIV prevalence and to support departments undertaking this.

Abridged versions of guidelines are published on the BHIVA guidelines app.

Rapid guidelines do not undergo consultation, but feedback is invited using a form alongside the guidelines on the BHIVA website.

Position statements

In 2022, the full position statement on HIV, the law and the work of the clinical team was published, led by Prof Matt Phillips. It went to consultation before publication due to its importance to clinical teams.

There is a consensus statement on response to mpox outbreak, published in collaboration with partners including BASHH, UK-CAB and the Terrence Higgins Trust.

The HIV in pregnancy guideline writing group published an interim statement on mixed infant feeding, due to be reviewed and incorporated into the full guidelines on HIV in pregnancy in 2023.

NICE accreditation

We hold NICE accreditation for our guideline process until December 2023, having been given extension while NICE re-evaluates their system of accreditation. We await information from NICE on this. We continue to follow accredited processes as set out in the guidelines development manual to ensure high standards, uniform structure and freedom from conflict of interest.

Accessibility

Led by the community representatives on the BHIVA guidelines subcommittee, Ben Cromarty and Nicoleta Policek, readability of the non-technical summaries has been reviewed using readability scores and some updated for appropriate accessibility.

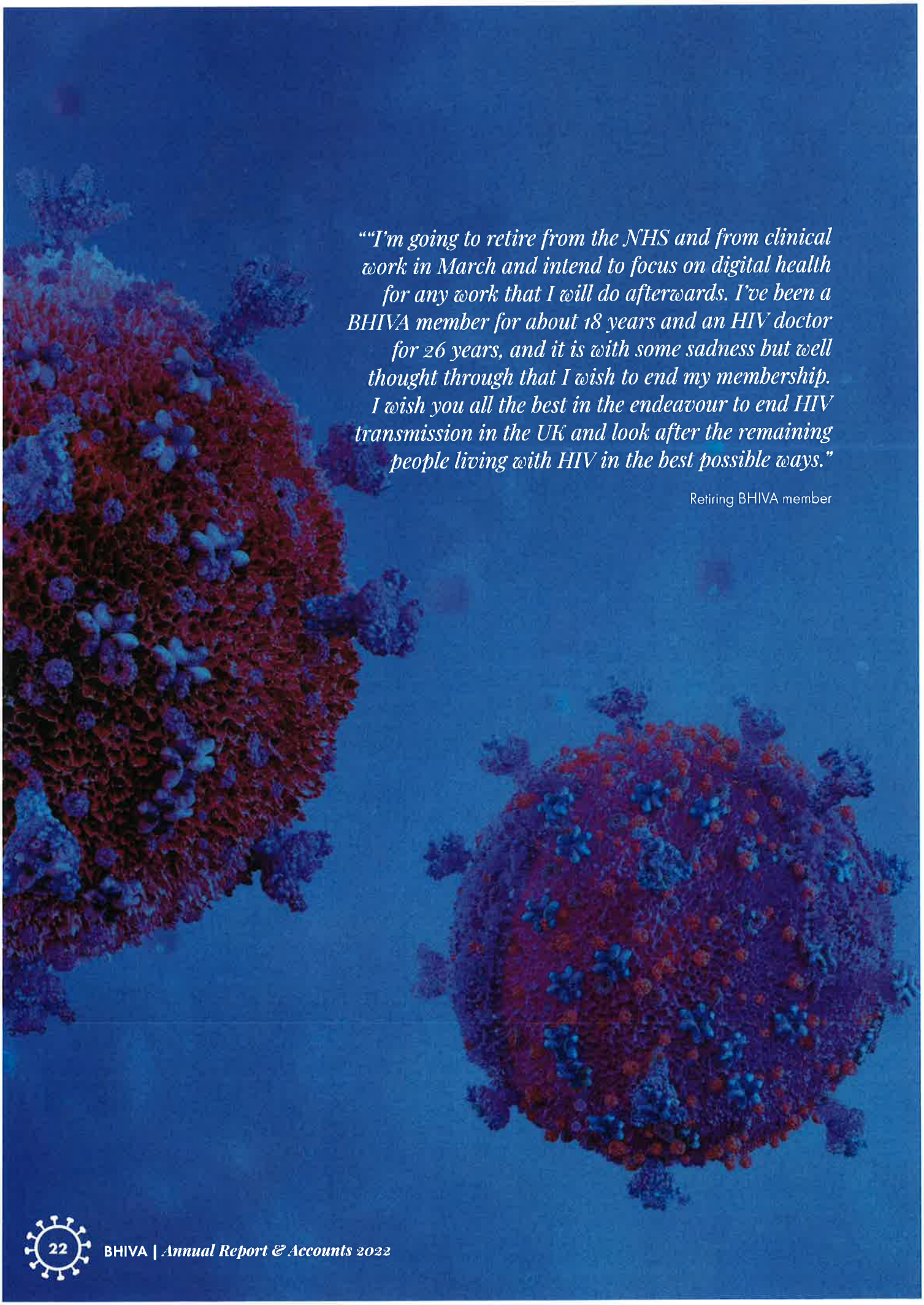
2023 plans and actions so far

In 2023 progress on opportunistic infection guideline includes consultation and publication of NTM and pyrexia of unknown origin chapters, plus anticipation of completion of the CNS OI and pulmonary OI chapters. BHIVA has endorsed the cryptococcosis guidelines of the European Confederation of Medical Mycology, due to be published soon and relevant to high- and lower-income settings.

We work towards publication of the pre-exposure prophylaxis guideline with our partner organisation BASHH leading on this co-badged work. BASHH is also leading on the fully updated sexual and reproductive health guideline; immunisation guideline. The tuberculosis guideline is due for full update and work will start in 2023.

"Thank you BHIVA for the regular COVID updates."

Current BHIVA member



"I'm going to retire from the NHS and from clinical work in March and intend to focus on digital health for any work that I will do afterwards. I've been a BHIVA member for about 18 years and an HIV doctor for 26 years, and it is with some sadness but well thought through that I wish to end my membership. I wish you all the best in the endeavour to end HIV transmission in the UK and look after the remaining people living with HIV in the best possible ways."

Retiring BHIVA member

BHIVA membership annual report to 31 October 2022

BHIVA membership numbers are reported in October of each year. Membership in 2022 (754) showed a small increase from the previous year.

The small increase in members may be as a result of the full return to face to face conferences following the pandemic as membership entitles members to reduced registration fees. The BHIVA Journal *HIV Medicine* has also increased from 10 issues per year to 12 which may also have impacted on membership numbers. Retired consultants are retaining membership for a period after retiring, showing loyalty to BHIVA. The BHIVA international membership category, introduced in 2020 has been successful and BHIVA will continue to promote this.

BHIVA membership benefits include:

- Discounted registration for BHIVA conferences (CPD approved)
- Access to the BHIVA website members' area
- Voting rights for BHIVA Officers and Executive Committee elections (eligibility subject to joining date and membership category)
- Eligibility to stand for election to the BHIVA Executive Committee (eligibility subject to joining date)
- Free subscription to the BHIVA journal, *HIV Medicine* (12 issues p.a. and online access)
- Access to online e-learning modules
- Free subscription to the BHIVA Members Matters email (up to 12 issues p.a.)
- Free subscription to HIV Treatment Bulletin, provided by HIV i-Base (by email)
- BHIVA nominations for Clinical Excellence Awards (eligible UK-based consultant members only)
- Access to BHIVA Research Awards and other scholarships and bursaries
- Access to BASHH/BHIVA/FSRH Mentoring Scheme
- Membership subscription fees approved for income tax relief
- Access to online webcasts

Membership fee income is vital to the association, both in terms of securing funding which helps to contribute towards the work of BHIVA and in reinforcing the independence of the association.

Members are drawn from across the specialty and include healthcare and allied healthcare professionals, as well as representatives from the pharmaceutical industry and the community of people living with HIV. Following the creation in 2016 of a membership category for community, BHIVA has seen a significant rise in community membership and participation in the association's activities. These strong links with the community have also helped to improve community led participation at conferences and guidelines.

MEMBERS AT MEMBERSHIP YEAR END (31 OCTOBER)[1] FROM 2010 TO 2022

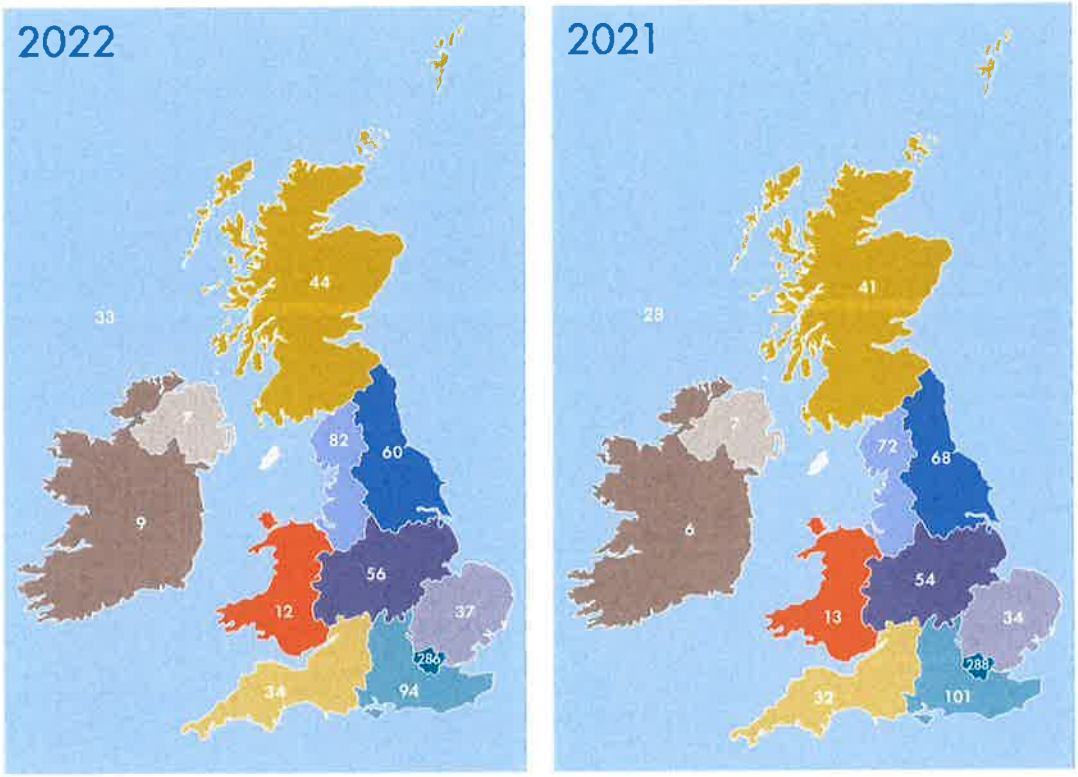
MEMBERSHIP CATEGORY	2022		TREND	2021	
	No	%	%	No	%
Consultant	364	48%	↓	364	49%
Non-consultant	196	26%	↓	201	27%
BHIVA Affiliated[3]	73	10%	↑	70	9%
BHIVA UK-CAB	36	5%	↓	42	6%
BHIVA International (HMIC/ LMIC)[4]	31	4%	↑	23	3%
Life member[5]	20	3%	↑	20	2%
Retired consultant	16	2%	=	16	2%
Annual member[6]	11	1%	=	2	1%
Medical student	7	1%	=	6	1%
Total BHIVA members	**754**	**100%**	**[+1.34%]**	**744**	**100%**

SUMMARY OF MEMBERS NOT RENEWING BY 31 OCTOBER 2022

MEMBERS NOT RENEWED	2022	2021	2020	2019	2018	2017	2016	2015	2014	2013	2012	2011
Total cancellations	18	19	39	20	23	29	40	39	33	40	38	18
Not renewed (lapsed)	69	94	212	101	149	116	112	109	79	99	79	109
Total	**87**	**113**	**251**	**121**	**172**	**145**	**152**	**148**	**112**	**139**	**117**	**127**

[3] CHIVA (consultant and non-consultant), Dieticians in HIV, HIVPA, NMHIVNA, BHIVA and SSHA
[4] Includes high-income countries (HMIC) and low and middle-income (LMIC) countries
[5] Prof J Anderson, Dr D Asboe, Prof F Boné-Sinousi, Dr P Bose Roy, Dr J Bingham, Dr R Brettle, Dr D Churchill, Mr S Collins, Lord Fowler, Prof B Gazzard, Prof M Johnson, Prof C Leen, Prof S Lucas, Prof C Orkin, Dr A Pallikkuth, Dr A Pozniak, Mr L Russell-Moyle MP, Dr M Tenant-Flowers, Dr E Williams, Dr I Williams
[6] Includes prize show winners, UK-CAB representatives and BHIVA Audit Facilitator

MEMBERS WORK REGION 2022 v 2021



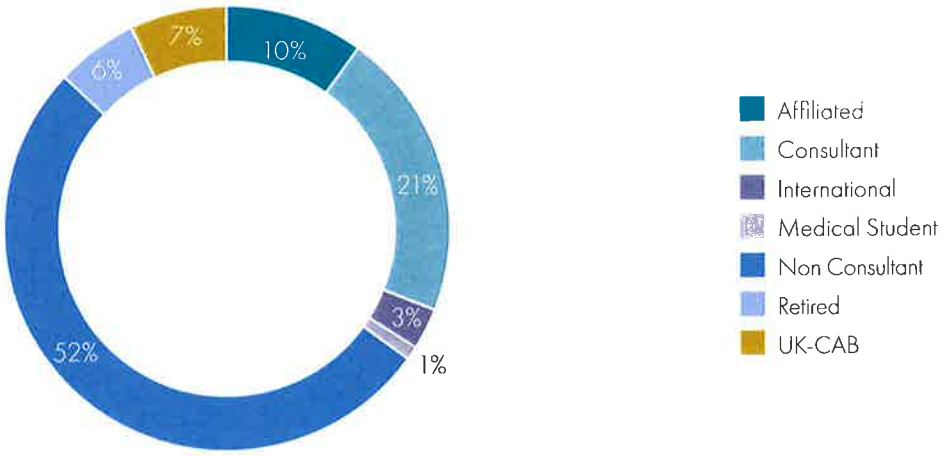
As ever, BHIVA is disappointed when members leave the association but during the year 2022 there was a lower number (87) of members not renewing than has been usual in previous years, most likely due to redeployment or retirement from the HIV sector. Of those who contacted BHIVA to cancel their subscription, some generous remarks have been recorded:

- Have now retired from HIV clinical practice so will quietly retire from BHIVA too. All the best!
- I am leaving the speciality to focus on things at home.
- I have retired and I will no longer renew my subscription when due next year. Thank you for your professional support over the many years I have worked in the HIV specialty.

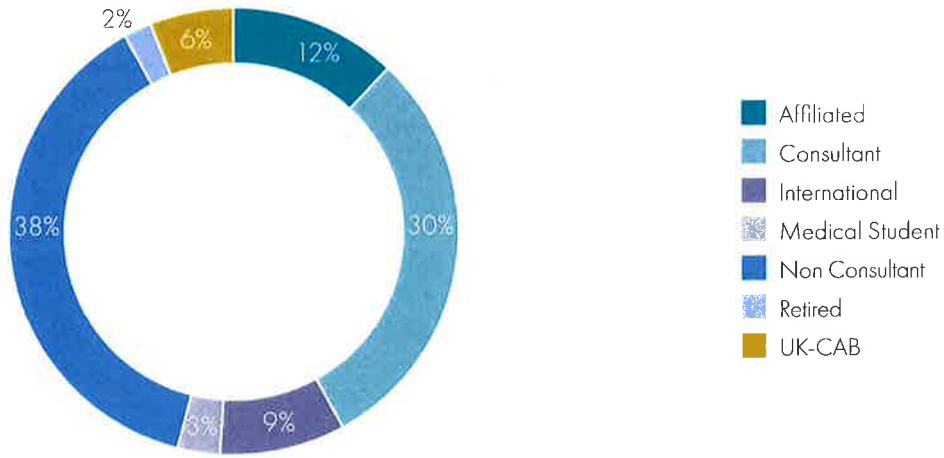
REASON FOR CANCELLATION

REASON FOR CANCELLATION	2022		TREND (%)	2021	
	NO	%		NO	%
Retired	6	33%	↑	6	32%
No reason given/Other	5	28%	↓	6	32%
No longer working in HIV	3	17%	↓	5	26%
Parental leave	3	17%	↑	1	5%
Sabbtical leave	1	5%	↑	0	0%
Financial pressures	0	0%	↓	1	5%
Total cancelled members	**18**	**100%**		**19**	**100%**

GRAPH SHOWS THE PREVIOUS MEMBERSHIP CATEGORY OF THOSE 87 MEMBERS WHO LEFT THE ASSOCIATION DURING 2022

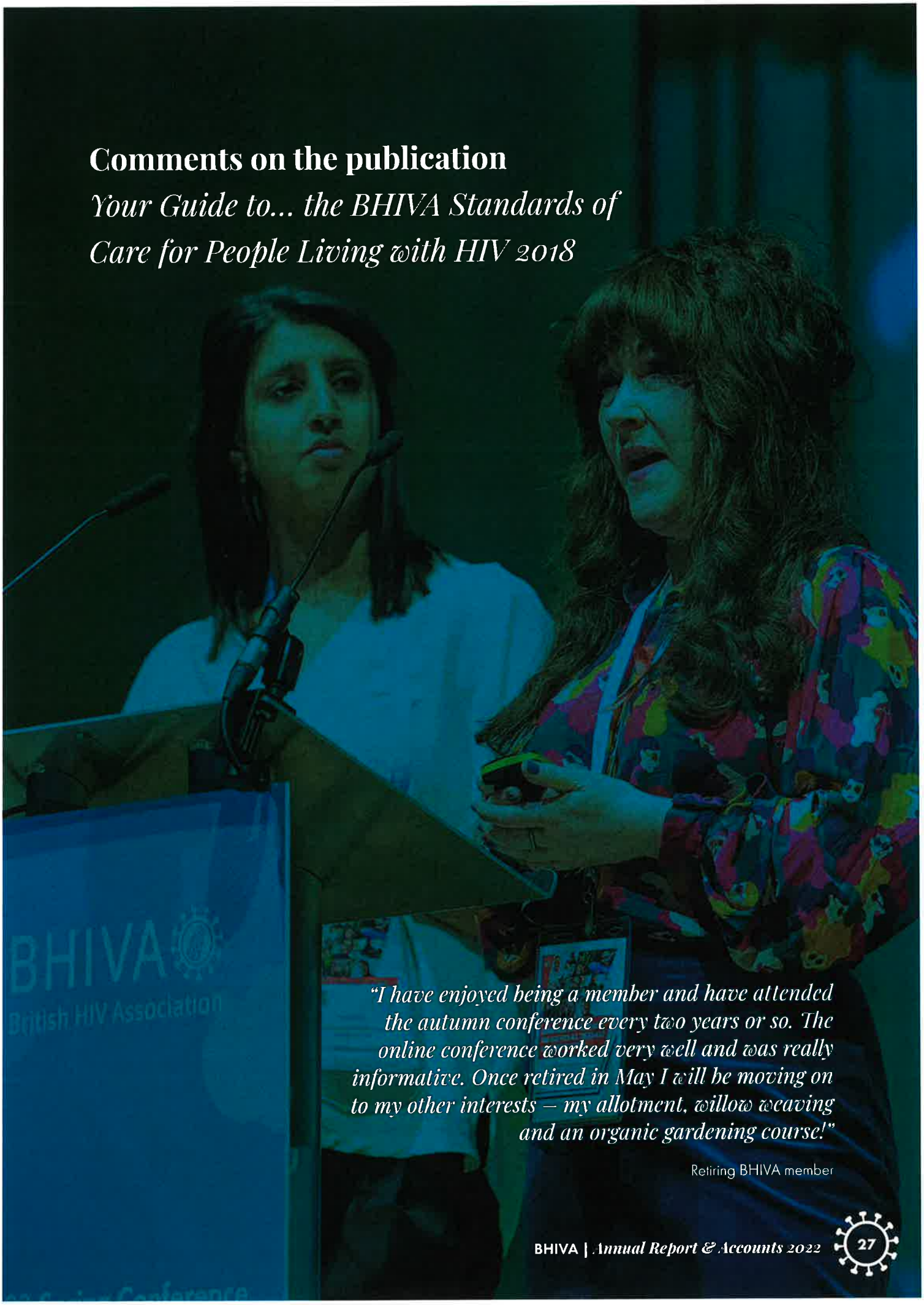


COMPARED TO 113 MEMBERS WHO LEFT THE ASSOCIATION DURING 2021



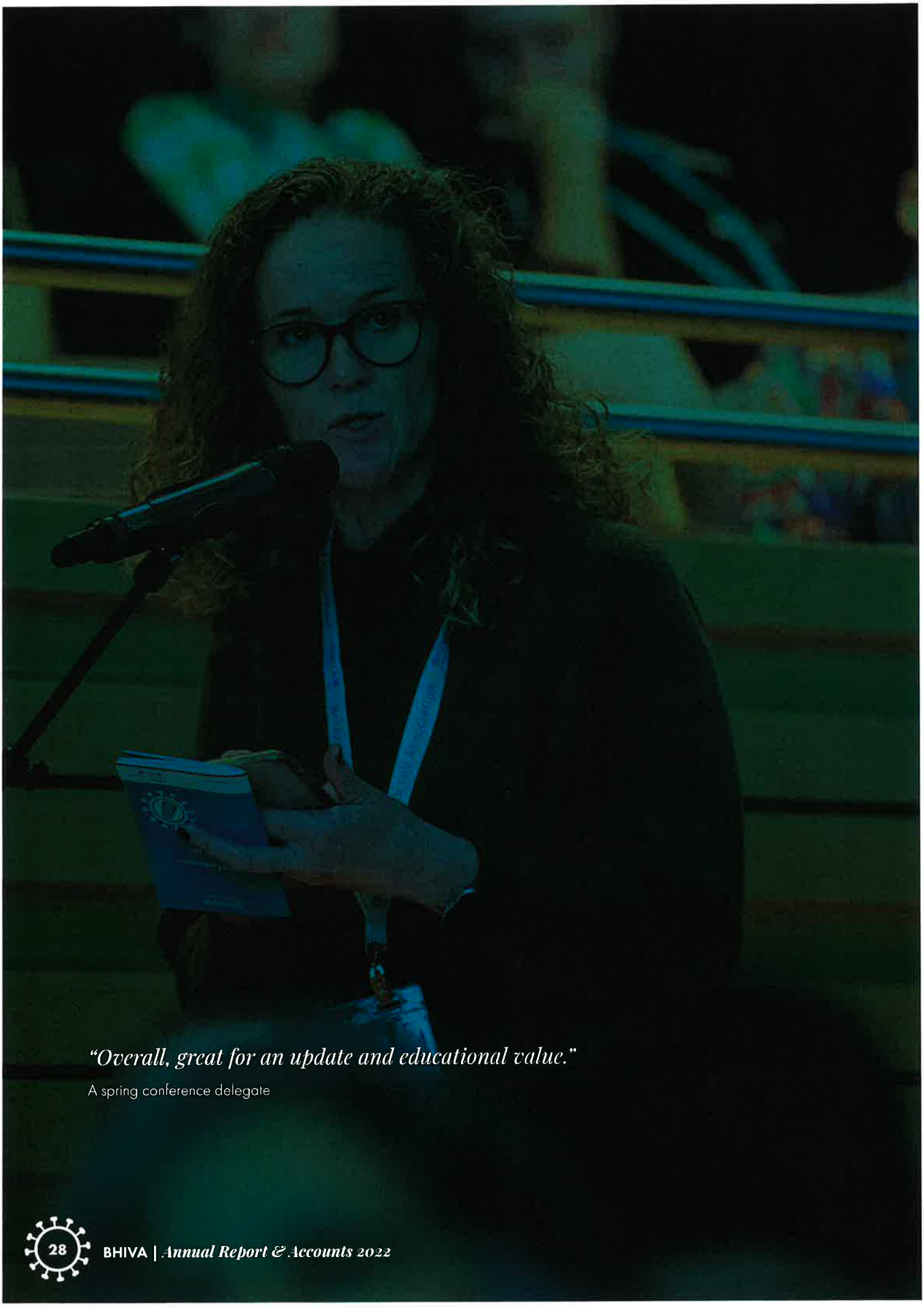
Comments on the publication

Your Guide to... the BHIVA Standards of Care for People Living with HIV 2018



"I have enjoyed being a member and have attended the autumn conference every two years or so. The online conference worked very well and was really informative. Once retired in May I will be moving on to my other interests – my allotment, willow weaving and an organic gardening course!"

Retiring BHIVA member



"Overall, great for an update and educational value."

A spring conference delegate

Structure, governance and management

BHIVA is a Charitable Incorporated Organisation (as of 12 December 2016) governed by its Constitution and registered as a charity with the Charity Commission.

BHIVA is a membership association currently governed by a Board of 14 elected trustees who make up the Executive Committee including four officer posts of Chair, Vice Chair, Honorary Secretary and Honorary Treasurer.

BHIVA endeavours to ensure that the specialty is well represented on the Executive Committee to ensure that local challenges and issues that affect all those working within the field are addressed UK wide. Trustees are drawn from across the HIV sector and include clinicians and other healthcare professionals, academics, a representative from the UK-CAB as well as a trainee Doctors' representative and a new Consultant Doctors' representative.

The methods adopted for the recruitment and appointment of new trustees are as follows:

- A list of nominees is forwarded to all eligible members of the association with a request for their selections to fill the vacancies
- The election scrutineer will normally be the immediate past chair of the association or another person nominated by the Executive Committee
- The results of the election are declared at the Annual General Meeting.

Nominees are required to complete a trustee declaration form, a conflict-of-interest form and a skills assessment form at time of nomination. All members of the Executive Committee give their time voluntarily and receive no paid benefits from the charity.

On joining the BHIVA Executive Committee, trustees are provided with an induction pack that includes an outline of the role and expectations, a copy of the constitution, relevant policy and administration documents required to carry out the role as well as Charity Commission information about the responsibilities of becoming a charity trustee. Each new trustee also undertakes a tailored induction programme and is offered mentoring support from existing trustees.

Beyond their governance duties, trustees are expected to take an active role in the work of the charity according to their expertise through engagement with at least one of the five specialist subcommittees. Each subcommittee manages the activities of the charity and is led by a chair and vicechair. Under the subcommittees also sit a variety of specialist working and writing groups, led by and elected or appointed BHIVA member, who have specific responsibilities and bring a depth of knowledge and expertise to the subcommittees.

The trustees hold quarterly Executive Committee meetings to review the activities of the charity and consider its plans.

To retain its position at the forefront of HIV care, BHIVA is also affiliated with all the other key charities and associations who work within the field including:

- Children's HIV Association of UK and Ireland (Chiva)
- British Dietetic Association HIV Care Specialist Group (BDA)
- HIV Pharmacy Association (HIVPA)
- National HIV Nurses Association (NHIVNA)
- HIV Trainee Association (HIVTA)
- Rehabilitation in HIV Association (RHIVA)
- Society of Sexual Health Advisers (SSHA)
- UK Community Advisory Board (UK-CAB)

BHIVA has developed important links with other organisations, encouraging exchange of information between national and international centres including:

- British Psychological Society (BPS)
- Federation of Infection Societies (FIS)
- International AIDS Society (IAS)
- European AIDS Clinical Society (EACS)
- Medical Research Council (MRC)
- National AIDS Trust (NAT)
- Terrence Higgins Trust (THT)
- University of Liverpool Drug Interaction website.

Governance review update

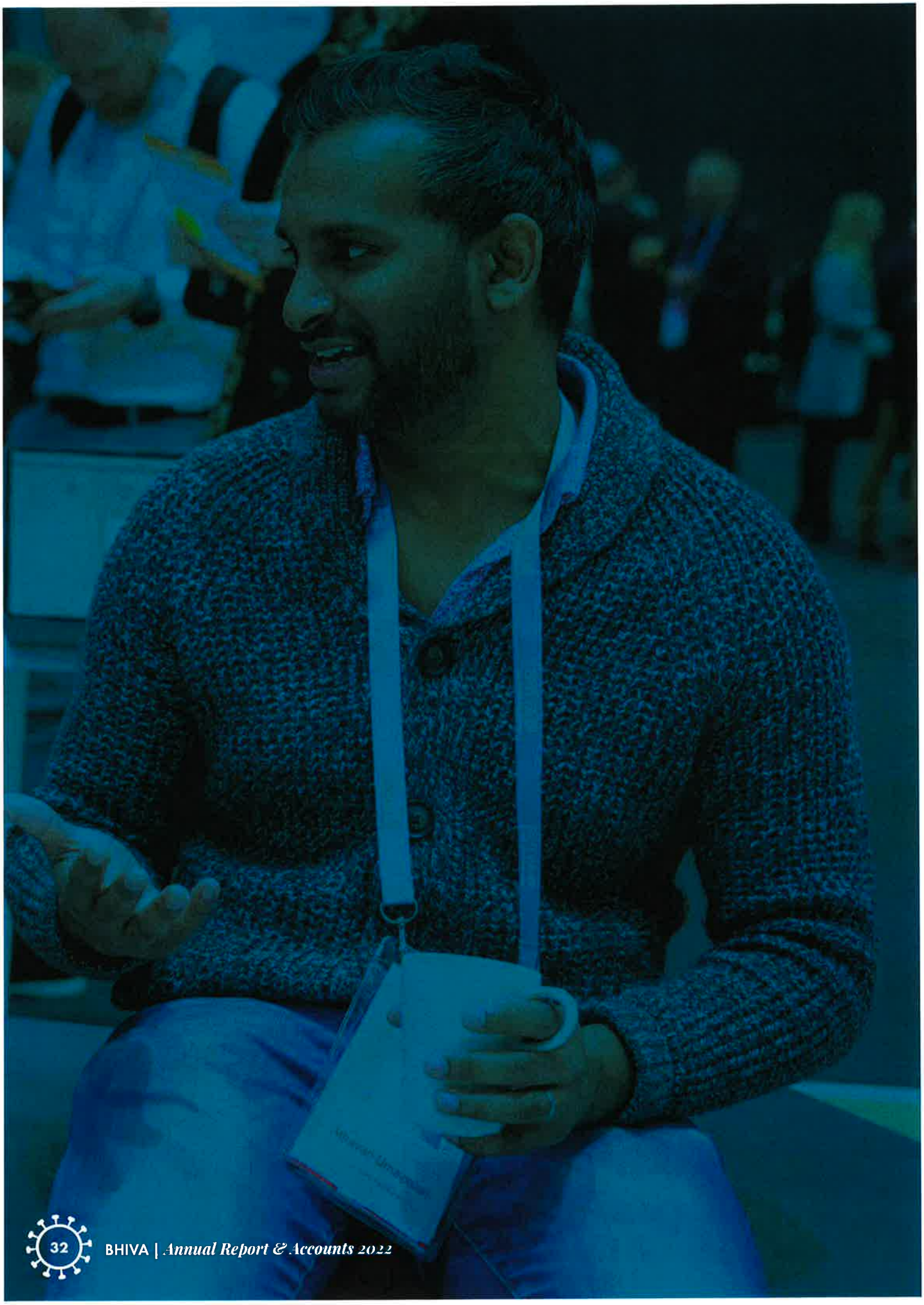
Following the commissioning of a governance review in August 2018, the Executive Committee agreed on a development strategy to implement those recommendations it perceived to be fundamental to achieving the charity's overall aims and objectives.

A thorough appraisal of the charity's policies and procedures has been carried out. An updated set of policies and procedures have been drafted and ratified by the trustees and are reviewed and updated as necessary on an annual basis.

Following the successful appointment of a financial trustee, our strategic review continues as the strategic review committee move on to scope out the strategic goals of the charity for the next 5 years.

"I have recently become a BHIVA member and have found the e-learning modules really useful."

New BHIVA member



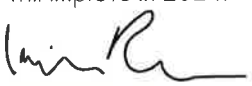
Financial review

BHIVA has faced some financial challenges over the last year, which are largely related to the current economic circumstances.

Rising inflation has fed through to increased costs for some of our charitable activities, in particular conference venue hire. The main source of income remains pharmaceutical company sponsorship, while other sources of income have remained stable or declined slightly. There has been a reasonably large reduction in the overall position for BHIVA assets, almost entirely accounted for by a sharp reduction in the value of investments held with Rathbones. This has also resulted in a decrease in the income from investments. Broadly, the reduction in investment value is in line with wider market conditions with poorer performance and volatility as a consequence of the high interest, high inflation environment, as well as the war in Ukraine. The policy of not investing in fossil fuels and pharmaceutical companies has meant that the BHIVA portfolio has performed a little below the benchmark comparator.

Nevertheless, the overall financial position remains reasonably in balance year on year, with good reserves. Over the coming year, the officers will be focussing more on cost control and we aim to develop a strategy to look at other sources of revenue, while maximising current sources. Additional expenditure for the coming year is planned to cover the new "Laura Waters community award", the development of a new website and development of a BHIVA strategy for the future. It is likely that some of the reserve funds will be used to cover these costs.

The major source of risk for future income remains unforeseen changes in pharmaceutical company funding. Investment performance will be little changed from 2022 to 2023, but while there is some uncertainty, it is predicted that conditions will improve in 2024.



Dr Iain Reeves
BHIVA Honorary Treasurer
19/01/24

Statement of Directors' and Trustees' responsibilities

The trustees are responsible for preparing a trustees' annual report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales requires the charity trustees to prepare financial statements for each year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, of the charity for that period. In preparing the financial statements, the trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- Observe the methods and principles in the applicable Charities SORP;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures that must be 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 in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the applicable Charities (Accounts and Reports) Regulations, and the provisions of the Trust deed. They are also responsible for safeguarding the assets of the charity and taking reasonable steps for the prevention and detection of fraud and other irregularities.

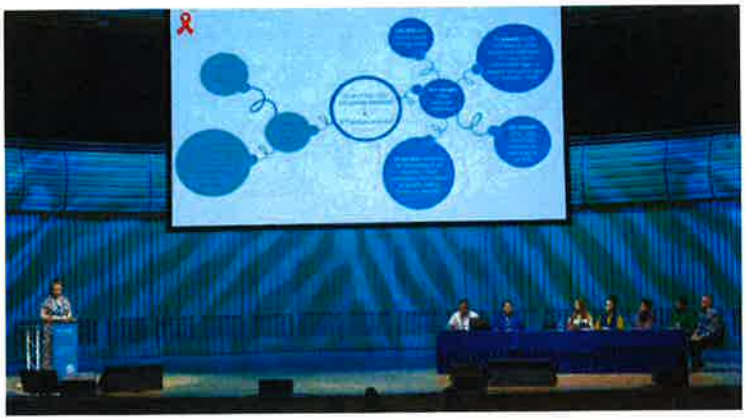
The trustees are responsible for the maintenance and integrity of the charity and financial information included on the charity's website in accordance with legislation in the United Kingdom governing the preparation and dissemination of financial statements.

TRUSTEE DECLARATION

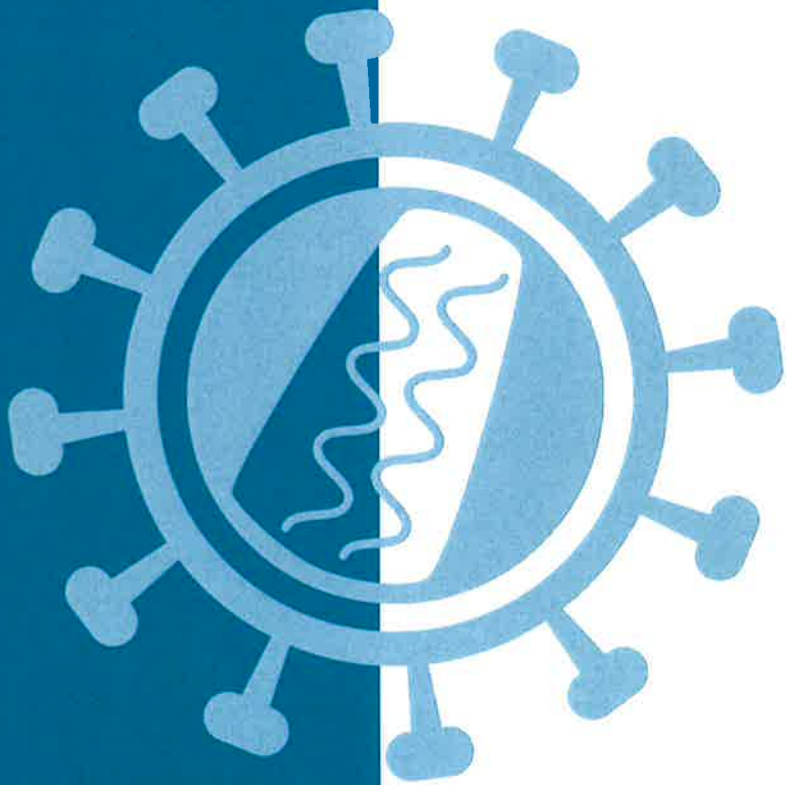
I declare that:

- I am over age 18.
- I am not an undischarged bankrupt.
- I have not previously been removed from trusteeship of a charity by a Court or the Charity Commission.
- I am not under a disqualification order under the Company Directors' Disqualification Act 1986.
- I am, in the light of the above, not disqualified by the Charities Act 1993 (section 72) from acting as a charity trustee.
- I undertake to fulfil my responsibilities and duties as a trustee of the British HIV Association (BHIVA) in good faith and in accordance with the law and within the objects of BHIVA.

I do not have any financial interests in conflict with those of BHIVA (either in person or through family or business connections) except those that I have formally notified in a declaration of interest statement. I will specifically notify any such interest at any meeting where trustees are required to make a decision, which affects my personal interests, and I will absent myself entirely from any decision on the matter and not vote on it.



Financial Statements for the year ended 31 December 2022



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REFERENCE AND ADMINISTRATIVE DETAILS OF THE CIO, ITS TRUSTEES AND ADVISERS FOR THE YEAR ENDED 31 DECEMBER 2022

Trustees during the year ended 31 December 2022

(Names appear in alphabetical order)

Dr T Barber, Honorary Secretary (appointed 25 November 2022)
Dr D Chadwick (re-appointed 25 November 2022)
Dr D Clutterbuck (appointed 22 November 2020)
Dr A Fox (appointed 22 November 2020)
Professor Y Gilleece Chair (appointed 25 November 2022)
Miss J Josh, UK-CAB Community Representative (appointed 17 September 2019)
Dr N Larbalestier (appointed 22 November 2020)
Dr N Mackie Vice Chair (appointed 25 November 2022)
Dr R Metcalfe, New Consultant Doctors' Representative (appointed 22 November 2020)
Dr M Page, (retired as Trainee Doctors' Representative November 2021)
Dr I Reeves, Honorary Treasurer (appointed 22 November 2020)
Professor Caroline Sabin Editor-in-Chief, *HIV Medicine*
Dr J Underwood (re-appointed 25 November 2022)
Paula Bibby, Finance Trustee (appointed November 2021)

Charity registration number

1170707

Registered office and operational address

BHIVA secretariat, Medivents Ltd, Devonshire Business Centre, Works Road, Letchworth, Hertfordshire SG6 1GJ

Auditors

Moore Kingston Smith LLP, 4 Victoria Square, St Albans, Hertfordshire AL1 3TF

Bankers

National Westminster Bank plc, 190 The Broadway, Muswell Hill, London N10 3SD
Santander Bank, Bootle, Merseyside L30 4GB

Solicitors

Stone King LLP, Boundary House, 91 Charterhouse Street, London EC1M 6HR

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS AND TRUSTEES OF BRITISH HIV ASSOCIATION

Opinion

We have audited the financial statements of British HIV Association (the 'parent CIO') and its subsidiary (the 'group') for the year ended 31 December 2022 which comprise the Consolidated Statement of Financial Activities, the Consolidated and parent CIO Balance Sheets, the Consolidated Cash Flow Statement and notes to the financial statements, including 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 group's and the parent CIO's affairs as at 31 December 2022 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006 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 CIO 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 group's and CIO'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 contained within the annual report. 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.

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 course of 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 themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

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

Matters on which we are required to report by exception

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

We have nothing to report in respect of the following matters where the Companies Act 2006 and the Charities Act 2011 require us to report to you if, in our opinion:

- the parent CIO has not kept adequate and sufficient accounting records, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent CIO's financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies exemption in preparing the Trustees' Annual Report and from preparing a strategic report.

Responsibilities of trustees

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

In preparing the financial statements, the trustees are responsible for assessing the group and parent CIO's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the group or parent CIO 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 the Companies Act 2006 and section 152 of the Charities Act 2011 and report in accordance with those Acts.

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 group and parent CIO'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 group and parent CIO'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 group or parent CIO 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.
- Obtain sufficient appropriate audit evidence regarding the financial information of the entities or business activities within the group to express an opinion on the consolidated financial statements. We are responsible for the direction, supervision and performance of the group audit. We remain solely responsible for our audit report.

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 are capable of detecting 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 CIO.

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the CIO and considered that the most significant are the Companies Act 2006, 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 CIO 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 CIO's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and, in respect of the consolidated financial statements, 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 CIO's members and trustees those matters which 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 CIO, the CIO's members, as a body, and the CIO's trustees, as a body, for our audit work, for this report, or for the opinion we have formed.

Silvia Vitiello (Senior Statutory Auditor)
for and on behalf of Moore Kingston Smith LLP, Statutory Auditor

Moore Kingston Smith LLP
Chartered Accountants
Statutory Auditors
4 Victoria Square
St Albans
Hertfordshire
AL1 3TF

Date: 31.01.24

Moore Kingston Smith LLP are eligible to act as auditors in terms of section 1212 of the Companies Act 2006.

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

	Note	Unrestricted funds 2022 £	Restricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
Income from:					
Donations and grants	2	**480**	**43,780**	**44,260**	30,400
Charitable activities	3	**783,468**	**61,500**	**844,968**	802,649
Investments	4	**30,558**	-	**30,558**	35,884
Total income		**814,506**	**105,280**	**919,786**	868,933
Expenditure on:					
Raising funds		**12,354**	-	**12,354**	12,993
Charitable activities	5	**941,049**	**20,709**	**961,758**	837,036
Total expenditure		**953,403**	**20,709**	**974,112**	850,029
Net (expenditure)/income before net gains on investments		**(138,897)**	**84,571**	**(54,326)**	18,904
Net gains on investments	9	**(312,918)**	-	**(312,918)**	226,158
Net (expenditure)/income before taxation		**(451,815)**	**84,571**	**(367,244)**	245,062
Taxation	7	-	-	-	(3,148)
Net income/(expenditure) after taxation		**(451,815)**	**84,571**	**(367,244)**	241,914
Transfers between funds		-	-	-	-
Net movement in funds		**(451,815)**	**84,571**	**(367,244)**	241,914
Reconciliation of funds:					
Total funds brought forward		**2,345,833**	**37,421**	**2,383,254**	2,141,340
Net movement in funds		**(451,815)**	**84,571**	**(367,244)**	241,914
Total funds carried forward		**1,894,018**	**121,992**	**2,016,010**	2,383,254

The Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 49 to 62 form part of these financial statements.

CIO STATEMENT OF FINANCIAL ACTIVITIES AS AT 31 DECEMBER 2022

	Note	Unrestricted funds 2022 £	Restricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
Income from:					
Donations and grants	2	**480**	**43,780**	**44,260**	30,400
Charitable activities	3	**721,371**	**61,500**	**782,871**	769,463
Investments	4	**30,558**	-	**30,558**	35,884
Total income		**752,409**	**105,280**	**857,689**	835,747
Expenditure on:					
Raising funds		**12,357**	-	**12,357**	12,993
Charitable activities	5	**798,558**	**20,709**	**819,267**	820,420
Total expenditure		**810,915**	**20,709**	**831,624**	833,413
Net (expenditure)/Income before net gains on investments	8	**(58,506)**	**84,571**	**26,065**	2,334
Net gains on investments		**(312,918)**	-	**(312,918)**	226,158
Net (expenditure)/Income before taxation		**(371,424)**	**84,571**	**(286,853)**	228,492
Taxation		-	-	-	-
Net income/(expenditure) after taxation		**(371,424)**	**84,571**	**(286,853)**	228,492
Transfers between funds		-	-	-	-
Net movement in funds		**(371,424)**	**84,571**	**(286,853)**	228,492
Reconciliation of funds:					
Total funds brought forward		**2,332,063**	**37,421**	**2,369,484**	2,140,992
Net movement in funds		**(371,424)**	**84,571**	**(286,853)**	228,492
Total funds carried forward		**1,960,639**	**121,992**	**2,082,631**	2,369,484

The notes on pages 49 to 62 form part of these financial statements.

CONSOLIDATED BALANCE SHEET
AS AT 31 DECEMBER 2022

	Note		2022 £		2021 £
Fixed assets					
Tangible assets	8		**32**		218
Investments	9		**1,509,302**		1,870,280
			1,509,334		1,870,498
Current assets					
Debtors	10	**296,595**		456,363	
Cash and cash equivalents		**540,946**		561,943	
		837,541		1,018,306	
Creditors: amounts falling due within one year	11	**(330,865)**		(505,550)	
Net current assets			**506,676**		512,756
Total assets less current liabilities			**2,016,010**		2,383,254
Total net assets			**2,016,010**		2,383,254
Charity funds					
Restricted funds	12		**121,992**		37,421
Unrestricted funds	12		**1,894,018**		2,345,833
Total funds			**2,016,010**		2,383,254

The financial statements were approved and authorised for issue by the Trustees and signed on their behalf by:

Dr I Reeves
Honorary Treasurer

Date: 01/11/2024

The notes on pages 49 to 62 form part of these financial statements.

CIO BALANCE SHEET
AS AT 31 DECEMBER 2022

	Note		2022 £		2021 £
Fixed assets					
Tangible assets	8		**32**		218
Investments	9		**1,509,302**		1,870,281
			1,509,334		1,870,499
Current assets					
Debtors	10	**436,519**		454,593	
Cash and cash equivalents		**464,846**		545,992	
		901,365		1,000,585	
Creditors: amounts falling due within one year	11	**(328,068)**		(501,600)	
Net current assets			**573,297**		498,985
Total assets less current liabilities			**2,082,631**		2,369,484
Total net assets			**2,082,631**		2,369,484
Charity funds					
Restricted funds			**152,449**		37,421
Unrestricted funds			**1,930,182**		2,332,063
Total funds			**2,082,631**		2,369,484

The financial statements were approved and authorised for issue by the Trustees and signed on their behalf by:

Dr I Reeves
Honorary Treasurer

Date: 01/11/2024

The notes on pages 49 to 62 form part of these financial statements.

CONSOLIDATED STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 DECEMBER 2022

	Note	2022 £	2021 £
Cash flows from operating activities			
Net cash used in operating activities	1	**(99,612)**	(24,381)
Cash flows from investing activities			
Dividends and interests received from investments		**30,558**	35,884
Purchase of tangible fixed assets		**-**	-
Proceeds from sale of listed investments		**80,559**	191,862
Purchase of listed investments		**(32,502)**	(203,862)
Net cash provided by investing activities		**78,615**	23,884
Change in cash and cash equivalents in the year		**(20,997)**	(497)
Cash and cash equivalents at the beginning of the year		**561,943**	562,440
Cash and cash equivalents at the end of the year	15	**540,946**	561,943

The notes on pages 49 to 62 form part of these financial statements.

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

1. ACCOUNTING POLICIES

1.1 BASIS OF PREPARATION OF FINANCIAL STATEMENTS

The financial statements have been prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and with the Companies Act 2006, The Charities Act 2011 and follows the Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and the Republic of Ireland ('the SORP'). The financial statements have been prepared on the historical basis except for the modification to a fair value basis for certain financial instruments as specified in the accounting policies.

1.2 GOING CONCERN

In light of the cost of living crisis, the trustees have assessed whether the use of going concern is appropriate and have considered possible events or conditions that might cast significant doubt on the ability of the charitable company to continue as a going concern. The trustees have made this assessment for a period of at least one year from the date of the approval of these financial statements. In particular, the trustees have considered the charitable company's forecasts and projections and have taken account of pressures on fee income. After making enquiries, the trustees have concluded that there is a reasonable expectation that the charitable company has adequate resources to continue in operational existence for the foreseeable future. The charitable company therefore continues to adopt the going concern basis in preparing its financial statements.

1.3 BASIS OF CONSOLIDATION

The results of BHIVA Trading Ltd have been consolidated on a line by line basis.

1.4 SIGNIFICANT JUDGEMENTS AND ESTIMATES

No items in these financial statements include significant judgements and estimates that management has made in the process of applying these accounting policies or that have a significant risk of causing material adjustment to the book value of assets and liabilities within the next financial year.

1.5 INCOMING RESOURCES

Grants are recognised as income over the period to which they relate. Any grant funding received in advance is recognised as deferred income on the balance sheet.

All other incoming resources are recognised when the charity is entitled to the income, there is certainty of receipt and the monetary value can be measured with reasonable accuracy.

All income is recognised once the Charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably. In pursuit of its charitable objectives, the Charity organises and hosts conferences, for which registration fees, sponsorship income, exhibition stand income and other sundry income is received, Where this income is received in advance of the given conference taking place, it is treated as deferred income and included within creditors in the accounts. The income is released once the conference has taken place. Income from membership subscriptions is recognised in line with the period to which it relates. Income from royalties is recognised in line with the period to which it relates. Income from grants and donations are recognised when the Charity has been notified in writing of both the amount and settelement date. In the event that a grant or donation

is subject to conditions that require a level of performance before the Charity is entitled to the funds, the income is deferred and not recognised until those conditions are fully met, or the fulfillment of those conditions is wholly within the control of the Charity and it is probable that those conditions will be fulfilled in the reporting period.

1.6 RESOURCES EXPENDED AND THE BASIS OF ALLOCATION OF COSTS

Expenditure is accounted for on an accruals basis. Overheads and other costs not directly attributable to particular projects are apportioned to the relevant funds on the basis of management estimates of the amount attributable to that activity in the year, either by reference to staff, time or space occupied, as appropriate.

Costs relating to a particular activity are allocated directly and others are apportioned on an appropriate staff basis. All costs are allocated between the expenditure categories of the Statement of Financial Activities on a basis designated to reflect the use of the resources.

1.7 FIXED ASSETS

Depreciation is provided at rates calculated to write off the cost or valuation of fixed assets, less estimated residual value, over the expected useful life on the following basis:

Office Equipment – 3 years straight line

1.8 INVESTMENTS

Interests in subsidiaries are initially measured at cost and subsequently measured at cost less any accumulated impairment losses. The investments are assessed for impairment at each reporting date and any impairment losses or reversals are recognised immediately in profit or loss.

A subsidiary is an entity controlled by the charitable company. Control is the power to govern the financial and operating policies of the intity so as to obtain benefits from its activities.

1.9 FINANCIAL ASSETS

Basic financial assets, which include trade and other receivables and cash and bank balances, are initially measured at transaction price including transaction costs and are subsequently carried at amortised cost using the effective interest method, unless arrangement constiutes a financing transaction, where the transaction is measured at the present value of the future receipts discounted at a market rate of interest.

1.10 FINANCIAL LIABILITES

Basic financial liabilities are initially measured at transaction price.

1.11 TAXATION

The Charity is considered to pass the tests set out in Paragraph 1 Schedule 6 of the Finance Act 2010 and therefore it meets the definition of a charitable company for UK corporation tax purposes. Accordingly, the Charity is potentially exempt from taxation in respect of income or capital gains received within categories covered by Chapter 3 Part 11 of the Corporation Tax Act 2010 or Section 256.

The trading subsidiary is not exempt for corporation tax purposes. The tax currently payable is based on taxable profit for the year. Taxable profit differs from net profit as reported in the profit or loss account because it excludes items of income or expense that are taxable or deductible in other years and it further excludes items that are never taxable or deductible. The company's liability for current tax is calculated using tax rates that have been enacted or substantively enacted by the reporting end date.

1.12 FUND ACCOUNTING

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

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

Designated funds are reserves which have been earmarked for particular uses by the trustees.

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

1.13 CASH AT BANK AND IN HAND

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

2. INCOME FROM DONATIONS AND GRANTS

	Unrestricted funds 2022 £	**Restricted funds 2022 £**	**Total funds 2022 £**
Donations	-	280	**280**
Grants	480	43,500	**43,980**
Total 2022	480	43,780	**44,260**

	Unrestricted funds 2021 £	Restricted funds 2021 £	Total funds 2021 £
Donations	-	15,000	15,000
Grants	15,400	-	15,400
Total 2021	15,400	15,000	30,400

3. INCOME FROM CHARITABLE ACTIVITIES

	Unrestricted funds 2022	**Restricted funds 2022**	**Total funds 2022**
	£	**£**	**£**
Membership Subscriptions	106,480	-	**106,480**
Major Sponsorship Fees	142,700	-	**142,700**
HIV medicine royalty & DAIG subscription	166,044	-	**166,044**
Conference registration fees	101,312	-	**101,312**
Exibition stands	263,740	-	**263,740**
Other conference income	692	11,500	**12,192**
MAC AIDs Fund	-	50,000	**50,000**
Miscellaneous income	2,500	-	**2,500**
Total 2022	783,468	61,500	**844,968**

	Unrestricted funds 2021	Restricted funds 2021	Total funds 2021
	£	£	£
Membership Subscriptions	126,379	-	126,379
Major Sponsorship Fees	160,400	-	160,400
HIV medicine royalty & DAIG subscription	246,622	-	246,622
Conference registration fees	39,163	-	39,163
Exibition stands	139,000	-	139,000
Other conference income	33,840	11,995	45,835
Scholarships and busaries	250	-	250
MAC AIDs Fund	25,000	-	25,000
MAC AIDs Fund	-	20,000	20,000
Miscellaneous income	500	-	500
Total 2021	770,654	31,995	802,649

4. INVESTMENT INCOME

	Unrestricted funds 2022 £	Total funds 2022 £
Bank deposit interest	893	**893**
Dividends received from investments	29,665	**29,665**
Total 2022	30,558	**30,558**

	Unrestricted funds 2021 £	Total funds 2021 £
Bank deposit interest	52	52
Dividends received from investments	35,832	35,832
Total 2021	35,884	35,884

5. ANALYSIS OF EXPENDITURE BY ACTIVITIES

	Direct costs costs 2022	Support and governance costs 2022	Total Funds 2022
Charitable activities	642,657	319,101	961,758
Total 2022	642,657	319,101	961,758

	Direct costs costs 2021	Support and governance costs 2021	Total Funds 2021
Charitable activities	553,652	283,384	837,036
Total 2021	553,652	283,384	837,036

5. ANALYSIS OF EXPENDITURE BY ACTIVITIES *(CONTINUED)*

ANALYSIS OF DIRECT COSTS

	Total Funds 2022 £	Total Funds 2021 £
Subsides to affliated associations and donations	**10,000**	10,000
Research awards	**9,103**	70,036
Exchange scholarship programme	**-**	(8,720)
Conferences, courses and events	**475,001**	341,234
National clinical audit	**27,488**	19,200
HIV medicine, guidelines and educational tools	**85,770**	94,825
Website and app development and maintenance	**35,295**	27,077
	642,657	553,652

ANALYSIS OF SUPPORT COSTS

	Total Funds 2022 £	Total Funds 2021 £
Secretariat fees	**212,325**	211,814
Establishment, comitee and communications	**43,432**	40,770
Accountancy and bookkeeping fees	**13,691**	6,621
Auditors renumeration	**9,000**	5,000
Legal and professional fees	**21,353**	8,922
Bank and currency charges	**4,167**	4,074
Irrecoverable VAT	**14,947**	5,938
Depreciation	**186**	245
	319,101	283,384

6. KEY MANAGEMENT PERSONNEL

The CIO considers its key management personnel to be the Trustees. The Trustees give their time and expertise without any form of renumeration or other benefit in kind as noted below.

During the year, no trustees received any remuneration or other benefits (2021 – £NIL). During the year, Trustees received reimbursement of expenses or had expenses paid directly to a third party on their behalf totalling £36,224 (2021: £17,614).

The CIO has no employees and therefore, no employee received emoluments over £60,000 per annum.

7. TAXATION

	2022	2021
	£	£
Corporation tax payable by trading subsidiary	-	(3,148)

8. TANGIBLE FIXED ASSETS

GROUP AND CIO

	Office equipment
	£
COST	
At 1 January 2022	1,656
At 31 December 2022	1,656
DEPRECIATION	
At 1 January 2022	1,438
Charge for the year	186
At 31 December 2022	1,624
NET BOOK VALUE	
At 31 December 2022	32
At 31 December 2021	218

9. FIXED ASSET INVESTMENTS

GROUP	Listed investments £
VALUATION	
Cost as at 1 January 2022	1,870,280
Additions	32,502
Disposals	(84,465)
Revaluation	(309,015)
AS AT 31 DECEMBER 2022	1,509,302

All the fixed asset investments are held in the UK.

All investments are carried at their fair value. Investment in equities and fixed interest securities are all traded in quoted public markets, primarily in the London Stock Exchange. Holdings in common investment funds, unit trusts and open-ended investment companies are at the bid price. Asset sales and purchases are recognised at the date of trade at cost (that is their transaction value).

The trustees delegate the management of their investments to Rathbones. The Charity is operating an investment policy that provides a degree of diversification of holdings within different shares and unit trust investments. The charity has invested in a range of holdings in order to protect against exposure to volatility in the market to reduce risk and preserve capital.

The charity does not make use of derivatives and similar complex financial instruments as it takes the view that investments are held for their longer term growth and annual income.

The charity has no material investment holdings in markets subject to exchange controls or trading restrictions.

The Total net gains on investments as per the Statement of Financial Activities comprises realised losses of £3,903 and unrealised revaluation losses of £309,015.

CIO	Total £
COST OR VALUATION	
Cost as at 1 January 2022	1,870,280
Additions	32,502
Disposals	(84,465)
Revaluation	(309,015)
Cost as at 31 December 2022	1,509,302

INVESTMENTS IN SUBSIDIARY COMPANIES

Bhiva Trading Limited is a private company limited by shares, which was incorporated in England and Wales on 9 December 2019. It is 100% owned and controlled by the British HIV Association.

The following was a subsidiary undertaking of the CIO:

Name	Company number	Registered office or principal place of business	Class of shares	Holding
BHIVA Trading Limited	12353562	Devonshire Business Centre, Works Road, Letchworth, SG6 1GH	Ordinary	100%

The financial results of the subsidiary for the year were:

	Income	Expenditure	Loss for the period	Net Liabilities
	£	£	£	£
BHIVA Trading Limited	62,097	(142,490)	(80,393)	(66,622)

10. DEBTORS

	Group 2022	Group 2021	CIO 2022	CIO 2021
	£	£	£	£
DUE WITHIN ONE YEAR				
Trade debtors	137,959	126,908	122,886	125,685
Group debtors	-	-	154,167	-
Accrued income	91,746	276,106	91,745	275,559
Prepayments	32,132	53,349	32,132	53,349
Other Debtors	34,758	-	35,589	-
	296,595	456,363	436,519	454,593

11. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	Group 2022	Group 2021	CIO 2022	CIO 2021
	£	£	£	£
Trade creditors	257,217	330,339	257,652	325,856
Amounts owed to group undertakings	-	-	-	13,100
Corporation tax	3,148	3,148	-	-
Other creditors	(37)	7,320	(121)	1
Accruals and deferred income	70,537	164,743	70,537	162,643
	330,865	505,550	328,068	501,600

	Group 2022	Group 2021	CIO 2022	CIO 2021
	£	£	£	£
DEFERRED INCOME				
Deferred income brought forward	55,400	36,218	55,400	36,218
Resources Deferred during the year	30,320	50,923	30,320	50,923
Amounts released from previous periods	(55,400)	(31,741)	(55,400)	(31,741)
Deferred income as at 31 December 2021	30,320	55,400	30,320	55,400

Income is recognised in the year to which it relates, these conditions are set by grants and contracts.

12. STATEMENT OF FUNDS

CURRENT YEAR

	Balance at 1 January 2022 £	Income £	Expenditure £	Taxation £	Transfers in/ out £	Gains/ (Losses) £	Balance at 31 December 2022 £
UNRESTRICTED FUNDS							
General Reserve	2,332,063	752,409	(810,913)	-	-	(312,918)	1,960,641
Trading Subsidary	13,770	62,097	(142,490)	-	-	-	(66,623)
	2,345,833	**814,506**	**(953,403)**	**-**	**-**	**(312,918)**	**1,894,018**
RESTRICTED FUNDS							
Website development fund	2,980						2,980
Gilead podcasts fund	27,617						27,617
Gilead Pakistan fund	3,190						3,190
Gilead best of Croi & ViiV Research awards	3,634	105,280	(20,709)				88,205
	37,421	**105,280**	**(20,709)**	**-**	**-**	**-**	**121,992**
TOTAL OF FUNDS	**2,383,254**	**919,786**	**(974,112)**	**-**	**-**	**(312,918)**	**2,016,010**

PRIOR YEAR

	Balance at 1 January 2021 £	Income £	Expenditure £	Taxation £	Transfers in/ out £	Gains/ (Losses) £	Balance at 31 December 2021 £
UNRESTRICTED FUNDS							
General Reserve	2,093,416	788,752	(702,492)	-	(73,771)	226,158	2,332,063
Trading Subsidary	348	33,186	(16,616)	(3,148)	-	-	13,770
	2,093,764	**821,938**	**(719,108)**	**(3,148)**	**(73,771)**	**226,158**	**2,345,833**
RESTRICTED FUNDS							
Research awards fund	-	15,000	(46,275)	-	31,275	-	-
Website development fund	4,000	-	(1,020)	-	-	-	2,980
MAC AIDS fund	12,769	20,000	(75,265)	-	42,496	-	-
Gilead podcasts fund	27,617	-	-	-	-	-	27,617
Gilead Pakistan fund	3,190	-	-	-	-	-	3,190
Gilead best of Croi	-	11,995	(8,361)	-	-	-	3,634
	47,576	**46,995**	**(130,921)**	**-**	**73,771**	**-**	**37,421**
TOTAL OF FUNDS	**2,141,340**	**868,933**	**(850,029)**	**(3,148)**	**-**	**226,158**	**2,383,254**

The income and expenditure of the trading subsidiary, BHIVA Trading Limited, is presented separately above. These results are consolidated into the overall consolidated financial statements on a line by line basis.

Research awards fund

Originally launched in 2016, the BHIVA research awards are intended to provide funding for research projects that will improve the clinical care and management of people living with HIV in the UK. Income is received annually from Gilead. The fund is expended by way of making awards to individuals.

Website development fund

This fund represents funding received specifically for the development of the BHIVA website. Unspent funds have been carried forward to be utilised in subsequent years.

MAC AIDS Fund

MAC AIDS fund is a charity established in 1994 to support people living with HIV worldwide. It donates funds to communities and organisations that offer services to people with HIV/AIDS and help to prevent the disease through educational programs. This is given each year as restricted funding for this purpose.

Gilead podcasts fund

This fund represents funding received specifically for the production of BHIVA podcasts. These podcasts will take place in 2020-21. Accordingly, the unspent funds have been carried forward at the balance sheet date.

Exchange Scholarship fund

The exchange scholarship enables winning applicants to travel internationally to take be placed at a HIV unit. The programme enables a unique opportunity to increase understanding of the treatment and management of HIV in particulalry, the developing world. The scholars can disseminate this information and experience when they return to the UK..

13. ANALYSIS OF NET ASSETS BETWEEN FUNDS

CURRENT YEAR

	Unrestricted funds 2022 £	Restricted funds 2022 £	Total funds 2022 £
Tangible fixed assets	32	-	**32**
Fixed asset investements	1,509,302	-	**1,509,302**
Current Assets	685,092	152,449	**837,541**
Creditors due with in one year	(330,865)	-	**(330,865)**
TOTAL	1,863,561	152,449	**2,016,010**

PRIOR YEAR

	Unrestricted funds 2021 £	Restricted funds 2021 £	Total funds 2021 £
Tangible fixed assets	218	-	218
Fixed asset investements	1,870,280	-	1,870,280
Current Assets	1,005,081	37,421	1,042,502
Creditors due with in one year	(529,746)	-	(529,746)
TOTAL	2,345,833	37,421	2,383,254

14. RECONCILIATION OF NET MOVEMENT IN FUNDS TO NET CASH FLOW FROM OPERATING ACTIVITIES

	2022 £	2021 £
Net income/ (expenditure) for the year (as per Statement of Financial Activities)	**(367,244)**	241,914
Adjustments for:		
Depreciation charges	**186**	245
(Gains)/ loss on Investments	**312,919**	(226,158)
Dividends and interests received from investments	**(30,558)**	(35,884)
(Increase)/ decrease in debtors	**159,768**	(146,560)
Increase/ (decrease) in creditors	**(174,683)**	142,062
Net cash provided by operating activities	**(99,612)**	(24,381)

15. ANALYSIS OF CASH AND CASH EQUIVALENTS

	Group 2022 £	Group 2021 £
Cash in hand	487,118	513,483
Cash at broker	53,828	48,460
TOTAL CASH AND CASH EQUIVALENTS	540,946	561,943

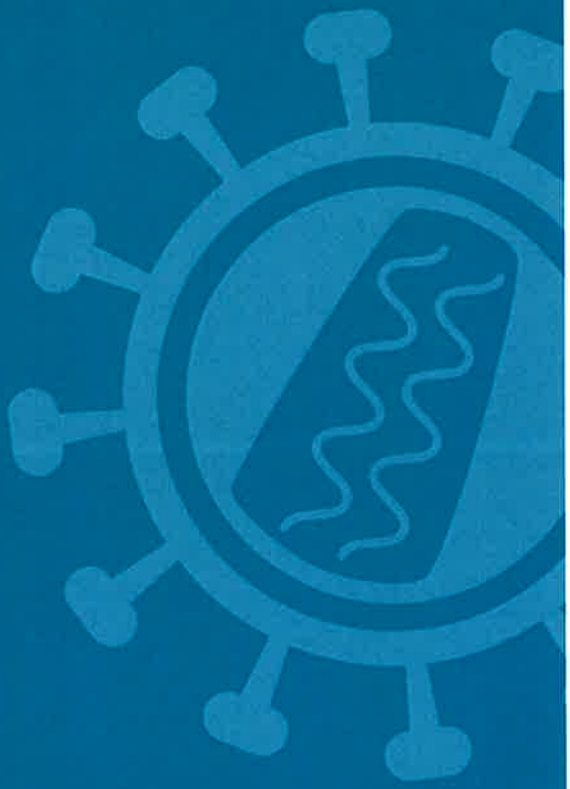
16. ANALYSIS OF CHANGES IN NET DEBT

	At 1 January 2022 £	Cash flows £	At 31 December 2022 £
Cash and cash equivalents	561,943	(20,997)	540,946
	561,943	(20,997)	540,946

17. RELATED PARTY TRANSACTIONS

A trustee was paid £13,602 during the year & £15,934 in 2021 for providing media services to the charity. Services were provided on an arm's length basis.

A trustee was also paid 14,952 (2021: NIL) for professional services offered to the Charity.



BHIVA
British HIV Association

www.bhiva.org

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BRITISH HIV ASSOCIATION

England & Wales - Charity number 1170707

Accounts

BHIVA
British HIV Association

2021
Trustees' Annual
Report & Accounts

www.bhiva.org

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BHIVA
British HIV Association

Charity Information for the year ended *31 December 2021*

Trustees retiring on 22 November 2021

- Dr Matthew Page, retired as Trainee Doctors' Representative
- Mrs Sheila Morris, required as Trustee November 2021

Trustees from 22 November 2021

Officers

- Dr Laura Waters, Chair, appointed 3 October 2019
- Professor Caroline Sabin, Vice Chair, appointed 3 October 2019
- Professor Yvonne Gilleece, Honorary Secretary, appointed 3 October 2019
- Dr Iain Reeves, Honorary Treasurer, appointed 22 November 2020

Elected Trustees

- Dr Tristan Barber, appointed 3 October 2019
- Dr David Chadwick, re-appointed 3 October 2019
- Dr Daniel Clutterbuck, appointed 22 November 2020
- Dr Ashini Fox, appointed 22 November 2020
- Dr Ranjababu Kulasegaram, appointed 3 October 2019
- Dr Nick Larbalestier, appointed 22 November 2020
- Dr Nicola Mackie, re-appointed 3 October 2019
- Dr Jonathan Underwood, appointed 3 October 2019
- Dr Clare van Halsema, appointed 5 October 2018

Specific Trustee Roles

- Dr Rebecca Metcalfe, New Consultant Doctors' Representative, appointed 22 November 2020
- Professor Brian Gazzard CBE, Joint Editor-in-Chief, *HIV Medicine*
- Miss Jo Josh, UK-CAB Community Representative, appointed as acting representative 17 September 2019, appointed as representative 22 November 2020
- Dr Manik Kohli, Trainee Doctors Representative, appointed November 2021

Charity Number

- 1170707

Registered Office and Operational Address

- Medivents Limited
  Devonshire Business Centre
  Works Road
  Letchworth
  Hertfordshire SG6 1GJ

Independent Auditors

- Moore Kingston Smith
  4 Victoria Square, St Albans,
  Hertfordshire AL1 3TF

Bankers

- National Westminster Bank plc
  190 The Broadway, Muswell Hill
  London N10 3SD

About BHIVA

The British HIV Association, (BHIVA), is the leading UK association representing professionals in HIV. Since its inception in 1995, BHIVA has been committed to providing excellent care for people living with and affected by HIV.

BHIVA is a national advisory body on all aspects of HIV care and the association provides a national platform for HIV care issues. BHIVA representatives contribute to international, national and local committees dealing with HIV care. In addition, BHIVA promotes undergraduate, postgraduate and continuing medical education within HIV care.

The association aims to advance professional and public education in the subjects of HIV, including testing, treatment and prevention, and the management of HIV-related illnesses and treatment complications through the promotion of research, dissemination of and the production and promotion of evidence-based guidelines and standards.

Our objectives

BHIVA has four main objectives:

1. To relieve sickness and to protect and preserve health through the development and promotion of good practice in the testing and treatment of HIV and HIV-related illnesses:
2. To advance public and professional education on HIV through education and the promotion, conduct and dissemination of research
3. To promote optimal outcomes for people living with, and affected by, HIV through the development and dissemination of national guidelines and standards, audit and research
4. To support other organisations through activities including collaborative responses to consultations, media representation of HIV, workforce planning and, exceptionally, individual cases of stigma, discrimination or suboptimal care

Long term, continuing to promote best practice within the specialty, ensuring that the care provided for people living with HIV in the UK is world-leading is of primary concern. To achieve that aim, BHIVA must maintain its contribution to the continued growth of the specialty over the next decade by continuing to support training and research in the field of HIV medicine and helping to ensure that the existing excellent national standards of care are maintained.

Education is a primary focus and BHIVA is passionate about promoting and supporting the speciality to deliver undergraduate, postgraduate and continuing medical education within HIV care.

With work still to be done in educating the medical profession, scientific community public about HIV, through the promotion of research and dissemination of research results is central to the association's objectives. Promoting accurate messaging related to HIV and challenging decisions that discriminate against people living with, or affected by, HIV helps overcome outdated beliefs and challenge stigma.

BHIVA has also played a key role in providing education for people living with HIV, and the community organisations that support them, during the COVID-19 pandemic. By publishing plain English versions of materials on COVID-19 risk and vaccination and by contributing to a live and recorded Q&A session on COVID-19, BHIVA has become a trusted source of advice in the UK and beyond. BHIVA has worked closely with other national bodies to ensure the best interests of people with HIV are central to decision-making about COVID-19 prevention and treatment.

Education is also key to the ongoing development of the speciality and the ability to develop a fully integrated educational programme for members and the wider HIV community is at the heart of the long-term strategy of the association. Promoting and disseminating the latest research through regional, national and international meetings and conferences and publications, and supporting an increasingly diverse range of research studies which aim to improve the health and lives of people living with HIV will help to achieve this.

By increasing the awareness of BHIVA at an international level, BHIVA endeavours to maintain a reputation for excellence education and research. The association's ability to support a range of stakeholders and organisations by providing expert clinical advice on HIV and its management further strengthens BHIVA's international presence.

Activities

BHIVA promotes excellence in HIV care through production of evidence-based, NICE-accredited guidelines. Our antiretroviral treatment guidelines form the basis of national prescribing policies across the UK and along with the pregnancy guidelines are the most widely accessed on the BHIVA website and are frequently internationally referenced. BHIVA represents the interests of people with HIV and input from the HIV clinical and research communities through feedback on national prescribing policies. Antiretrovirals moved under the remit of NICE for the first-time last year and BHIVA provided strong written feedback and verbal representation at the NICE's Technology Appraisal for the first generation of injectable HIV treatment in 2021.

BHIVA works closely with other professional and community organisations to advocate against discriminatory policies and ensure that the needs and priorities of people with HIV are at the heart of decisions that affect them.

BHIVA actively encourages the presentation of original UK research. Abstracts are invited for the annual spring conference, which aims to showcase the best contemporary research into HIV-related topics currently being undertaken in the UK. The annual conference attracts a broad spectrum of participants from experienced HIV specialists to those still in training, HIV researchers from a range of disciplines and community members. Eminent international speakers are invited to present the latest data.

BHIVA supports research in HIV care through its annual research awards scheme. Originally launched in 2006, the programme operates through competitive application. Open to all BHIVA members applicants can submit applications for the funding of research projects that impact on the improvement of clinical care and management of people living with HIV in the UK. A minimum of £30,000 per annum is available, to be distributed amongst the successful applicants according to the quality of the submitted proposals. The awards panel is chaired by an independent chair.

Applications for grants or funding for research or other projects made directly to the association are reviewed by the BHIVA Executive Committee on a quarterly basis and considered based on merit and relevance to the objectives of BHIVA.

"I wanted to get in touch with you to let you know that I will be leaving the organisation.

I wanted to express my extreme gratitude to you, and to BHIVA more widely, for the support, encouragement, allyship, development and our personal relationship. Without this, I don't think we'd have been able to do all of the exciting things that the organisation has done over the past three years, whilst I was chief executive. You have made working at my organisation even more enjoyable and I'll really miss working with you in the way that we have."

Former Chief Executive of a community group

"I have recently become a BHIVA member and have found the e-learning modules really useful."

New BHIVA member

HIV Medicine is the official journal of the association and is published by Wiley. *HIV Medicine* is a peer-reviewed journal publishing original articles, reviews and guidelines on all aspects of HIV treatment and diagnosis.

BHIVA also undertakes a wide range of other activities to promote medical education in HIV care and support research. This includes conference feedback meetings, training courses for the Diploma in HIV Medicine examination, web-based e-learning modules as well as international scholarships and exchanges to forge links with international organisations to increase the understanding of the treatment and management of HIV.

A board of 20 trustees are responsible for the work of the association and its activities are carried out by five main subcommittees, all which report to the Executive Committee. The subcommittees are:

- Audit and Standards
- Conferences
- Education and Scientific
- External Relations
- Guidelines

The Executive Committee review the work carried out by the subcommittees to ensure its activities are in line with the charity's objectives. All trustees sit on at least one subcommittee to facilitate this process and monitor progress.

BHIVA would be unable to flourish without the considerable commitment of time, energy, expertise and dedication by so many individual members of the committees, subcommittees, writing and working groups as well as the vital support through sponsorship from within the pharmaceutical industry.

Year in review

BHIVA has worked tirelessly throughout 2021 towards the goal of ensuring that everyone living with HIV has access to the help and support they need. The charity has continued to provide a wealth of independent and practical advice, supported by the latest evidence-based research to HIV healthcare professionals and the wider HIV community.

BHIVA is committed to working with the healthcare sector to ensure that those providing the specialist care and support have access to ongoing education, training and development to enable them to provide the best possible support to their patients so they can live their lives with HIV.

BHIVA has continued to play a major role in supporting people living with HIV, and their care providers, during COVID-19. By providing regularly updated guidelines on COVID-19 risk and vaccination, including patient-friendly versions, supporting and contributing to research, presenting information at national and international meetings, and collaborating with organisations such as the Intensive Care Society and the European AIDS Clinical Society, we have played a key role in guiding clinicians and people living with HIV through a period of extreme anxiety and uncertainty. A collaborative challenge with community organisations, led by BHIVA, resulted in the Department of Health and Social Care reversing their decision to exclude people with immunosuppression from access to online COVID-19 testing.

Website

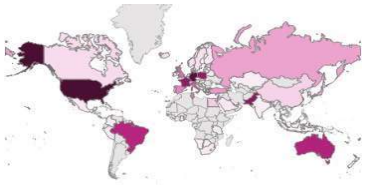
The BHIVA website is the association's central hub for information. Attracting over 15,000 visitors in 2021, it has continued to be the go-to place for the latest updates and has proved especially valuable to the entire HIV community throughout the COVID-19 pandemic.

HIV Medicine

The official journal of the British HIV Association, *HIV Medicine* is a peer-reviewed publication focusing on evidence-based medicine as the mainstay of successful management of HIV and AIDS. Publishing original articles, reviews and guidelines on all aspects of HIV treatment and diagnosis, the journal is specifically aimed at researchers and clinicians with responsibility for treating those living with HIV. It aims to provide an outlet for the publication of international research papers, embracing clinical, pharmacological, epidemiological, ethical, preclinical and *in vitro* studies.

It is the flagship publication of the association available to all members in either printed or online format and brings in vital revenue through royalty subscriptions.

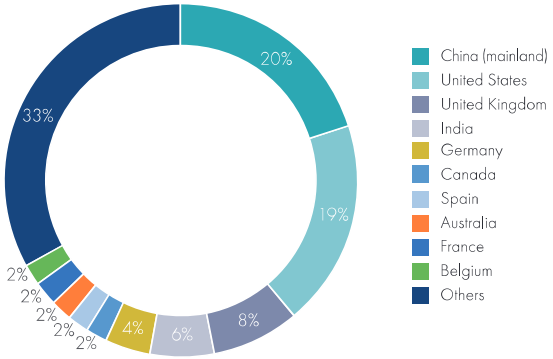
With 10 issues per annum plus supplements, the journal had a circulation of 7,172 institutions in 2021 and is on course for a similar target in 2022. On the map below, darker shading shows where circulation is highest. Countries shaded in grey may be covered by philanthropic initiatives.



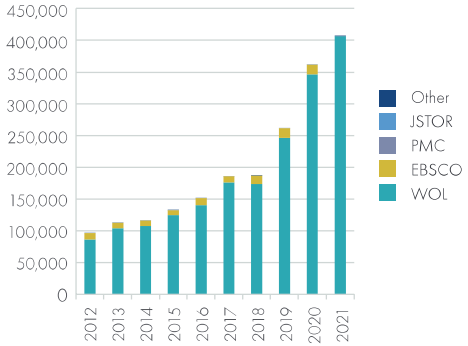
Our philanthropic initiatives also extended low-cost or free access to current content to 4,660 developing world institutions.

The number of article downloads also continues to increase with 402,000 articles downloaded in 2021. The consistent rise in downloads year on year from nations around the world are identified below.

This chart shows the top 10 countries/regions from which articles in *HIV Medicine* were downloaded via Wiley Online Library in 2021, and the percentage each country/region contributed to total usage. All other countries/regions are combined under "Others."



This chart shows the origin of full-text downloads of *HIV Medicine* across Wiley Online Library and other major third-party providers.



BHIVA *Members Matters*

The BHIVA monthly e-newsletter is distributed to all members and includes the latest information and updates in the field of HIV for the healthcare community. It is seen as a vital tool for keeping members up to date and has been particularly invaluable in keeping the membership fully informed of the latest data and research during the COVID-19 pandemic.

Social Media Reach

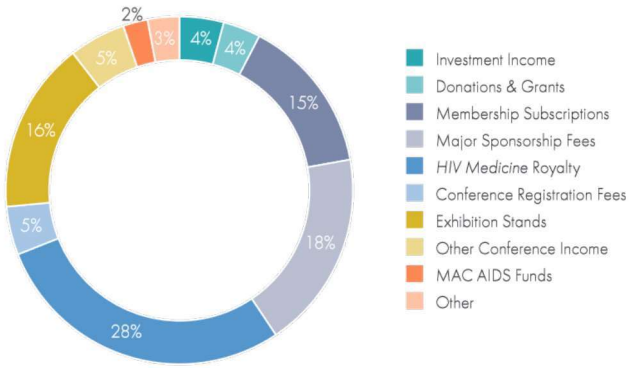
With over 2,000 followers, the BHIVA Facebook page is managed by the External Relations subcommittee and is used as a tool for promoting the work of the association. It carries updates and links to valuable resources produced by both BHIVA and other organisations within the HIV healthcare sector.

The BHIVA Twitter account, also managed by the External Relations subcommittee, has continued to go from strength to strength again in 2021 and now has almost 12,000 followers, an increase from just over 10,000 followers in 2020. The group tweet regularly about the latest updates in the field of HIV.

BHIVA's YouTube channel is used to promote and host their latest resources made available including a series of educational podcasts covering a range of hot topics in HIV. Following its set up in 2019, the YouTube channel has become an excellent resource for the broadcast of educational content including sessions from conferences and other training materials.

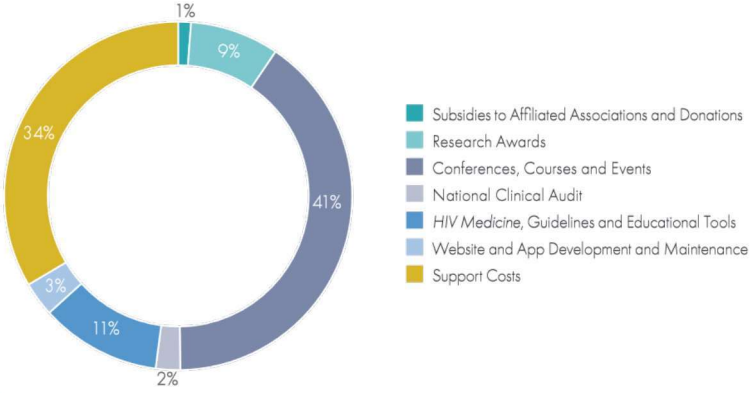
WHERE DID BHIVA INCOME COME FROM IN 2021?

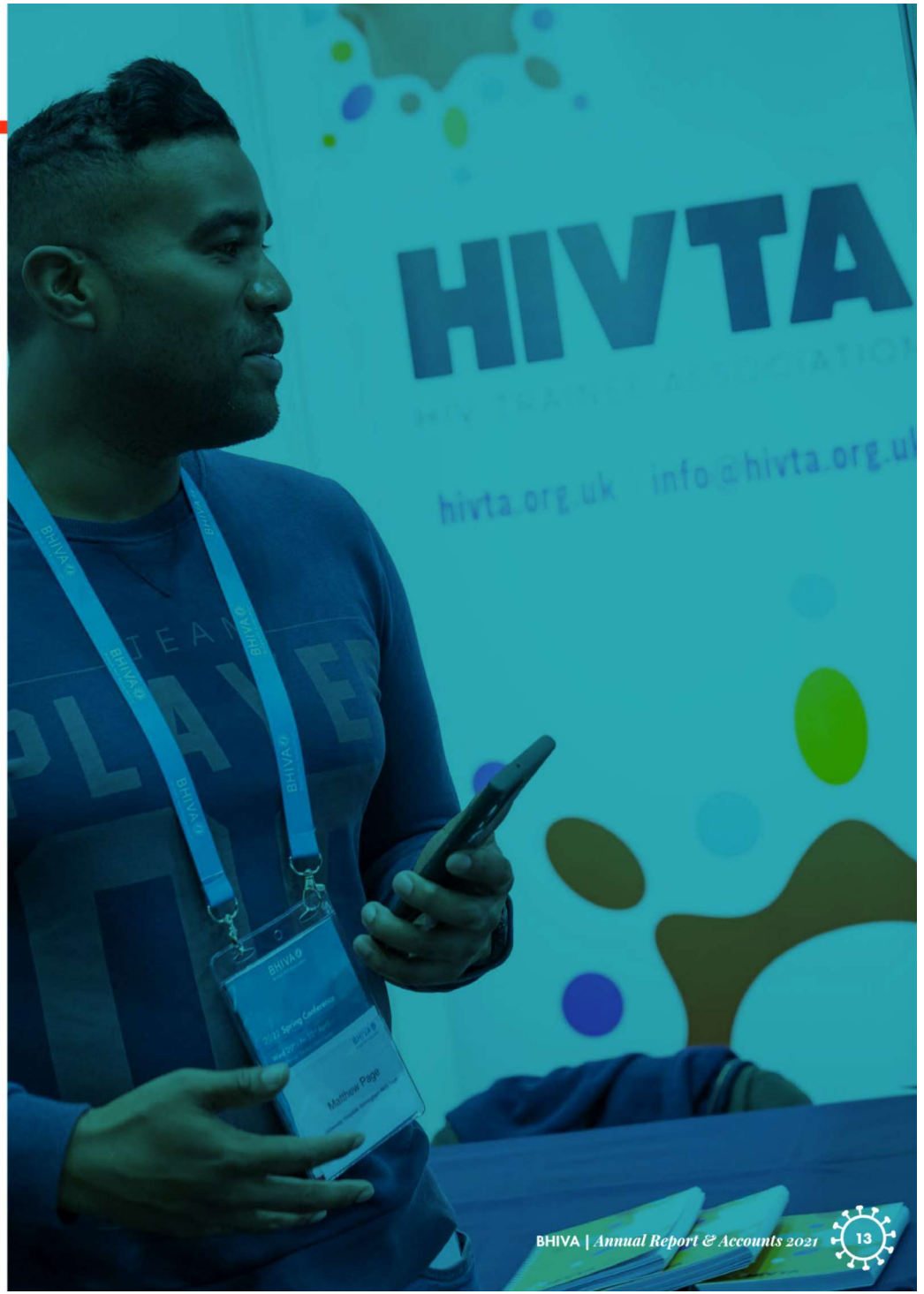
This year, BHIVA generated income of £868,933 from a cross sections of sources including sponsorship from commercial companies from within the healthcare sector, registration fees through its education and training activities, journal income, members' subscriptions and grant funding.



WHAT DID BHIVA SPEND MONEY ON IN 2021?

BHIVA spent £850,029 on core activities including the facilitation of its education and training initiatives including its two annual conferences, the delivery of the flagship research awards programme, the annual clinical audit and supporting its members with international partnership activities. This left the charity with a healthy surplus of £18,904 to cover the ongoing running costs of the charity and to reinvest back into future projects allowing the charity to strengthen its support to the HIV field.





The work of the subcommittees

AUDIT AND STANDARDS SUBCOMMITTEE REPORT

Dr David Chadwick, Chair,
Audit and Standards Subcommittee

To support clinical services in improving care quality, the BHIVA Audit and Standards Subcommittee conducts a regular audit programme, involving clinical centres throughout the UK. The main project for the year was a national audit of HIV and hepatitis C co-infection, which had originally been planned for 2020 but was deferred and modified because of the COVID-19 pandemic. National results were presented at the European AIDS Clinical Society conference in London in October 2021 and have been submitted for peer-review publication. Individual feedback reports have been distributed to participating centres.

The co-infection audit was accompanied by a survey of how HIV clinical services were affected by and responded to the pandemic. Findings have been shared with participating services and BHIVA members. Building on this, the 2022 audit will assess the frequency of routine monitoring of HIV viral load, adherence and mental well-being through the pandemic, as well as measures taken by clinical services to avoid interruptions in antiretroviral treatment. This audit will not seek to assess quality of care provided by individual clinical services, recognising that minimising clinic attendance during pandemic surges was an appropriate safety measure recommended in BHIVA guidance.

Results of BHIVA's registry study of COVID-19 cases among adults with HIV were presented at the BHIVA/BASHH virtual conference in April 2021 and are being submitted for peer-reviewed publication.

BHIVA has continued to collaborate with the UK Health Security Agency (UKHSA, formerly Public Health England) on the National HIV Mortality Review (NHMR), including establishing a working group of clinical and public health representatives, relevant specialists and community representatives to guide the development of the NHMR and encourage participation and feedback of findings. Results of analyses of deaths occurring during 2019 and 2020 were presented at the 2021 BHIVA/BASHH virtual conference and 2022 BHIVA conference respectively. Feedback reports allowing comparison of regional with UK-wide results are in preparation.

Also in collaboration with UKHSA, a standard form for reporting locally conducted reviews of individuals diagnosed with advanced HIV has been made available to clinical services. Depending on results of a pilot study, more extensive national reporting may be introduced, to support the HIV Action Plan aim of reducing missed opportunities for HIV testing and late diagnoses.

Following a pilot European hepatitis co-infection audit, members of the subcommittee have continued to liaise with the European AIDS Clinical Society (EACS) and European Centre for Disease Prevention and Control to share learning from BHIVA's extensive experience of audit.

The Subcommittee continues to support the British Psychological Society in updating the Standards for Psychological Support For Adults Living with HIV, originally produced by MEDFASH in 2011.

A peer-reviewed article based on results of the 2019 audit of management pathways for new HIV diagnoses was published in International Journal of STD & AIDS.

CONFERENCES SUBCOMMITTEE REPORT

Dr Nicola Mackie, Chair,
Conferences Subcommittee

The start of 2021 was heralded by yet another significant surge in COVID-19 cases. This, of course, impacted on the Conferences Subcommittee in terms of the planning of educational events. Despite this, we managed to organise a number of meetings though the course of the year albeit some of them virtual! BHIVA has always provided feedback and review of the key research from the Conference on Retroviruses and Opportunistic Infections (CROI). This conference was virtual and, despite pressures in the workplace, an experienced (albeit smaller than usual) working party was convened who successfully negotiated the time differences and on-line platform to review the data. The key research was presented through 2 pre-recorded webinars in March 2021. There was a live panel discussion with Q&A at each event after the recordings and the feedback from the delegates who joined the webinars was excellent.

Despite a glimmer of hope towards the end of 2020 that we would be able to hold a face-to-face conference in 2021 (using the pre-booked Manchester venue), there was an early decision that the Spring Conference 2021 would be delivered virtually via a bespoke digital platform. This Conference was a joint BHIVA/BASHH event with 225 abstracts submitted for review, resulting in an epic virtual four hour Abstract Review meeting, which was indeed a feat for the Conferences Subcommittees for both organisations!

VIRTUAL EVENT	BHIVA SPRING 2020	BHIVA BASHH SPRING 2021
ABSTRACTS SUBMISSIONS	216	225
ABSTRACTS ACCEPTED	208	216
ORAL PRESENTATIONS	30	24
POSTER PRESENTATIONS	174	190

The Conference itself was held over three days with a packed programme combining live streamed and pre-recorded content. Highlights included some outstanding plenaries and 2 BHIVA Conference firsts – hearing the voice of the patient in our Clinico-pathological case study session and having themed poster discussion sessions. The meeting was again interactive and extremely well received.

VIRTUAL EVENT	NUMBER OF DELEGATES
BHIVA SPRING 2020	479
BHIVA BASHH SPRING 2021	760

We were delighted and excited to be able to hold our BHIVA Autumn Conference in November 2021 as a face-to-face meeting at the Royal Society of Medicine in London. More than 200 delegates attended and were treated to five fantastic plenary lectures covering updates in sexual health, HIV, general medicine/infectious diseases, hepatitis and key research. The programme additionally included several pharmaceutical industry-sponsored symposia. The evening was a celebration of World AIDS Day where we heard testimonies from individuals recounting experiences from across the 40 years of HIV/AIDS and culminating in a joyous and upbeat choir – with audience participation!

We look forward to 2022 and in particular hope that we will be able to hold our BHIVA Spring Conference as an in-person event in Manchester.

I would like to take this opportunity to thank the Conferences Subcommittee for their hard work and for the enthusiasm that they contribute to the planning of BHIVA's meetings and educational events.

EDUCATION AND SCIENTIFIC SUBCOMMITTEE REPORT

Dr Tristan Barber, Chair, Education and Scientific Subcommittee

The Education and Scientific Subcommittee has continued to work hard in the past year. I am pleased to report that Dr Ashini Fox was appointed Vice Chair of the subcommittee as well as lead for the Education Group. Professor Maryam Shahmanesh is leading on our implementation science work and Dr Douglas Fink on the International Partnerships Working Group which include the Scholarship Awards, supported by vice chair of that group Dr Nadia Ahmed.

In 2021 the BHIVA Research Awards Judging Panel was led by Dr Ian Williams for the last time, and he was thanked for six years of amazing service in this role. The new panel chair from 2022 will be Professor Alison Rodger. In 2021 six successful applicants were awarded a total of £65,910.

2021:

- 'Tackling Tobacco Addiction in HIV (TTAH) Study', Dr Emily Clarke, Liverpool University Hospitals NHS Foundation Trust
- 'HIV-1 Viral Load Small Volume Blood Testing Validity and Acceptability', Dr Stuart Flanagan, Central and North West London NHS Foundation Trust
- 'Acceptability and feasibility of digital assessment of falls risk, frailty and mobility impairment using wearable sensors in people with HIV as part of HIV care' Dr Claire Norcross, University Hospitals Sussex NHS Foundation Trust
- 'To understand the knowledge of health care providers and the barriers relating to the diagnosis and treatment of low bone mineral density (BMD) amongst women living with HIV', Dr Hajra Okhai, University College London
- 'Prevalence of Epstein Barr virus and cytomegalovirus and associated immune-activation and inflammation in adolescents and young adults with perinatally-acquired HIV', Dr Helen Payne, Imperial College London
- 'Waist circumference cut-offs for metabolic syndrome and insulin resistance in women and men of African ancestry with HIV', Dr Laura Ribeiro Cechin, Kings College Hospital NHS Foundation Trust, London

The 2021 Don Jeffries Research Award was presented to Dr Claire Norcross for submitting the highest scoring application in the BHIVA Research Awards of that year. The criteria for this award have been revised by the Committee and are available here https://www.bhiva.org/BHIVAResearchAwards.

The subcommittee also manages two Fellowship programmes for BHIVA members. The BHIVA International Partnerships Working Group oversees the BHIVA/Gilead International Exchange Fellowship Awards which are designed to support the development of new links between BHIVA and institutions in low or middle income countries. In the face of travel restrictions in 2021, awards were made to virtual projects between BHIVA members and collaborators in Chile, Nigeria and Peru. A new round of awards will launch in Autumn 2022 ready to embrace less restricted global travel. The committee continues to expand international membership and welcomes dialogue with potential international partners.

Professor Maryam Shahmanesh has taken over as lead for the BHIVA/ViiV Implementation Science Fellowship programme. There is further funding to support another round of these awards

Our e-Learning group has continued to work hard producing e-learning material to mirror new BHIVA guidelines. The online modules receive excellent feedback and continue to provided Continued Professional Development (CPD) and education for senior doctors, those in training and, also, our international members.

HIV Medicine (https://onlinelibrary.wiley.com/journal/14681293) is the official journal of BHIVA with all members getting complementary access. The Joint Editor-in-chiefs are Professor Caroline Sabin and Professor Jürgen Rockstroh, and the layout of the journal has been updated with much positive feedback, in addition to praise for the themed issue on women and another themed issue planned with publication to coincide with the World AIDS Day in 2022.

Future plans

We are looking forward to continuing our work, including explaining the educational resources available to members through pod and webcasts, eLearning, and via the International Partnerships Working Group to ensure a breadth and depth of education for all, including our community members and representatives. The return of a face to face conference in April 2022 will be welcomed, to bring together old colleagues and friends, as well as meeting new trainees and students interested in the specialty. The Education and Scientific Subcommittee will continue to be at the core of BHIVA activities, supporting our membership with educational content delivery and oversight, and obtaining funding to support research, implementation science, and international educational exchange programmes.

EXTERNAL RELATIONS SUBCOMMITTEE REPORT

Dr Matthew Page, Chair,
External Relations Subcommittee

The External Relations Subcommittee works in line with BHIVA's objectives to promote good practice in the treatment and care of HIV to its membership and external organisations.

Summary Of Activities

The External Relations Subcommittee membership has expanded since its inception, and in order to maximise committee involvement, restructuring has occurred, creating a role-based committee. This ties in with various members stepping down, and also new members joining. We have retained former members who have agreed to assist with large social media activities, such as national conferences.

Media

BHIVA continues to be a mainstream media commentator on HIV, responding to many media enquiries. BHIVA spokespeople were featured on a wide range of media outlets, including, BBC News, Channel 4, Voice of Islam, Pink News, City News, Maternity and Midwifery, BBC Radio One, the Mail online and Mail on Sunday. For World AIDS Day 2021, BHIVA worked collaboratively with ITN and other HIV-related organisations to produce the news-style programme highlighting the medial and social milestones of HIV, in a production titled, *"HIV at 40"*.

BHIVA have campaigned for pilots living with HIV to be permitted to fly with an unrestricted (Class 1) medical certificate in the UK.

Statements on COVID-19

Throughout the COVID-19 pandemic BHIVA has produced rapid response documents for guidance of COVID-19 for people living with HIV. We have continued in this vein, producing statements (both clinical and community) for the third vaccine for people living with HIV. BHIVA has had representatives at the Joint Committee on Vaccinations and Immunisation (JCVI) meetings to help steer guidance relating to people living with HIV.

The External Relations Subcommittee has also assisted with responses to national issues such as the shortage of blood bottles, to the launch of e-Learning modules on the BHIVA website, guideline updates and promotion of its Annual Spring and Autumn conferences.

Website and BHIVA App

The External Relations Subcommittee maintains the BHIVA website. In 2021 there continued to be an increase in engagement with the website due to guidance on COVID-19 – vaccination.

Social Media

The External Relations Subcommittee continues to manage BHIVAs social media accounts, which include Twitter, Facebook and Instagram, as well as the *HIV Medicine* Twitter account. There continues to be a growth in followers on all platforms, and these have proven be an effective method for dissemination of information, and communication with members and external organisations.

Forward Look – 2022 and onwards

- Media training for expert BHIVA members
- BHIVA External Relations Campaign – BHIVA Spotlight – highlighting the achievements of those involved with HIV care, education and activism who may not usually have their work highlighted. Participants will be nominated by their peers.
- Reviewing ways to improve interaction with our social media outlets (e.g. short video clips [reels], and exploring the use of a regular short podcast).
- Working with the Education Working Group to help produce a modernized e-learning environment.

GUIDELINES SUBCOMMITTEE REPORT

Dr Clare van Halsema, Chair,
Guidelines Subcommittee

BHIVA produces guidelines on a comprehensive range of topics to support clinicians in managing HIV and its complications, as well as working with other organisations to produce co-badged guidelines on HIV prevention, testing and other areas.

In 2021, with the COVID-19 pandemic very much active and ongoing, BHIVA continued to issue rapid guidance on COVID-19, including guidance around vaccination and the use of antivirals, as relevant to people living with HIV. A rapid statement on considerations in critical care was issued, as well as guidance on HIV services and virtual consultations, which will now be incorporated into the monitoring guideline full update.

Guideline production

The BHIVA guidance on management of HIV-2 full update was presented and published in 2021. Discussions at the conference led to the writing group and members of BHIVA's executive committee exploring the feasibility of a national clinical advisory service for HIV-2.

The joint BHIVA/BASHH guidance on HIV post-exposure prophylaxis was also published as a co-badged guideline.

Work was ongoing through 2021 on the ART guideline, vaccinations and others, with some effect of COVID-19 on clinicians' capacity to spend time on guideline writing evidently ongoing, with redeployment and planning in the NHS.

NICE accreditation

We worked towards NICE re-accreditation of our guideline process, due in 2022, ensuring that the guidelines development manual reflected BHIVA processes and policies and that all guidelines met the high standards required, with uniform structure. While NICE changes their policy on this, we have an interim extension of our accreditation until December 2023. Guidelines are all published with non-technical summaries for lay readers and also with an abridged version on the BHIVA app.

2021 successes

A position statement was produced on HIV and the law, with consultation planned for 2022. The rapid guidance on virtual consultation was published.

2022 plans

We work towards completion of the ART guideline, which will be presented at BHIVA Spring conference 2022, a huge piece of work much anticipated by clinicians and people living with HIV. We continue to meet virtually to allow participation from across the UK and to suit peoples' busy schedules. We have launched a full update of the monitoring and pregnancy guidelines, welcoming new chairs for both, and plan a move to the use of European guidelines for malignancy rather than a BHIVA-specific guideline. This will be signposted on the website.

FUTURE PLANS

Education and training

Growing the field of HIV care, encouraging excellence among trainees and developing their skills is of paramount importance. BHIVA will continue to provide information on careers in HIV medicine, through attendance at careers fairs, provision of information to learned societies, working collaboratively with other organisations to promote the field to encourage increased numbers of trainees to enter the field.

Through representation on appropriate Specialty Advisory Committees of the Royal College of Physicians, BHIVA supports medical specialty curriculum development and contribute to assessment of trainees via the Diploma in HIV Medicine.

BHIVA will continue to run annual courses to support those wishing to undertake the Diploma in HIV Medicine examination and a general medicine course. It is hoped to run these courses as a series of online webinars making them more accessible to all.

BHIVA will continue to run the annual spring and autumn conferences to provide continued professional development for its members and the wider HIV community. The 2021 conference programmes included a diverse range of educational sessions benefiting not only healthcare professionals within the field of HIV but also our community members. The HIV community continue to be well represented with a number community lead sessions included both in the 2021 programme. Such sessions are also planned for the two conferences in 2022.

By carrying out regular reviews of the educational needs of members, BHIVA will develop updated educational material on factors pertinent to the optimal management of those with HIV, including through web-based e-learning modules and using that feedback in the development of the scientific and educational programmes for the BHIVA conferences.

International growth and membership

Furthering its reach through collaboration with other learned societies and HIV charities will enable BHIVA to establish its reputation on an international stage to raise BHIVA's profile and grow both its international and UK membership.

Developing its international presence through joint working with international learned societies will also enable the association to support best clinical practice in non-UK settings through the successful international exchange programme.

BHIVA will encourage wider participation in BHIVA, through supporting trainees, new researchers and community members to become involved with the BHIVA Executive Committee and/or its subcommittees, to encourage people to speak on behalf of BHIVA at national/international meetings, and to represent BHIVA on external groups and committees. A comprehensive EDI review is planned for 2022 which will also inform us about any barriers and challenges to participation which we will then work to address.

Promoting research and sharing best practice

BHIVA has an opportunity to shape the future of HIV care through representation on national bodies and contribution to policies impacting the health and wellbeing of people living with HIV. We continue to forge closer working with groups that are campaigning for the fair treatment of people with HIV, and have done extensive work with the Civil Aviation Authority and the Ministry of Defence this year campaigning for fair treatment of pilots working within the aviation industry as well as those in the armed forces. BHIVA are also working closely with the Advisory Committee on the Safety of Blood, Tissues and Organs (SaBTO), the Joint Committee on Vaccination and Immunisation (JCVI) and the UKHSA.

The association will continue to share updated information on the latest topics of relevance for those managing HIV, such as through the provision of conference feedback meetings for the major international conferences and/or the development of a programme of podcasts highlighting new and evolving areas of research.

The charity's provision of collaborative responses to consultations, media representation of HIV, workforce planning and, exceptionally, individual cases of stigma, discrimination or suboptimal care is an important part of maintaining standards and ensuring best practice in the field.

BHIVA's ongoing work in supporting high-quality research projects through the provision of research awards will continue to ensure that research will have impact and value to the UK setting. The guidelines have also been updated this year to allow submissions from those where the work would be conducted outside the UK but where it would benefit BHIVA members.

The association will continue to use its peer-reviewed journal, *HIV Medicine*, to disseminate the highest quality research by publishing original articles, reviews and guidelines on all aspects of HIV treatment and diagnosis.

We will appoint new Associate Editors in 2022 as well as a Reviews Editor as we introduce a new series of commissioned reviews for the journal. We will also sign up to the People First Charter, requiring that all journal submissions use person-centred language, and will work with the Publishers to introduce steps to achieve this during the submission and editorial processes.

Community/ Third sector engagement

BHIVA will support community organisations to promote healthy living and engagement in care decisions through development and review of information materials and community forums.

The charity plans to build mutually beneficial relationships with and support related third-sector organisations working within the HIV field.

""I'm going to retire from the NHS and from clinical work in March and intend to focus on digital health for any work that I will do afterwards. I've been a BHIVA member for about 18 years and an HIV doctor for 26 years, and it is with some sadness but well thought through that I wish to end my membership. I wish you all the best in the endeavour to end HIV transmission in the UK and look after the remaining people living with HIV in the best possible ways."

Retiring BHIVA member

"Thank you for all you do to help support community organisations and the wider sector."

Community BHIVA member

"Thank you BHIVA for the regular COVID updates."

Current BHIVA member

BHIVA membership annual report to 31 October 2021

BHIVA membership numbers are reported in May of each year. Membership in 2021 (744) showed a small decrease from the previous year.

The reduction in numbers may be as a result of the continued disruption being caused by the COVID-19. Retired consultants are retaining membership for a period after retiring, showing loyalty to BHIVA. The BHIVA international membership category, introduced in 2020 has been successful and BHIVA will continue to promote this.

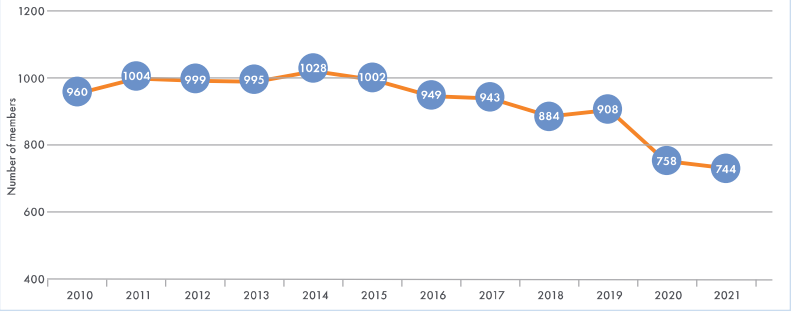
BHIVA membership benefits include:

- Discounted registration for BHIVA conferences (CPD approved)
- Access to the BHIVA website members' area
- Voting rights for BHIVA Officers and Executive Committee elections (eligibility subject to joining date and membership category)
- Eligibility to stand for election to the BHIVA Executive Committee (eligibility subject to joining date)
- Free subscription to the BHIVA journal, HIV Medicine (10 issues p.a. and online access)
- Access to online e-learning modules
- Free subscription to the BHIVA Members Matters email (up to 12 issues p.a.)
- Free subscription to HIV Treatment Bulletin, provided by HIV i-Base (by email)
- BHIVA nominations for Clinical Excellence Awards (eligible UK-based consultant members only)
- Access to BHIVA Research Awards and other scholarships and bursaries
- Access to BASHH/BHIVA/FSRH Mentoring Scheme
- Membership subscription fees approved for income tax relief
- Access to online webcasts

Membership fee income is vital to the association, both in terms of securing funding which helps to contribute towards the work of BHIVA and in reinforcing the independence of the association. Despite the slight drop in membership, being considerate of the difficulties faced by its members during the COVID-19 pandemic, the charity trustees took the decision again not to increase the membership fees in 2021. This decision was taken to enable more HIV professionals to enjoy all the benefits that BHIVA membership offers.

Members are drawn from across the specialty and include healthcare and allied professionals, as well as representatives from the pharmaceutical industry and the community of people living with HIV. Following the creation in 2016 of a membership category for community, BHIVA has seen a significant rise in community membership and participation in the association's activities. These strong links with the community have also helped to improve community led participation at conferences and guidelines.

MEMBERS AT MEMBERSHIP YEAR END (31 OCTOBER)[1]



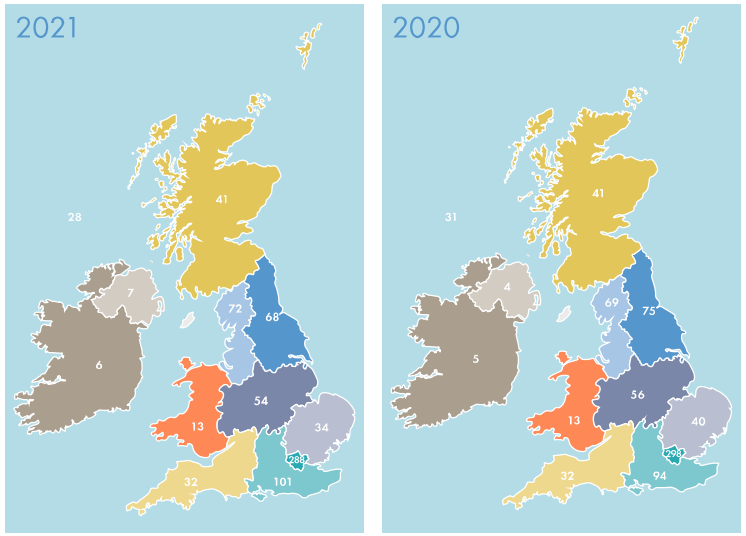
MEMBERSHIP CATEGORY	2021		TREND	2020		FEES
	No	%	%	No	%	2022
Consultant	364	49%	=	372	49%	£210[2]
Non-consultant	201	27%	↑	199	26%	£95
BHIVA Affiliated[3]	70	9%	↓	75	10%	£75
BHIVA UK-CAB	42	6%	↑	40	5%	£20
BHIVA International (HMIC/ LMIC)[4]	23	2%	↓	29	4%	£40/£20
Retired consultant	16	2%	=	15	2%	£95
Life member[5]	20	3%	↑	18	2%	FOC
Medical student	6	1%	=	8	1%	£40
Annual member[6]	2	1%	=	2	1%	FOC
Total BHIVA members	**744**	**100%**	**[–1.88%]**	**758**	**100%**	

SUMMARY OF MEMBERS NOT RENEWING BY 31 OCTOBER 2021

MEMBERS NOT RENEWED	2021	2020	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010
Total cancellations	19	39	20	23	29	40	39	33	40	38	18	26
Not renewed (lapsed)	94	212	101	149	116	112	109	79	99	79	109	108
Total	**113**	**251**	**121**	**172**	**145**	**152**	**148**	**112**	**139**	**117**	**127**	**134**

[1] At 31 October each year, being the end of the membership year
[2] Plus joining fee for consultant members of £30
[3] CHIVA (consultant and non-consultant), Dieticians in HIV, HIVPA, NHIVNA, RHIVA and SSHA
[4] Includes high-income countries (HIC); and low and middle-income (LMIC) countries
[5] Prof J Anderson CBE, Dr D Asboe, Prof F Barré-Sinoussi, Dr R Basu Roy, Dr J Bingham, Dr R Brettle, Mr S Collins, Lord Fowler, Prof B Gazzard CBE, Prof M Johnson, Prof C Leen, Prof S Lucas, Prof C Orkin, Dr A Pozniak, Mr L Russell-Moyle MP, Dr M Tenant-Flowers, Dr E Wilkins and Dr I Williams
[6] UK-CAB lead on standards, Mr Ben Cromarty and Community representative, Ms Mel Rattue

MEMBERS WORK REGION 2021 v 2020



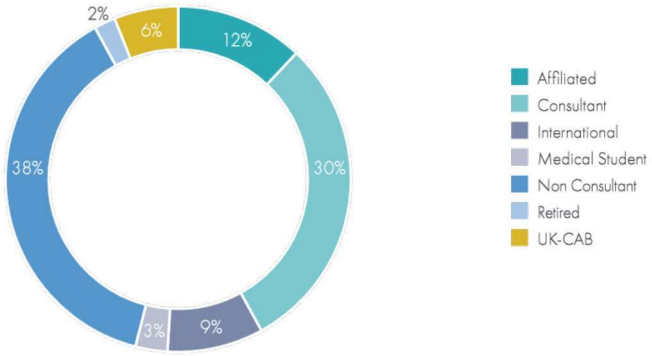
As ever, BHIVA is disappointed when members leave the association but during the year 2021 there was a lower number (113) of members not renewing than has been usual in previous years, most likely due to redeployment or retirement from the HIV sector. Of those who contacted BHIVA to cancel their subscription, some generous remarks have been recorded:

- Have now retired from HIV clinical practice so will quietly retire from BHIVA too. All the best!
- I am leaving the speciality to focus on things at home.
- I have retired and I will no longer renew my subscription when due next year. Thank you for your professional support over the many years I have worked in the HIV specialty.

REASON FOR CANCELLATION

REASON FOR CANCELLATION	NO	%
Retired	6	32%
No reason given/Other	6	32%
No longer working in HIV	5	26%
Financial pressures	1	5%
Parental leave	1	5%
Total cancelled members	**19**	**100%**

GRAPH SHOWS THE PREVIOUS MEMBERSHIP CATEGORY OF THOSE 113 MEMBERS WHO LEFT THE ASSOCIATION DURING 2021

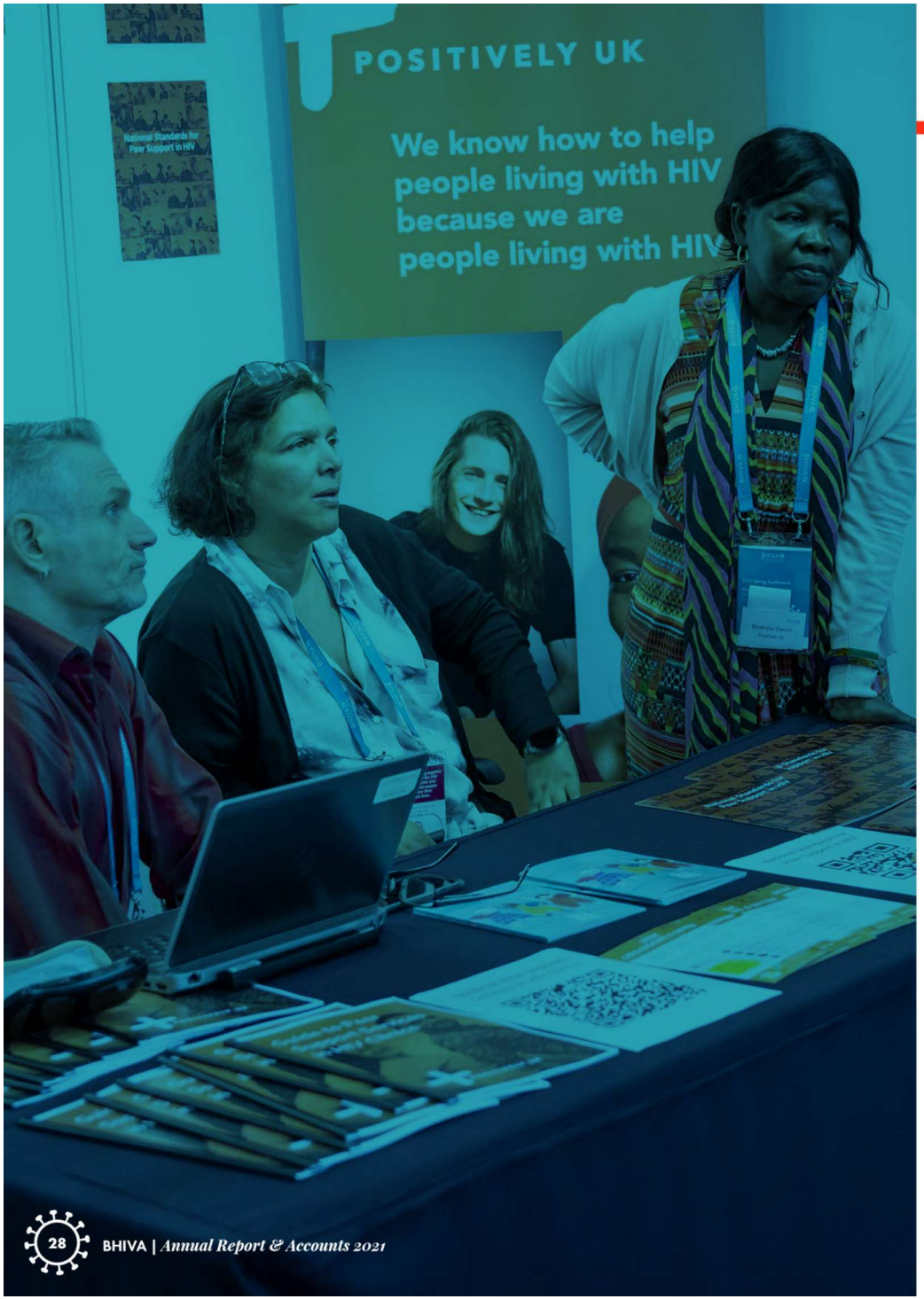


Comments on the publication

Your Guide to... the BHIVA Standards of Care for People Living with HIV 2018

"I have enjoyed being a member and have attended the autumn conference every two years or so. The online conference worked very well and was really informative. Once retired in May I will be moving on to my other interests – my allotment, willow weaving and an organic gardening course!"

Retiring BHIVA member



Structure, governance and management

BHIVA is a Charitable Incorporated Organisation (as of 12 December 2016) governed by its Constitution and registered as a charity with the Charity Commission.

BHIVA is a membership association currently governed by a Board of 18 elected trustees who make up the Executive Committee including four officer posts of Chair, Vice Chair, Honorary Secretary and Honorary Treasurer.

BHIVA endeavours to ensure that the specialty is well represented on the Executive Committee to ensure that local challenges and issues that affect all those working within the field are addressed UK wide. Trustees are drawn from across the HIV sector and include clinicians and other healthcare professionals, academics, a representative from the UK-CAB as well as a trainee Doctors' representative and a new Consultant Doctors' representative.

The methods adopted for the recruitment and appointment of new trustees are as follows:

- A list of nominees is forwarded to all eligible members of the association with a request for their selections to fill the vacancies
- The election scrutineer will normally be the immediate past chair of the association or another person nominated by the Executive Committee
- The results of the election are declared at the Annual General Meeting.

Nominees are required to complete a trustee declaration form, a conflict-of-interest form and a skills assessment form at time of nomination. All members of the Executive Committee give their time voluntarily and receive no paid benefits from the charity.

On joining the BHIVA Executive Committee, trustees are provided with an induction pack that includes an outline of the role and expectations, a copy of the constitution, relevant policy and administration documents required to carry out the role as well as Charity Commission information about the responsibilities of becoming a charity trustee. Each new trustee also undertakes a tailored induction programme and is offered mentoring support from existing trustees.

Beyond their governance duties, trustees are expected to take an active role in the work of the charity according to their expertise through engagement with at least one of the five specialist subcommittees. Each subcommittee manages the activities of the charity and is led by a chair and vice chair. Under the subcommittees also sit a variety of specialist working and writing groups, led by and elected or appointed BHIVA member, who have specific responsibilities and bring a depth of knowledge and expertise to the subcommittees.

The trustees hold quarterly Executive Committee meetings to review the activities of the charity and consider its plans.

To retain its position at the forefront of HIV care, BHIVA is also affiliated with all the other key charities and associations who work within the field including:

- Children's HIV Association of UK and Ireland (CHIVA)
- British Dietetic Association HIV Care Specialist Group (BDA)
- HIV Pharmacy Association (HIVPA)
- National HIV Nurses Association (NHIVNA)
- HIV Trainee Association (HIVTA)
- Rehabilitation in HIV Association (RHIVA)
- Society of Sexual Health Advisers (SSHA)
- UK Community Advisory Board (UK-CAB)

BHIVA has developed important links with other organisations, encouraging exchange of information between national and international centres including:

- British Psychological Society (BPS)
- Federation of Infection Societies (FIS)
- International AIDS Society (IAS)
- European AIDS Clinical Society (EACS)
- Medical Research Council (MRC)
- National AIDS Trust (NAT)
- Terrence Higgins Trust (THT)
- University of Liverpool Drug Interaction website.

Governance review update

Following the commissioning of a governance review in August 2018, the Executive Committee agreed on a development strategy to implement those recommendations it perceived to be fundamental to achieving the charity's overall aims and objectives.

A thorough appraisal of the charity's policies and procedures has been carried out and an updated set of policies and procedures have been drafted and ratified by the trustees and are now in place. Having taken the strategic decision to delay the review of the financial governance until the newly elected financial trustee was in post, this review is now under way and the recruitment of a trustee with financial expertise to the Executive Committee is in progress.

Financial review

At the end of 2021, BHIVA held unrestricted funds of £2,345,833 and restricted funds of £37,421 which are to be used for the purposes of research awards and guidelines.

BHIVA retains a strong financial position and the performance of its ongoing investments providing the charity with a secure short-term future and allowing it to deliver on its aims and objectives of core education for members and those working in the field of HIV.

Investment performance achieved against investment objectives set

Objectives set for 2021 were modest and in the main concentrated on preservation of reserves and cash at bank. A low- to no-risk policy was in place. The charity's reserves policy is currently under review and considerations over reserve thresholds are being considered by the Executive Committee.

All the main objectives were achieved for the year under the categories above through the work of the Executive Committee, subcommittees and working groups.

In addition, BHIVA continues to maintain its membership fees at very reasonable levels and provides generous benefits to its members and thus offers exceptional value.

BHIVA supports community members and groups with complimentary registration, exhibition space, accommodation and travel scholarships to attend both its conferences.

For full details of income and expenditure, please see the Financial Statement pages 38-65.

BHIVA understands the importance of managing risk. Identifying and monitoring risk is key to good governance and enables the trustees to take the agreed required action should it be necessary.

The risks that BHIVA faces have been identified and given scores low to high according to likelihood and impact. The risk register is reviewed annually by the trustees when the risk, impact and control measures in place are assessed and re-evaluated as is deemed necessary.

The risks that BHIVA faces are summarised as follows:

Reduced income from pharmaceutical industry

BHIVA relies partially on industry sponsorship for the delivery its educational objectives. If that funding were to be withdrawn or significantly reduced the impact on the charity's activities would be serious. BHIVA therefore works hard to build and maintain strong partnerships with industry colleagues and conducts regular review meetings to monitor and report back on how the funding provided is used to further the work of the association.

Cancellation of meetings or conferences

The risks associated with the sudden cancellation of the spring or autumn conferences are significant. The size of the events means that venues, catering and all other associated third-party suppliers must be booked well in advance to ensure the right location and support for the events. BHIVA therefore runs the risk of having to pay cancellation penalties to suppliers in the event of a sudden need to cancel without having received the income to cover these costs. BHIVA therefore always ensures that it negotiates the best possible terms with all suppliers upfront to mitigate any potential cancellation penalties and hold reserves to be able to cover any significant losses.

Reduced income from membership fees

Income from membership fees allows BHIVA to produce a range of tools and resources to its members to support them in their everyday roles. This includes the production of the e-learning modules, guidelines and the national clinical audit programme. The membership also supports the compilation, publication and distribution of the association's journal, *HIV Medicine*.

BHIVA has a subcommittee dedicated to the management of each of the above-mentioned resources who liaise with the membership on an ongoing basis to ensure that the tools made available are useful to everyday practice. BHIVA also carries out regular surveys of members to allow the charity to respond to specific requests. The Executive Committee also continually monitors and evaluates the value that members get for their membership fee and carry out benchmarking exercises against other associations to assess member benefits.

Loss of secretariat services

BHIVA has no permanent employees so relies on the services of an external company to provide secretariat and event management services. BHIVA has a robust contract and service level agreement in place with its third-party supplier and has regular meetings throughout the year to monitor performance.

Loss of website

The BHIVA website was redeveloped in 2019 and much work has gone into ensuring the safety and security of the infrastructure and the data held within it. The website is used as a central repository of information and a point of reference for the membership. It is also an invaluable marketing tool for external relations and industry partnerships.

The website is managed by a third-party provider with whom BHIVA has a performance agreement in place. BHIVA holds regular update meetings with them and has stringent standard operating procedures in place for the storage of data that complies with the latest data protection and GDPR (EU and UK) regulations.

Conference registration data is also held securely and in line with the latest regulations. Data storage solutions are controlled by the website provider and monitored by the secretariat and the BHIVA Executive Committee.

Policies on reserves

The Executive Committee has established a policy whereby the unrestricted funds not committed or invested in tangible assets (the free reserve) held by the charity, should equate to approximately 18 months' resources expended.

Much of the activity carried out by BHIVA is funded by the pharmaceutical industry. In recent years, the number of supporters has dropped from seven industry partners to four. This drop in funding has been mitigated by increasing the cost of major sponsorship but this leaves BHIVA reliant on fewer supporting companies therefore potentially making it vulnerable in the future. This policy, the Executive Committee therefore feels, would allow the association to continue its current activities in the event of any further significant drop in funding.

However, this drop has in part been offset by the charity's growing income from the publishing of its journal *HIV Medicine* and, as a result, the Executive Committee has carried out a review of the reserves policy. The trustees have met to assess the current climate and make any adjustments to ensure that the reserves held are being used and managed in the best interests of the charity and its work.

Funds in deficit

There are no funds in deficit.

Principal funding sources and how expenditure has supported the key objectives

1. Pharmaceutical industry
2. Registration fees from conferences and events
3. Membership
4. MAC AIDS Fund/MAC VIVA GLAM grant fund

The Executive Committee has considered the most appropriate policy for investing funds and, in the current and immediate past economic climate, the preservation of funds and inflation-proofing have been the main criteria of the committee. BHIVA funds currently reside in the following accounts:

- Current account and reserve account at NatWest Bank, part of the Royal Bank of Scotland, which is mainly owned by the UK Government
- Charities account (no notice) – direct at Scottish Widows Bank
- Business account at Santander Bank
- Investment with Rathbone Investment Management Ltd from 30 September 2021
- Charities account – Shawbrook Bank

Availability and adequacy of assets of each of the funds

- NatWest Bank: immediate access to current account and reserve account
- Scottish Widows: immediate access
- Santander Bank: immediate access
- Rathbone Investment Management Ltd (regarded as a long-term investment but funds can be liquidated at short notice)
- Shawbrook Bank
- Transactions, financial position and changes in fixed assets

BHIVA's finances are in a healthy position. BHIVA holds no fixed assets.

Funds held as Custodian Trustee on behalf of others

Not applicable.

Share Capital

Not applicable.

Plans for Future Periods

To continue to conduct the business of the association through its Executive Committee, subcommittees and working groups to meet the objects of the association.

For 2021, the total income of the BHIVA consolidated accounts from donations, investments, charitable activities and BHIVA trading was £868,933 (unrestricted £821,938 and restricted £46,995) and the total resources expended to further the charity's objectives was £850,029 (unrestricted £719,108 and restricted £130,921). Considering the continued challenges presented by COVID-19 the charity managed to retain a stable revenue flow in line with previous years.

Owing to the pandemic, the Spring conference was held on an entirely virtual platform. As in 2020, income and expenditure for this entirely virtual conference were substantially lower than a face to face conference owing to reduced conference registration fees along with reduced costs from e.g. venue hire. BHIVA held a successful, fully face to face conference in Autumn and we hope this will continue in the future. Income from pharmaceutical sponsorship was a little down on 2020, owing to the reduced offer in the virtual conference setting. The *HIV Medicine* journal remained an important source of income. Membership subscriptions income increased slightly, despite the cost of subscription being frozen for some years. BHIVA received good income from dividends on our investments, as stock markets continued to increase during 2020. The economic outlook for 2022 is of course much gloomier and the latter source of income will likely decrease in this financial year.

I am pleased to say that BHIVA appointed a financial trustee (Paula Bibby) in Dec 2021. Her role will be to assist the Treasurer in managing the accounts and providing guidance to the BHIVA Executive committee on the best use of funds in light of the ongoing work on BHIVA's strategic future. In last year's report we noted that we would also work with the Trustee on applying further sustainability criteria to BHIVA's investments. In the light of current stock market turbulence, this has been deferred.

Future risks to income relate to reduced membership subscription income, which will remain frozen, as well as reduced pharmaceutical company sponsorship. With restored face to face conferences, the latter should improve. However, the effects of inflation and energy prices are already being felt in the costs of venue hire for our current activities. As indicated earlier, the performance of our investments is likely to be highly volatile, with considerable uncertainty about when markets will recover.

BHIVA continues to hold a healthy level of reserves. The current reserves policy of 18 months (estimated in the region of £650,000 – excluding conference activity) would allow the association to continue the activities of the charity in the event of a significant drop in funding. In 2022, the Executive Committee will review the reserves policy to ensure compliance with best practice, as per charity commission guidelines, and seek to ensure that available funds are designated and used to maximise achieving the aims and objectives of BHIVA.

Dr Iain Reeves
BHIVA Honorary Treasurer

Statement of Directors' and Trustees' responsibilities

The trustees are responsible for preparing a trustees' annual report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales requires the charity trustees to prepare financial statements for each year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, of the charity for that period. In preparing the financial statements, the trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- Observe the methods and principles in the applicable Charities SORP;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures that must be 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 in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the applicable Charities (Accounts and Reports) Regulations, and the provisions of the Trust deed. They are also responsible for safeguarding the assets of the charity and taking reasonable steps for the prevention and detection of fraud and other irregularities.

The trustees are responsible for the maintenance and integrity of the charity and financial information included on the charity's website in accordance with legislation in the United Kingdom governing the preparation and dissemination of financial statements.

TRUSTEE DECLARATION

I declare that:

- I am over age 18.
- I am not an undischarged bankrupt.
- I have not previously been removed from trusteeship of a charity by a Court or the Charity Commission.
- I am not under a disqualification order under the Company Directors' Disqualification Act 1986.
- I am, in the light of the above, not disqualified by the Charities Act 1993 (section 72) from acting as a charity trustee.
- I undertake to fulfil my responsibilities and duties as a trustee of the British HIV Association (BHIVA) in good faith and in accordance with the law and within the objects of BHIVA.

I do not have any financial interests in conflict with those of BHIVA (either in person or through family or business connections) except those that I have formally notified in a declaration of interest statement. I will specifically notify any such interest at any meeting where trustees are required to make a decision, which affects my personal interests, and I will absent myself entirely from any decision on the matter and not vote on it.

Appendices

Appendix 1

Trustees' Report and Financial Statements for the year ended 31 December 2021

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REFERENCE AND ADMINISTRATIVE DETAILS OF THE CIO, ITS TRUSTEES AND ADVISERS FOR THE YEAR ENDED 31 DECEMBER 2021

Trustees
Dr T Barber (appointed 3 October 2019)
Dr D Chadwick (re-appointed 3 October 2019)
Dr D Clutterbuck (appointed 22 November 2020)
Dr A Fox (appointed 22 November 2020)
Prof B Gazzard CBE, Joint Editor-in-Chief *HIV Medicine*
Professor Y Gilleece, Honorary Secretary (appointed 3 October 2019)
Miss J Josh, UK-CAB Community Representative (appointed 17 September 2019)
Dr R Kulasegaram (appointed 3 October 2019)
Dr N Larbalestier (appointed 22 November 2020)
Dr N Mackie (re-appointed 3 October 2019)
Dr R Metcalfe, New Consultant Doctors' Representative (appointed 22 November 2020)
Mrs S Morris (retired as trustee November 2021)
Dr M Page, (retired as Trainee Doctors' Representative November 2021)
Dr I Reeves, Honorary Treasurer (appointed 22 November 2020)
Prof C Sabin, Vice Chair (appointed 3 October 2019)
Dr J Underwood (appointed 3 October 2019)
Dr C van Halsema (appointed 5 October 2018)
Dr L Waters, Chair (appointed 3 October 2019)

Charity registered number
1170707

Registered office and operational address
BHIVA secretariat, Medivents Ltd, Devonshire Business Centre, Works Road, Letchworth, Herts SG6 1GJ

Investment advisers
Rathbone Investment Management Ltd, 1 Curzon Street, London W1J 5FB

Auditors
Moore Kingston Smith LLP, 4 Victoria Square, St Albans, Hertfordshire AL1 3TF

Bankers
Santander Bank, Bootle, Merseyside L30 4GB

Solicitors
Stone King LLP, Boundary House, 91 Charterhouse Street, London EC1M 6HR

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS AND TRUSTEES OF BRITISH HIV ASSOCIATION

Opinion
We have audited the financial statements of British HIV Association (the 'parent CIO') and its subsidiaries (the 'group') for the year ended 31 December 2021 which comprise the Consolidated Statement of Financial Activities, the Consolidated and parent CIO Balance Sheets, the Consolidated Cash Flow Statement and notes to the financial statements, including 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 group's and the parent CIO's affairs as at 31 December 2021 and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006 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 CIO 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 group's and CIO'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 contained within the annual report. 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.

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 course of 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 themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

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

Matters on which we are required to report by exception

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

We have nothing to report in respect of the following matters where the Companies Act 2006 and the Charities Act 2011 require us to report to you if, in our opinion:

- the parent CIO has not kept adequate and sufficient accounting records, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent CIO's financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies exemption in preparing the Trustees' Annual Report and from preparing a strategic report.

Responsibilities of trustees

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

In preparing the financial statements, the trustees are responsible for assessing the group and parent CIO's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the group or parent CIO 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 the Companies Act 2006 and section 152 of the Charities Act 2011 and report in accordance with those Acts.

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 group and parent CIO'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 group and parent CIO'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 group or parent CIO 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.
- Obtain sufficient appropriate audit evidence regarding the financial information of the entities or business activities within the group to express an opinion on the consolidated financial statements. We are responsible for the direction, supervision and performance of the group audit. We remain solely responsible for our audit report.

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 are capable of detecting 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 CIO.

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the CIO and considered that the most significant are the Companies Act 2006, 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 CIO 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 CIO's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and, in respect of the consolidated financial statements, 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 CIO's members and trustees those matters which 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 CIO, the CIO's members, as a body, and the CIO's trustees, as a body, for our audit work, for this report, or for the opinion we have formed.

Silvia Vitiello (Senior Statutory Auditor)
for and on behalf of Moore Kingston Smith LLP, Statutory Auditor

Moore Kingston Smith LLP
Chartered Accountants
Statutory Auditors
4 Victoria Square
St Albans
Hertfordshire
AL1 3TF

Date: 18/01/2023

Moore Kingston Smith LLP are eligible to act as auditors in terms of section 1212 of the Companies Act 2006.

CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 DECEMBER 2021

	Note	Unrestricted funds 2021 £	Restricted funds 2021 £	Total funds 2021 £	Total funds 2020 £
Income from:					
Donations and grants	2	**15,400**	**15,000**	**30,400**	28,300
Charitable activities	3	**770,654**	**31,995**	**802,649**	753,442
Investments	4	**35,884**	**-**	**35,884**	25,801
Total income		**821,938**	**46,995**	**868,933**	807,543
Expenditure on:					
Raising funds		**12,993**	**-**	**12,993**	11,017
Charitable activities	5	**706,115**	**130,921**	**837,036**	901,395
Total expenditure		**719,108**	**130,921**	**850,029**	912,412
Net income/(expenditure) before net gains on investments		**102,830**	**(83,926)**	**18,904**	(104,869)
Net gains on investments	9	**226,158**	**-**	**226,158**	163,921
Net income/(expenditure) before taxation		**328,988**	**(83,926)**	**245,062**	59,052
Taxation	7	**(3,148)**	**-**	**(3,148)**	(82)
Net income/(expenditure) after taxation		**325,840**	**(83,926)**	**241,914**	58,970
Transfers between funds	12	**(73,771)**	**73,771**	**-**	-
Net movement in funds		**252,069**	**(10,155)**	**241,914**	58,970
Reconciliation of funds:					
Total funds brought forward		**2,093,764**	**47,576**	**2,141,340**	2,082,370
Net movement in funds		**252,069**	**(10,155)**	**241,914**	58,970
Total funds carried forward		**2,345,833**	**37,421**	**2,383,254**	2,141,340

The Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 51 to 65 form part of these financial statements.

CIO STATEMENT OF FINANCIAL ACTIVITIES AS AT 31 DECEMBER 2021

	Note	Unrestricted funds 2021 £	Restricted funds 2021 £	Total funds 2021 £	Total funds 2020 £
INCOME FROM:					
Donations and grants	2	**15,400**	**15,000**	**30,400**	28,300
Charitable activities		**737,468**	**31,995**	**769,463**	742,547
Investments	4	**35,884**	**-**	**35,884**	25,801
TOTAL INCOME		**788,752**	**46,995**	**835,747**	796,648
EXPENDITURE ON:					
Raising funds		**12,993**	**-**	**12,993**	11,017
Charitable activities		**689,499**	**130,921**	**820,420**	890,930
TOTAL EXPENDITURE		**702,492**	**130,921**	**833,413**	901,947
NET EXPENDITURE BEFORE NET GAINS ON INVESTMENTS		**86,260**	**(83,926)**	**2,334**	(105,299)
Net gains on investments	9	**226,158**	**-**	**226,158**	163,921
NET INCOME/(EXPENDITURE)		**312,418**	**(83,926)**	**228,492**	58,622
Transfers between funds	12	**(73,771)**	**73,771**	**-**	-
NET MOVEMENT IN FUNDS		**238,647**	**(10,155)**	**228,492**	58,622
RECONCILIATION OF FUNDS:					
Total funds brought forward		**2,093,416**	**47,576**	**2,140,992**	2,082,370
Net movement in funds		**238,647**	**(10,155)**	**228,492**	58,622
TOTAL FUNDS CARRIED FORWARD		**2,332,063**	**37,421**	**2,369,484**	2,140,992

The notes on pages 51 to 65 form part of these financial statements.

CONSOLIDATED BALANCE SHEET AS AT 31 DECEMBER 2021

	Note		2021 £		2020 £
Fixed assets					
Tangible assets	8		**218**		463
Investments	9		**1,870,280**		1,632,122
			1,870,498		1,632,585
Current assets					
Debtors	10	**456,363**		309,803	
Cash and cash equivalents		**561,943**		562,440	
		1,018,306		872,243	
Creditors: amounts falling due within one year	11	**(505,550)**		(363,488)	
Net current assets			**512,756**		508,755
Total assets less current liabilities			**2,383,254**		2,141,340
Total net assets			**2,383,254**		2,141,340
Charity funds					
Restricted funds	12		**37,421**		47,576
Unrestricted funds	12		**2,345,833**		2,093,764
Total funds			**2,383,254**		2,141,340

The financial statements were approved and authorised for issue by the Trustees and signed on their behalf by:

Iain Reeves
Iain Reeves (Dec 21, 2022 12:21 GMT)

Dr I Reeves
Honorary Treasurer

Date: Dec 21, 2022

The notes on pages 51 to 65 form part of these financial statements.

CIO BALANCE SHEET AS AT 31 DECEMBER 2021

	Note		2021 £		2020 £
Fixed assets					
Tangible assets	8		**218**		463
Investments	9		**1,870,281**		1,632,123
			1,870,499		1,632,586
Current assets					
Debtors	10	**454,593**		308,396	
Cash at bank and in hand		**545,992**		550,185	
		1,000,585		858,581	
Creditors: amounts falling due within one year	11	**(501,600)**		(350,175)	
Net current assets			**498,985**		508,406
Total assets less current liabilities			**2,369,484**		2,140,992
Total net assets			**2,369,484**		2,140,992
Charity funds					
Restricted funds	12		**37,421**		47,576
Unrestricted funds	12		**2,332,063**		2,093,416
Total funds			**2,369,484**		2,140,992

The financial statements were approved and authorised for issue by the Trustees and signed on their behalf by:

Iain Reeves
Iain Reeves (Dec 21, 2022 12:21 GMT)

Dr I Reeves
Honorary Treasurer

Date: Dec 21, 2022

The notes on pages 51 to 65 form part of these financial statements.

CONSOLIDATED STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31 DECEMBER 2021

	Note	2021 £	2020 £
Cash flows from operating activities			
Net cash used in operating activities	14	**(24,381)**	(62,526)
Cash flows from investing activities			
Dividends and interests received from investments		**35,884**	25,801
Purchase of tangible fixed assets		**-**	(599)
Proceeds from sale of listed investments		**191,862**	601,498
Purchase of listed investments		**(203,862)**	(542,936)
Net cash provided by investing activities		**23,884**	**83,764**
Change in cash and cash equivalents in the year		**(497)**	**21,238**
Cash and cash equivalents at the beginning of the year		**562,440**	541,202
Cash and cash equivalents at the end of the year	15	**561,943**	562,440

The notes on pages 51 to 65 form part of these financial statements.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2021

1. ACCOUNTING POLICIES

1.1 BASIS OF PREPARATION OF FINANCIAL STATEMENTS

The financial statements have been prepared in accordance with the Charities SORP (FRS 102) - Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Charities Act 2011. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

There were no significant estimates or judgements made by management in preparing these financial statements.

British HIV Association meets the definition of a public benefit entity under FRS 102.

The Consolidated Statement of Financial Activities (SOFA) and Consolidated Balance Sheet consolidate the financial statements of the charity and its subsidiary undertaking. The results of the subsidiary are consolidated on a line by line basis.

1.2 GOING CONCERN

The Trustees have considered the charity's forecasts and projections and have taken account of pressures on income, particularly with consideration to the ongoing impact of the COVID-19 pandemic. After making enquiries the Trustees have concluded that there is a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. Therefore, these accounts have been prepared on the going concern basis.

1.3 INCOME

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

In pursuit of its charitable objectives, the CIO organises and hosts conferences, for which registration fees, sponsorship income, exhibition stand income and other sundry income is received. Where this income is received in advance of the given conference taking place, it is treated as deferred income and included within creditors in the accounts. The income is released once the conference has taken place.

Income from membership subscriptions is recognised in line with the period to which it relates.

Income from royalties is recognised in line with the period to which it relates.

Income from grants and donations are recognised when the CIO has been notified in writing of both the amount and settlement date. In the event that a grant or donation is subject to conditions that require a level of performance before the CIO is entitled to the funds, the income is deferred and not recognised until those conditions are fully met, or the fulfillment of those conditions is wholly within the control of the CIO and it is probable that those conditions will be fulfilled in the reporting period.

Investment income is recognised in the period in which the CIO becomes entitled to the income.

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

1.4 EXPENDITURE

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably.

All expenditure is accounted for on an accruals basis.

Governance costs are those incurred in connection with administration of the CIO and compliance with constitutional and statutory requirements.

Expenditure on raising funds comprises investment management fees.

Expenditure on charitable activities is incurred on directly undertaking the activities which further the Group's objectives, as well as any associated support costs.

1.5 TAXATION

The CIO is considered to pass the tests set out in Paragraph 1 Schedule 6 of the Finance Act 2010 and therefore it meets the definition of a charitable company for UK corporation tax purposes. Accordingly, the CIO is potentially exempt from taxation in respect of income or capital gains received within categories covered by Chapter 3 Part 11 of the Corporation Tax Act 2010 or Section 256 of the Taxation of Chargeable Gains Act 1992, to the extent that such income or gains are applied exclusively to charitable purposes.

1.6 TANGIBLE FIXED ASSETS AND DEPRECIATION

Tangible fixed assets are carried at cost, net of depreciation and any provision for impairment. Depreciation is provided at rates calculated to write off the cost of fixed assets, less their estimated residual value, over their expected useful lives on the following bases:

Office equipment – 3 years straight line

1.7 INVESTMENTS

Fixed asset investments are a form of financial instrument and are initially recognised at their transaction cost and subsequently measured at fair value at the Balance Sheet date, unless fair value cannot be measured reliably in which case it is measured at cost less impairment. Investment gains and losses, whether realised or unrealised, are combined and shown in the heading 'Gains/(losses) on investments' in the Statement of Financial Activities.

Investments in subsidiaries are valued at cost less provision for impairment.

1.8 DEBTORS

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

1.9 CASH AT BANK AND IN HAND

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

1.10 CREDITORS

Liabilities are recognised when there is an obligation at the Balance Sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Liabilities are recognised at the amount that the CIO anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

1.11 FINANCIAL INSTRUMENTS

The Group only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

1.12 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 Group and which have not been designated for other purposes.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the Group for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

2. INCOME FROM DONATIONS AND GRANTS

	Unrestricted funds 2021 £	Restricted funds 2021 £	Total funds 2021 £
Donations	-	15,000	**15,000**
Grants	15,400	-	**15,400**
TOTAL 2021	15,400	15,000	**30,400**

	Restricted funds 2020 £	Total funds 2020 £
Donations	16,300	16,300
Grants	12,000	12,000
TOTAL 2020	28,300	28,300

3. INCOME FROM CHARITABLE ACTIVITIES

	Unrestricted funds 2021 £	Restricted funds 2021 £	Total funds 2021 £
Membership subscriptions	126,379	-	**126,379**
Major sponsorship fees	160,400	-	**160,400**
HIV medicine royalty & DAIG subscriptions	246,622	-	**246,622**
Conference registration fees	39,163	-	**39,163**
Exhibition stands	139,000	-	**139,000**
Other conference income	33,840	11,995	**45,835**
Scholarships and bursaries	(250)	-	**(250)**
MAC AIDS Fund	25,000	-	**25,000**
MAC AIDS Fund	-	20,000	**20,000**
Miscellaneous income	500	-	**500**
TOTAL 2021	770,654	31,995	**802,649**

	Unrestricted funds 2020 £	Restricted funds 2020 £	Total funds 2020 £
Membership subscriptions	115,301	-	115,301
Major sponsorship fees	214,900	-	214,900
HIV medicine royalty & DAIG subscriptions	257,827	-	257,827
Conference registration fees	16,887	-	16,887
Exhibition stands	68,906	-	68,906
Other conference income	49,558	-	49,558
MAC AIDS fund	-	30,000	30,000
Miscellaneous income	63	-	63
TOTAL 2020	723,442	30,000	753,442

4. INVESTMENT INCOME

	Unrestricted funds 2021 £	Total funds 2021 £
Bank deposit interest	52	**52**
Dividends received from investments	35,832	**35,832**
TOTAL 2021	35,884	**35,884**

	Unrestricted funds 2020 £	Total funds 2020 £
Bank deposit interest	87	87
Dividends received from investments	25,714	25,714
TOTAL 2020	25,801	25,801

5. ANALYSIS OF EXPENDITURE BY ACTIVITIES

	Direct costs 2021 £	Support and governance costs 2021 £	Total funds 2021 £
Charitable activities	553,652	283,384	**837,036**
TOTAL 2021	553,652	283,384	**837,036**

	Direct costs 2020 £	Support and governance costs 2020 £	Total funds 2020 £
Charitable activities	575,548	325,847	901,395
TOTAL 2020	575,548	325,847	901,395

5. ANALYSIS OF EXPENDITURE BY ACTIVITIES *(CONTINUED)*

ANALYSIS OF DIRECT COSTS

	Total funds 2021 £	Total funds 2020 £
Subsidies to affiliated associations and donations	**10,000**	11,000
Research awards	**70,036**	57,737
Exchange scholarship programme	**(8,720)**	12,635
Conferences, courses and events	**341,234**	321,342
National clinical audit	**19,200**	16,100
HIV medicine, guidelines and educational tools	**94,825**	104,058
Website and app development and maintenance	**27,077**	52,676
	553,652	575,548

ANALYSIS OF SUPPORT COSTS

	Total funds 2021 £	Total funds 2020 £
Secretariat fees	**211,814**	211,500
Establishment, committee and communications	**40,770**	51,840
Accountancy and bookkeeping fees	**6,621**	8,871
Auditors remuneration	**5,000**	5,750
Legal and professional fees	**8,922**	4,976
Bank and currency charges	**4,074**	3,694
Irrecoverable VAT	**5,938**	38,697
Depreciation	**245**	519
	283,384	325,847

6. KEY MANAGEMENT PERSONNEL

The CIO considers its key management personnel to be the Trustees. The Trustees give their time and expertise without any form of remuneration or other benefit in kind as noted below.

During the year, no Trustees received any remuneration or other benefits (2020 - £NIL). During the year, 3 Trustees received reimbursement of expenses or had expenses paid directly to a third party on their behalf totalling £443 (2020: £1,274 to 7 Trustees).

The CIO has no employees and therefore, no employee received emoluments over £60,000 per annum.

7. TAXATION

	2021 £	2020 £
Corporation tax payable by trading subsidiary	**3,148**	82

8. TANGIBLE FIXED ASSETS

GROUP AND CIO

	Office equipment £
COST	
At 1 January 2021	**1,656**
At 31 December 2021	**1,656**
DEPRECIATION	
At 1 January 2021	**1,193**
Charge for the year	**245**
At 31 December 2021	**1,438**
NET BOOK VALUE	
At 31 December 2021	**218**
At 31 December 2020	463

9. FIXED ASSET INVESTMENTS

GROUP	Listed investments £
VALUATION	
At 1 January 2021	1,632,122
Additions	203,862
Disposals (proceeds £191,862; realised gain £28,980)	(162,882)
Revaluations	197,178
AT 31 DECEMBER 2021	1,870,280

All the fixed asset investments are held in the UK.

All investments are carried at their fair value. Investment in equities and fixed interest securities are all traded in quoted public markets, primarily the London Stock Exchange. Holdings in common investment funds, unit trusts and open-ended investment companies are at the bid price. The basis of fair value for quoted investments is equivalent to the market value, uisng the bid price. Asset sales and purchases are recognised at the date of trade at cost (that is their transaction value).

The Trustees delegate the management of their investments to Rathbones. The CIO is operating an investment policy that provides for a degree of diversification of holdings within different shares and unit trust investments. The CIO has invested in a range of holdings in order to protect against exposure to volatility in the market to reduce risk and preserve capital.

The CIO does not make use of derivatives and similar complex financial instruments as it takes the view that investments are held for their longer term growth and annual income.

The CIO has no material investment holdings in markets subject to exchange controls or trading restrictions.

The total net gains on investments as per the Statement of Financial Activities comprises realised gains of £28,980 and unrealised revaluation gains of £197,178.

CIO	Investments in subsidiary companies £	Listed investments £	Total £
COST OR VALUATION			
At 1 January 2021	1	1,632,122	1,632,123
Additions	-	203,862	203,862
Disposals (proceeds £191,862; realised gain £28,980)	-	(162,882)	(162,882)
Revaluations	-	197,178	197,178
AT 31 DECEMBER 2021	1	1,870,280	1,870,281

INVESTMENTS IN SUBSIDIARY COMPANIES

BHIVA Trading Limited is a private company limited by shares, which was incorporated in England and Wales on 9 December 2019. It is 100% owned and controlled by the British HIV Association.

The following was a subsidiary undertaking of the CIO:

Name	Company number	Registered office or principal place of business	Class of shares	Holding
BHIVA Trading Limited	12353562	Spirella Building, Bridge Road, Letchworth, Hertfordshire,SG6 4ET	Ordinary	100%

The financial results of the subsidiary for the year were:

	Income £	Expenditure £	Profit for the period £	Net assets £
BHIVA Trading Limited	**33,186**	**(16,616)**	**13,422**	**13,771**

10. DEBTORS

10. DEBTORS

	Group 2021 £	Group 2020 £	CIO 2021 £	CIO 2020 £
DUE WITHIN ONE YEAR				
Trade debtors	**126,908**	88,525	**125,685**	87,405
Accrued income	**276,106**	220,297	**275,559**	220,010
Prepayments	**53,349**	981	**53,349**	981
	456,363	309,803	**454,593**	308,396

11. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2021 £	2020 £	2021 £	2020 £
Trade creditors	**330,339**	219,125	**325,856**	193,084
Amounts owed to group undertakings	**-**	-	**13,100**	14,809
Corporation tax	**3,148**	82	**-**	-
Other creditors	**7,320**	-	**1**	1
Accruals and deferred income	**164,743**	144,281	**162,643**	142,281
	505,550	363,488	**501,600**	350,175

	Group 2021 £	Group 2020 £	CIO 2021 £	CIO 2020 £
DEFERRED INCOME				
Deferred income at 1 January 2021	**36,218**	41,145	**36,218**	41,145
Resources deferred during the year	**50,923**	36,218	**50,923**	36,218
Amounts released from previous periods	**(31,741)**	(41,145)	**(31,741)**	(41,145)
Deferred income as at 31 December 2021	**55,400**	36,218	**55,400**	36,218

12. STATEMENT OF FUNDS

CURRENT YEAR

	Balance at 1 January 2021 £	Income £	Expenditure £	Taxation £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 December 2021 £
UNRESTRICTED FUNDS							
General fund	**2,093,416**	**788,752**	**(702,492)**	**-**	**(73,771)**	**226,158**	**2,332,063**
Trading subsidiary	**348**	**33,186**	**(16,616)**	**(3,148)**	**-**	**-**	**13,770**
	2,093,764	**821,938**	**(719,108)**	**(3,148)**	**(73,771)**	**226,158**	**2,345,833**
RESTRICTED FUNDS							
Research awards fund	**-**	**15,000**	**(46,275)**	**-**	**31,275**	**-**	**-**
Website development fund	**4,000**	**-**	**(1,020)**	**-**	**-**	**-**	**2,980**
MAC AIDS fund	**12,769**	**20,000**	**(75,265)**	**-**	**42,496**	**-**	**-**
Gilead podcasts fund	**27,617**	**-**	**-**	**-**	**-**	**-**	**27,617**
Gilead Pakistan fund	**3,190**	**-**	**-**	**-**	**-**	**-**	**3,190**
Gilead Best of Croi	**-**	**11,995**	**(8,361)**	**-**	**-**	**-**	**3,634**
	47,576	**46,995**	**(130,921)**	**-**	**73,771**	**-**	**37,421**
	2,141,340	**868,933**	**(850,029)**	**(3,148)**	**-**	**226,158**	**2,383,254**

PRIOR YEAR

	Balance at 1 January 2020 £	Income £	Expenditure £	Taxation £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 December 2020 £
UNRESTRICTED FUNDS							
General Funds - all funds	2,015,460	721,185	(778,043)	-	(29,107)	163,921	2,093,416
General fund	-	28,058	(27,628)	(82)	-	-	348
	2,015,460	749,243	(805,671)	(82)	(29,107)	163,921	2,093,764
RESTRICTED FUNDS							
Research awards fund	-	16,300	(44,772)	-	28,472	-	-
Website development fund	4,000	-	-	-	-	-	4,000
MAC AIDS fund	32,103	30,000	(49,334)	-	-	-	12,769
Gilead podcasts fund	27,617	-	-	-	-	-	27,617
Gilead Pakistan fund	3,190	-	-	-	-	-	3,190
Gilead Best of Croi	-	12,000	(12,635)	-	635	-	-
	66,910	58,300	(106,741)	-	29,107	-	47,576
	2,082,370	807,543	(912,412)	(82)	-	163,921	2,141,340

The income and expenditure of the trading subsidiary, BHIVA Trading Limited, is presented separately above. These results are consolidated into the overall consolidated financial statements on a line by line basis.

Research awards fund

Originally launched in 2016, the BHIVA research awards are intended to provide funding for research projects that will improve the clinical care and management of people living with HIV in the UK. Income is received annually from Gilead. The fund is expended by way of making awards to individuals.

Website development fund

This fund represents funding received specifically for the development of the BHIVA website. Unspent funds have been carried forward to be utilised in subsequent years.

MAC AIDS Fund

MAC AIDS fund is a charity established in 1994 to support people living with HIV worldwide. It donates funds to communities and organisations that offer services to people with HIV/AIDS and help to prevent the disease through educational programs. This is given each year as restricted funding for this purpose.

Gilead podcasts fund

This fund represents funding received specifically for the production of BHIVA podcasts. These podcasts will take place in 2020-21. Accordingly, the unspent funds have been carried forward at the balance sheet date.

Exchange Scholarship fund

The exchange scholarship enables winning applicants to travel internationally to take be placed at a HIV unit. The programme enables a unique opportunity to increase understanding of the treatment and management of HIV in particularly, the developing world. The scholars can disseminate this information and experience when they return to the UK.

13. ANALYSIS OF NET ASSETS BETWEEN FUNDS

CURRENT YEAR

	Unrestricted funds 2021 £	Restricted funds 2021 £	Total funds 2021 £
Tangible fixed assets	218	-	**218**
Fixed asset investments	1,870,280	-	**1,870,280**
Current assets	1,005,081	37,421	**1,042,502**
Creditors due within one year	(529,746)	-	**(529,746)**
TOTAL	2,345,833	37,421	**2,383,254**

PRIOR YEAR

	Unrestricted funds 2020 £	Restricted funds 2020 £	Total funds 2020 £
Tangible fixed assets	463	-	463
Fixed asset investments	1,632,122	-	1,632,122
Current assets	824,667	47,576	872,243
Creditors due within one year	(363,488)	-	(363,488)
TOTAL	2,093,764	47,576	2,141,340

14. RECONCILIATION OF NET MOVEMENT IN FUNDS TO NET CASH FLOW FROM OPERATING ACTIVITIES

	Group 2021 £	Group 2020 £
Net income for the year (as per Statement of Financial Activities)	**241,914**	58,970
ADJUSTMENTS FOR:		
Depreciation charges	**245**	519
Gains on investments	**(226,158)**	(163,105)
Dividends and interests received from investments	**(35,884)**	(25,801)
(Increase)/decrease in debtors	**(146,560)**	(52,967)
Increase in creditors	**142,062**	115,618
NET CASH USED IN OPERATING ACTIVITIES	**(24,381)**	(66,766)

15. ANALYSIS OF CASH AND CASH EQUIVALENTS

	Group 2021 £	Group 2020 £
Cash in hand	**513,483**	464,819
Cash at broker	**48,460**	97,621
TOTAL CASH AND CASH EQUIVALENTS	**561,943**	562,440

16. ANALYSIS OF CHANGES IN NET DEBT

	At 1 January 2021 £	Cash flows £	At 31 December 2021 £
Cash and cash equivalents	**562,440**	**(497)**	**561,943**
	562,440	**(497)**	**561,943**

17. RELATED PARTY TRANSACTIONS

A Trustee was paid £15,934 during the year & £23,846 in 2020 for providing Media services to the charity. Services were provided on an arm's length basis.

BHIVA
British HIV Association

www.bhiva.org

BRITISH HIV ASSOCIATION

England & Wales - Charity number 1170707

Accounts

BHIVA
British HIV Association

2020

Trustees' Annual
Report & Accounts

www.bhiva.org

Charity Information for the year ending *31 December 2020*

Trustees retiring on 22 November 2020

- Dr Duncan Churchill, retired as Honorary Treasurer
- Dr Nadi Gupta, retired as trustee
- Dr Rageshri Dhairyawan, retired as New Consultant Doctors' Representative
- Ms Angelina Namiba, retired as UK-CAB Community Representative

Trustees from 22 November 2020

Officers

- Dr Laura Waters, Chair, appointed 3 Oct 2019
- Prof Caroline Sabin, Vice Chair, appointed 3 Oct 2019
- Dr Yvonne Gilleece, Honorary Secretary, appointed 3 Oct 2019
- Dr Iain Reeves, Honorary Treasurer, appointed 22 Nov 2020

Elected Trustees

- Dr Tristan Barber, appointed 3 Oct 2019
- Dr David Chadwick, re-appointed 3 Oct 2019
- Dr Daniel Clutterbuck, appointed 22 Nov 2020
- Dr Ashini Fox, appointed 22 Nov 2020
- Dr Ranjababu Kulasegaram, appointed 3 Oct 2019
- Dr Nick Larbalestier, appointed 22 Nov 2020
- Dr Nicola Mackie, re-appointed 3 Oct 2019
- Mrs Sheila Morris, appointed 3 Oct 2019
- Dr Jonathan Underwood, appointed 3 Oct 2019
- Dr Clare van Halsema, appointed 5 Oct 2018

Specific Trustee Roles

- Dr Rebecca Metcalfe, New Consultant Doctors' Representative, appointed 22 Nov 2020
- Prof Brian Gazzard CBE, Joint Editor-in-Chief, *HIV Medicine*
- Miss Jo Josh, UK-CAB Community Representative, appointed as acting representative 17 September 2019, appointed as representative 22 November 2020
- Dr Matthew Page, Trainee Doctors' Representative, appointed 11 Feb 2020

Charity Number

- 1170707

Registered Office and Operational Address

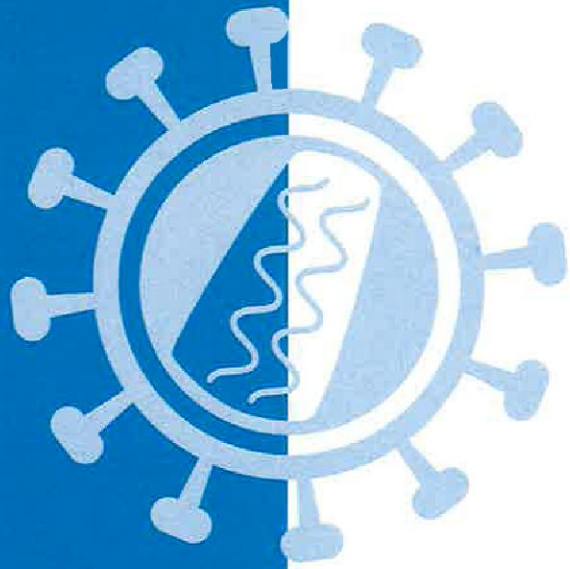
- Medivents Limited
  Spirella Building, Bridge Road,
  Letchworth, Hertfordshire SG6 4ET

Auditors

- Moore Kingston Smith
  4 Victoria Square, St Albans,
  Hertfordshire AL1 3TF

Bankers

- National Westminster Bank plc
  190 The Broadway, Muswell Hill
  London N10 3SD



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"Thank you BHIVA. I have had great benefit and enjoyment from being part of BHIVA for so many years, and have met many wonderful colleagues."

A retiring BHIVA member

"Personally find 'Members Matters' useful as it directs me to the most pertinent info and updates in HIV – essential when time is so short. Thanks."

A consultant comments on 'Members Matters' e-bulletin

About BHIVA

The British HIV Association is the leading UK association representing professionals in HIV. Since its inception in 1995, BHIVA has been committed to providing excellent care for people living with and affected by HIV.

BHIVA is a national advisory body on all aspects of HIV care and the association provides a national platform for HIV care issues. BHIVA representatives contribute to international, national and local committees dealing with HIV care. In addition, BHIVA promotes undergraduate, postgraduate and continuing medical education within HIV care.

The association aims to advance public education in the subjects of HIV and the symptoms, causes, treatment and prevention of HIV-related illnesses through the promotion of research and the dissemination of results of such research.

Our objectives

BHIVA has four main objectives:

1. To relieve sickness and to protect and preserve health through the development and promotion of good practice in the testing and treatment of HIV and HIV-related illnesses;
2. To advance public and professional education on HIV through education and the promotion, conduct and dissemination of research
3. To promote optimal outcomes for people living with, and affected by, HIV through the development and dissemination of national guidelines and standards, audit and research
4. To support other organisations through activities including collaborative responses to consultations, media representation of HIV, workforce planning and, exceptionally, individual cases of stigma, discrimination or suboptimal care.

Long term, continuing to promote best practice within the specialty, ensuring that the care provided for people living with HIV in the UK is world-leading, is of primary concern. To achieve that aim, BHIVA must maintain its contribution to the continued growth of the specialty over the next decade by continuing to support training and research in the field of HIV medicine and helping to ensure that the existing excellent national standards of care are maintained.

Education is a primary focus and BHIVA is passionate about promoting and supporting the speciality to deliver undergraduate, postgraduate and continuing medical education within HIV care.

With work still to be done in educating the public about HIV, advancing education in HIV, the symptoms, causes, treatment and prevention of HIV-related illnesses through the promotion of research and the dissemination of results of such research is central to the association's objectives.

BHIVA has also played a key role in providing education for people living with HIV, and the community organisations that support them, during the COVID pandemic. By publishing plain English versions of materials on COVID risk and vaccination and by contributing to live and recorded Q&A session on COVID, BHIVA has become a trusted source of advice in the UK and beyond.

Education is also key to the ongoing development of the specialty and the ability to develop a fully integrated educational programme for members

and the wider HIV community is at the heart of the long-term strategy of the association. Promoting and disseminating the latest research through regional, national and international meetings and conferences and publications, and supporting an increasingly diverse range of research studies, which aim to improve the health and lives of people living with HIV will help to achieve this.

By increasing the awareness of BHIVA at an international level, BHIVA endeavours to maintain its reputation for excellence in education and research. The association's ability to support a range of stakeholders and organisations by providing expert clinical advice on HIV and its management will also further strengthen the international presence of the association.

Activities

BHIVA actively encourages the presentation of original UK research. Abstracts are invited for the annual spring conference, which aims to showcase the best contemporary research into HIV-related topics currently being undertaken in the UK. BHIVA attracts a broad spectrum of participants from experienced HIV specialists to those still in training, as well as inviting eminent international speakers to present the latest data.

BHIVA supports research in HIV care through its annual research awards programme. Originally launched in 2006, the programme operates through competitive application. Open to all BHIVA members, applicants can submit applications for the funding of research projects that impact on the improvement of clinical care and management of people living with HIV in the UK. A minimum of £30,000 per annum is available, to be distributed amongst successful applicants according to the quality of the submitted proposals, in two categories of awards up to £30,000 and awards up to £10,000. The awards panel is chaired by an independent chair.

In addition, applications for donations, grants or funding for research or other projects made directly to the association are reviewed by the BHIVA Executive Committee on a quarterly basis and considered based on merit and relevance to the objectives of BHIVA.

HIV Medicine is the official journal of the association and is published by Wiley. *HIV Medicine* is a peer-reviewed journal publishing original articles, reviews and guidelines on all aspects of HIV treatment and diagnosis.

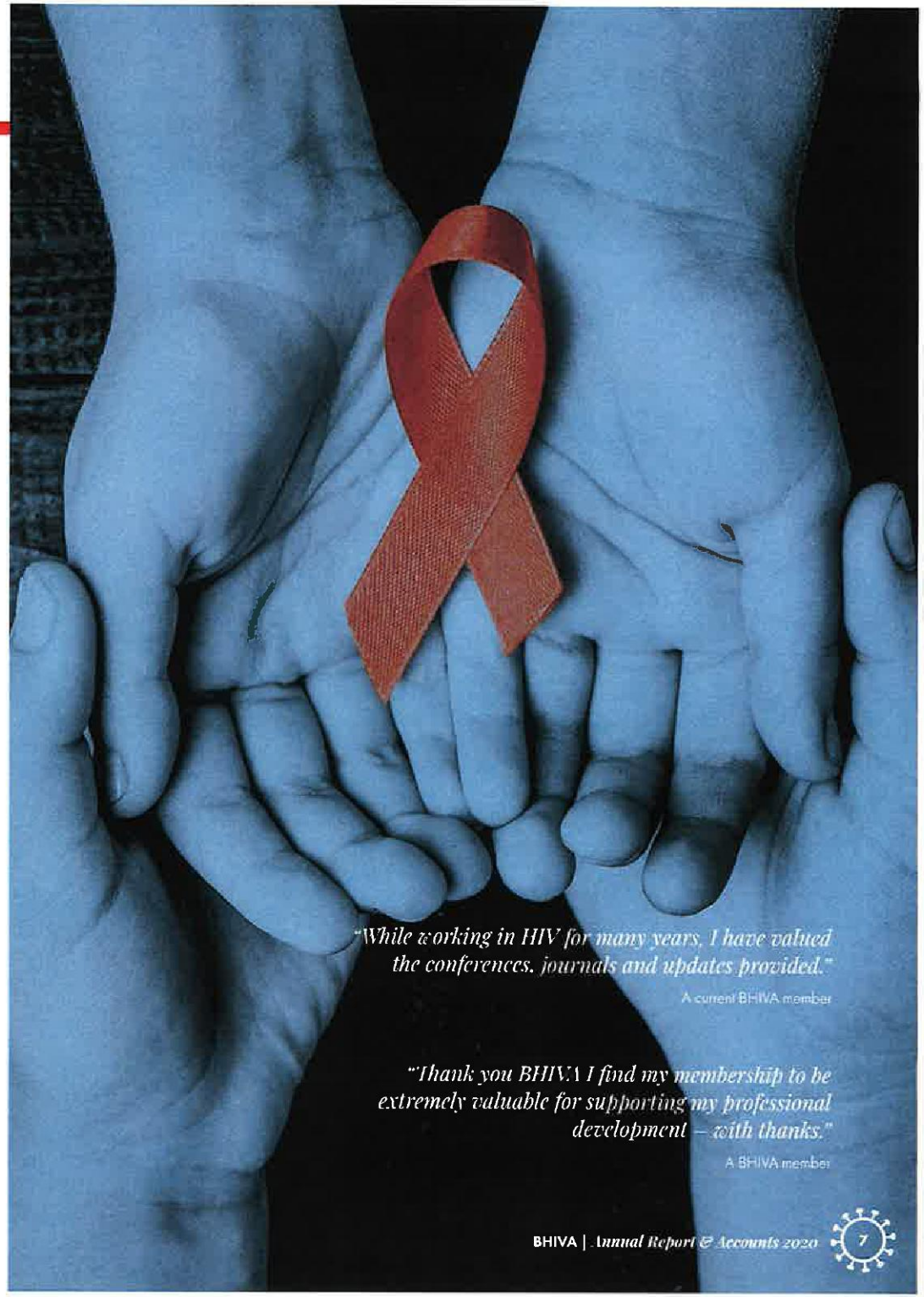
BHIVA also undertakes a wide range of other activities to promote medical education in HIV care. This includes conference feedback meetings, training courses for the Diploma in HIV Medicine examination, web-based e-learning modules as well as international scholarships and exchanges to forge links with international organisations to increase the understanding of the treatment and management of HIV.

A board of 20 trustees are responsible for the work of the association and its activities are carried out by five main subcommittees, all which report to the Executive Committee. The subcommittees are:

- Audit and Standards
- Conferences
- Education and Scientific
- External Relations
- Guidelines

The Executive Committee reviews the work carried out by the subcommittees to ensure its activities are in line with the charity's objectives. All trustees sit on at least one subcommittee to facilitate this process and monitor progress.

BHIVA would be unable to flourish without the considerable commitment of time, energy, expertise and dedication by so many individual members of the committees, subcommittees, writing and working groups as well as the vital support through sponsorship from within the pharmaceutical industry.



"While working in HIV for many years, I have valued the conferences, journals and updates provided."

A current BHIVA member

"Thank you BHIVA I find my membership to be extremely valuable for supporting my professional development – with thanks."

A BHIVA member

Year in review

BHIVA has worked tirelessly throughout 2020 towards the goal of ensuring that everyone living with HIV has access to the help and support they need. The charity has continued to provide a wealth of independent and practical advice, supported by the latest evidence-based research to HIV healthcare professionals and the wider HIV community.

BHIVA is committed to working with the healthcare sector to ensure that those providing the specialist care and support have access to ongoing education, training and development to enable them to provide the best possible care for people living with HIV.

BHIVA has played a major role in supporting people living with HIV, and their care providers, during COVID-19. By providing regularly updated guidelines on COVID risk and COVID vaccination, including user-friendly versions, supporting and contributing to research, presenting information at national and international meetings, and collaborating with organisations such as the Intensive Care Society and the European AIDS Clinical Society (EACS), we have played a key role in guiding healthcare professionals and people living with HIV through a period of extreme anxiety and uncertainty. A collaborative challenge with community organisations, led by BHIVA, led to the Department of Health and Social Care reversing their decision to exclude people with immunosuppression from access to online COVID testing.

Website

The BHIVA website is the association's central hub for information. Attracting over 15,000 visitors in 2020 as it became the go-to place for the latest updates, it has proved especially valuable to the entire HIV community throughout the COVID-19 pandemic.

HIV Medicine

The official journal of the BHIVA, *HIV Medicine* is a peer-reviewed publication focusing on evidence-based medicine as the mainstay of successful management of HIV and AIDS. Publishing original articles, reviews and guidelines on all aspects of HIV treatment and diagnosis, the journal is specifically aimed at researchers and clinicians with responsibility for treating those infected with HIV. It aims to provide an outlet for the publication of international research papers, embracing clinical, pharmacological, epidemiological, ethical, preclinical and *in vitro* studies.

With 10 issues per annum plus supplements, the journal had a circulation of 7,397 institutions and over 350,000 article downloads in 2020 and is on course for a similar target in 2021. It is the flagship publication of the association, available to all members in either printed or online format and brings in vital revenue through royalty subscriptions.

BHIVA Members Matters

The monthly e-newsletter is distributed to all members and includes the latest information and updates in the field of HIV for the healthcare community. It is seen as a vital tool for keeping members up to date and has been particularly invaluable in keeping the membership fully informed of the latest data and research during the COVID-19 pandemic.

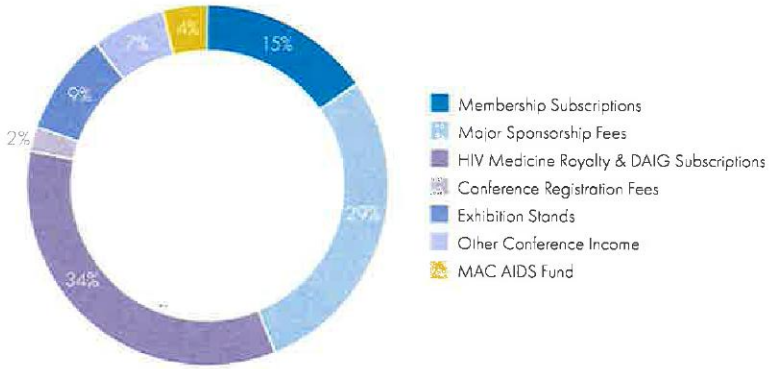
Social Media Reach

With over 2,000 followers, the BHIVA Facebook page is managed by the External Relations subcommittee and is used as a tool for promoting the work of the association. It carries updates and links to valuable resources produced by both BHIVA and other organisations within the HIV healthcare sector.

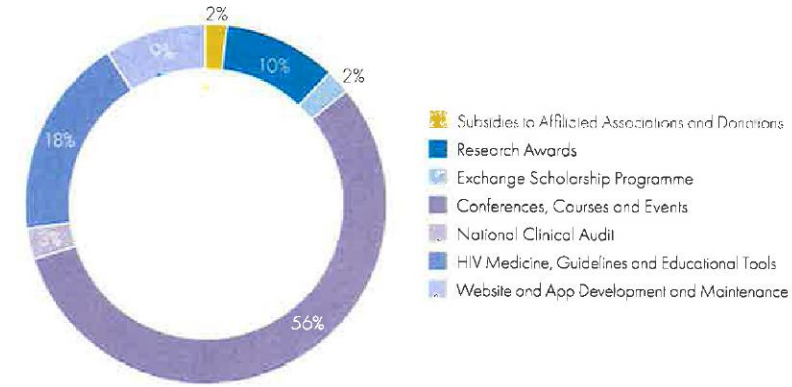
The BHIVA Twitter account, also managed by the External Relations subcommittee, went from strength to strength again in 2020 and now has over 10,000 followers, an increase from just over 8,000 followers in 2019. The group tweet regularly about the latest updates in the field of HIV.

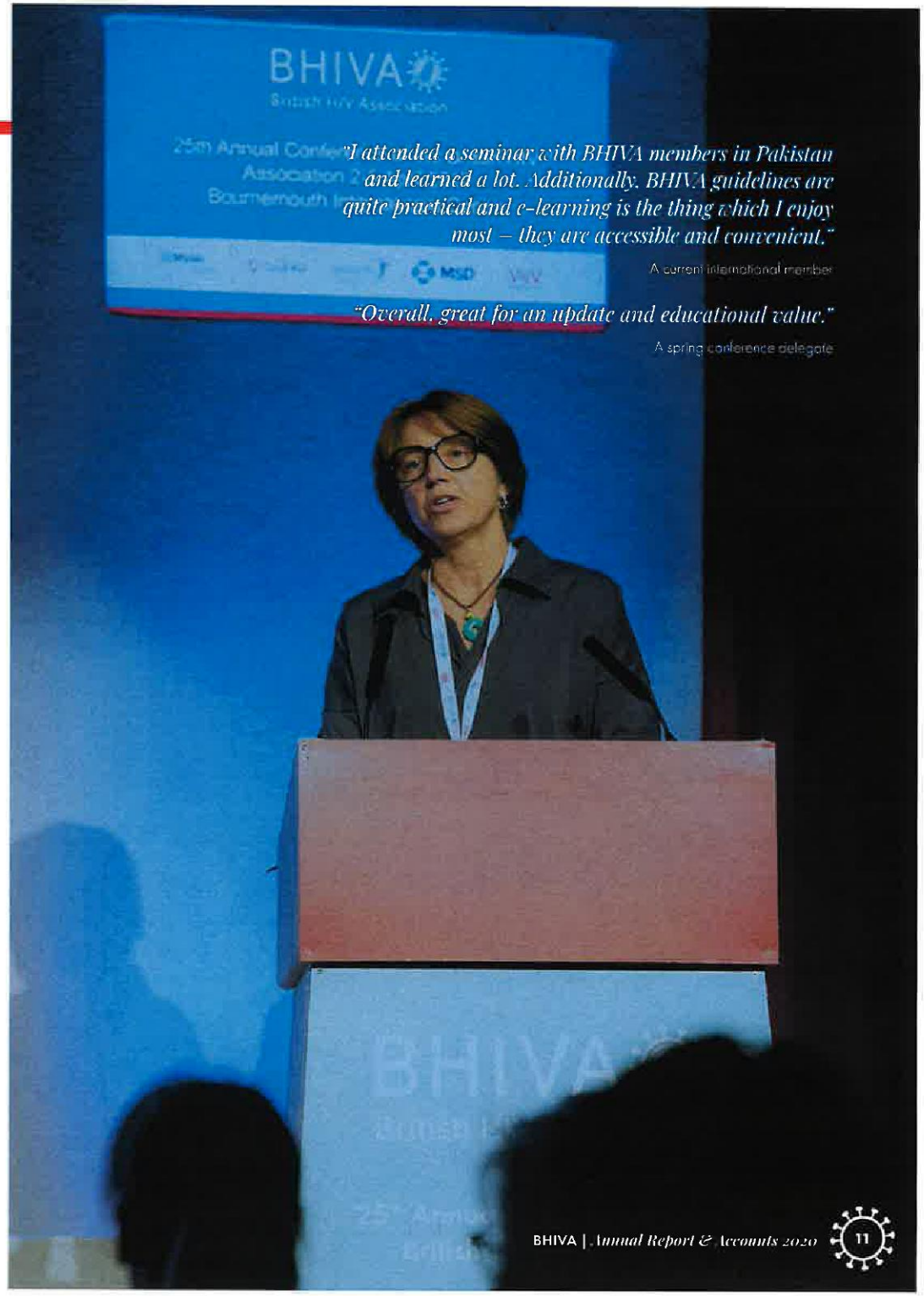
BHIVA's YouTube channel is used to promote and host the latest resources including a series of educational podcasts covering a range of hot topics in HIV. Following its set up in 2019, the BHIVA YouTube channel has become an excellent resource for the broadcast of educational content including sessions from conferences and other training materials.

WHERE DID BHIVA'S INCOME COME FROM IN 2020?



WHAT DID BHIVA SPEND MONEY ON IN 2020?





"I attended a seminar with BHIVA members in Pakistan and learned a lot. Additionally, BHIVA guidelines are quite practical and e-learning is the thing which I enjoy most – they are accessible and convenient."

A current international member

"Overall, great for an update and educational value."

A spring conference delegate

The work of the subcommittees

AUDIT AND STANDARDS SUBCOMMITTEE REPORT

Dr David Chadwick, Chair, Audit and Standards Subcommittee

To support clinical services in improving care quality, the BHIVA Audit and Standards subcommittee conducts a regular audit programme, involving clinical centres throughout the UK. A national audit of HIV and hepatitis C co-infection and a survey of management of engagement in care were planned for 2020 but deferred because of the ongoing impact of the COVID-19 pandemic. The hepatitis C co-infection audit is proceeding in modified form in 2021, alongside a survey of how HIV clinical services were affected by and responded to the pandemic.

Meanwhile, BHIVA used the subcommittee's data collection system and network of local clinical audit leads to conduct a registry study of COVID-19 cases among adults with HIV and a brief survey about how clinical services ascertain information on this. This was one of the largest COVID-19 case series among people with HIV, which found a strong association between a low current CD4+ T-cell count and both severity of presentation and poor outcomes after infection, along with an increased risk of more severe presentation in those with a current, active AIDS event.

The national HIV mortality review started in late 2019 as a collaboration between BHIVA and Public Health England to extend the well-established London HIV mortality review across the UK. Data were collected retrospectively for 406 deaths of people with HIV during 2019, an estimated 65% of all such deaths. Continuous data collection during 2020 allowed for rapid analysis of COVID-19-related mortality.

Collaboration with the NHS England Clinical Reference Group for HIV and Public Health England has continued towards making routine review of individuals diagnosed with advanced HIV a standard part of nationally commissioned NHS patient safety procedures. The aim of such review is to identify and learn from possible earlier missed opportunities for HIV testing. A standard reporting form for key information about locally conducted reviews will be made available to clinical services from 2021.

'Your Guide to...' BHIVA Standards of Care for people living with HIV has been produced by the UK-Community Advisory Board in collaboration with the subcommittee as a 'patient-friendly' version of BHIVA's 2018 standards. Publication was delayed by the pandemic but took place at the BHIVA virtual conference in November 2020.

Members of the subcommittee have liaised with EACS and the European Centre for Disease Prevention and Control (ECDC) to develop HIV clinical audit within Europe, based on BHIVA's extensive experience. A pilot hepatitis co-infection audit was conducted and further work is planned.

Results of development and testing of a tool for assessing patient-reported measures of outcomes in HIV have been published with acknowledgement of BHIVA funding and involvement. External funding is being sought for pilot implementation.

The subcommittee is supporting the British Psychological Society in updating the *Standards for psychological support for adults living with HIV*, originally produced in 2011 by the Medical Foundation for HIV and Sexual Health (MEDFASH).

CONFERENCES SUBCOMMITTEE REPORT

Dr Iain Reeves, Chair, Conferences Subcommittee (to Nov 2020)

Dr Nicola Mackie, Chair, Conferences Subcommittee (from Nov 2020)

Understandably, 2020 was a difficult year for all, including the Conferences Subcommittee. Despite the restrictions imposed by lockdowns, social distancing and redeployment of many healthcare professionals away from their usual work in HIV, BHIVA managed to organise several successful virtual educational events and conferences with very good attendance and excellent feedback. Unfortunately, it was necessary to cancel the spring conference due to COVID restrictions. The meeting had been due to take place in April 2020 in Manchester.

Keen to maintain the BHIVA commitment to provision of continued professional development to its members and the wider HIV healthcare community, the first foray into virtual events was a one-day virtual conference held on Friday 3 July 2020. The programme was a series of pre-recorded sessions covering several important topics including the BHIVA 'Best of CROI' feedback meetings, a COVID-19 update and a selection of other key sessions from the cancelled spring meeting. The feedback received from the 338 delegates who attended this meeting was positive and key to helping BHIVA plan future events.

As the uncertainties of the year rolled on, the BHIVA 'Autumn is the new Spring' Conference (the event that had been planned to replace the cancelled BHIVA spring conference) moved to an online platform and became a digital conference. Such a move made the conference accessible to all and ensured that BHIVA provided a safe environment in which everyone could participate.

Further to the positive feedback received from the inaugural virtual conference in July 2020, this digital conference was an interactive and immersive event, which included a virtual experience that provided a platform for interaction with BHIVA sponsors as well as providing a valuable resource of information for the participating delegates. The programme was a combination of live streamed and pre-recorded sessions to maximise the opportunity for interaction and live Q&A. Highlights included significant input from the community, an impressive amount of original research with 30 oral abstracts and 173 poster presentations and, notably, the Jonathan Ainsworth memorial lecture.

ABSTRACTS RECEIVED	216
ABSTRACTS ACCEPTED	208
ABSTRACTS WITHDRAWN	4
ORAL PRESENTATIONS	30
POSTER PRESENTATIONS	174

For World AIDS Day 2020, there was an entirely novel approach with a collaboration between BHIVA and ITN Productions. A bespoke news-style co-production was launched, entitled 'Health and HIV', covering many topics and featuring the current Chair of BHIVA, Dr Laura Waters. The programme is available on the BHIVA website and on YouTube. With the involvement of speakers including healthcare professionals and members of the community, the programme covered a wide range of topics, including the ending of HIV transmissions by 2030, women and HIV, young people in Zimbabwe, ageing with HIV, fighting stigma, testing in Kenya, HIV testing at point of care, advantages of oral self-testing. The programme was viewed over 30,000 times and its campaign reach was over 850,000 people.

As the year moved into 2021, BHIVA has again to contend with planning education and meetings in the face of another significant surge in COVID-19 cases. BHIVA has still been able to convene a working party to review and present the data from the Conference on Retroviruses and Opportunistic Infections (CROI) through two pre-recorded webinars planned for March 2021.

BHIVA took the early decision that the spring conference 2021 would be delivered virtually as a joint BHIVA/British Association for Sexual Health and HIV (BASHH) conference via a bespoke digital platform. BHIVA is hoping that it will be able to go ahead with the planned one-day meeting in the autumn, linked to a World AIDS Day event, which BHIVA hopes to deliver as a hybrid model of face-to-face content with live streaming to a wider audience.

Feedback received

"I really enjoyed this meeting. Although I missed seeing people, I enjoyed the ease of doing it from home."

"Excellent and varied programme, well done BHIVA."

"Enjoyed case-based discussions and being able to catch up on the talks I missed or want to listen to again. Thank you for a very enjoyable and accessible meeting."

"Quality of presentations was good, as was the overview and summary of developments in field of HIV obtained."

"Great community involvement and great to see specialist registrars chairing sessions as opposed to the usual suspects."

EDUCATION AND SCIENTIFIC SUBCOMMITTEE REPORT

Prof Caroline Sabin, Chair, Education and Scientific Subcommittee (to Nov 2020)

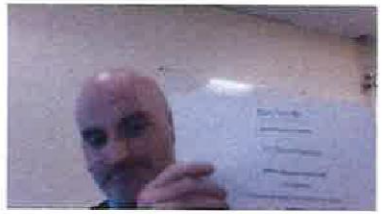
Dr Tristan Barber, Chair, Education and Scientific Subcommittee (from Nov 2020)

During such a difficult year as 2020, there were inevitably some delays to the work of the subcommittee, which perservered to continue the work started before the COVID-19 pandemic.

Work on the BHIVA Research Awards programme continued. The judging panel, led by an independent chair, reviewed fourteen high quality applications in 2020, five successful applicants were awarded a total of £68,325. These were:

- 'Discontinuation of tenofovir in HIV-1/HBV coinfected patients: a feasibility study', Dr Daniel Bradshaw, *Public Health England*
- 'Evaluation of the psychometric properties of the short form HIV Disability Questionnaire among women living with HIV in the United Kingdom: A cross-sectional self-report measurement study', Mr Darren Brown, *Chelsea and Westminster Hospital NHS Foundation Trust, London*
- 'POWER: ParticipatiOn of WomEn in HIV Research', Dr Lisa Hamzah, *St George's University Hospitals NHS Foundation Trust, London*
- 'The mechanisms of gut immune dysfunction in HIV-1 and HIV-2 infection and their implications for HIV-1 persistence', Dr John Thornhill, *Barts Health, London and QMUL*
- 'Analysis of Broadly Neutralising Antibody Resistance in Adolescents and Young People living with HIV', Dr Panagiota Zacharopoulou, *University of Oxford*

The Don Jeffries Research Award for 2020 was presented to Dr John Thornhill at the BHIVA autumn virtual conference 2020 on Tuesday 24 November 2020, for submitting the highest scoring application in the BHIVA Research Awards 2020.



Dr Daniel Bradshaw, Public Health England

Mr Darren Brown, Chelsea and Westminster Hospital NHS Foundation Trust, London

Dr Lisa Hamzah, St George's, London

Dr John Thornhill, Barts Health, London and QMUL

Dr Panagiota Zacharopoulou, University of Oxford

Since the awards started in 2006, a total of £757,675 has been awarded to 85 successful applicants.

In addition, the subcommittee also manages two other awards programmes for BHIVA members. The BHIVA International Partnerships Working Group is chaired by Dr Douglas Fink. The working group manages the BHIVA/Gilead International Exchange Scholarship Awards, which are designed to support the development of new links between BHIVA and institutions in low- or middle-income countries. The pandemic has slowed some of the work in this area but, nonetheless, BHIVA is looking forward to refreshing its international links moving forwards, expanding international membership, and to previous exchange scholarship awardees being able to complete their exchanges. BHIVA also has funding to run another round of BHIVA exchanges when travel restrictions allow.

BHIVA/Gilead International Exchange Fellowship Awards 2020 – winners

Dr Fíon Carlin, Mortimer Market Centre, London

'Ending the HIV epidemic: shared experiences around capacity building, innovative care delivery and increased health surveillance focused on improving care pathways for key populations at risk of HIV in both the UK and Ukraine in the post SARS-CoV-2 era'
Exchange with Dr M Vasylyev, Lviv Regional Public Health Centre, Lviv, Ukraine

Dr Harriet Doultrey, University Hospitals Sussex NHS Foundation Trust

'An opportunity to explore and compare the methods used for diagnosing and managing diabetes in people living with HIV in Zambia and UK'
Exchange with Dr B Chihota, Infectious disease epidemiologist, CIDRZ Zambia

Prof Maryam Shahmanesh has taken over as lead for the BHIVA/ViiV Implementation Science Fellowship programme, which awarded one fellowship in 2020, worth nearly £5,000. This was awarded to Dr Sonia Raffe, *University Hospitals Sussex NHS Foundation Trust*, for the project **'10-things I wish you knew: Co-production and implementation of a teaching tool to challenge HIV-related stigma in the healthcare setting'.**

Dr Sonia Raffe, University Hospitals Sussex NHS Foundation Trust

There is further funding to support another round of these awards when the time is right and the raising of pandemic restrictions allows.

The e-Learning Working Group has continued to work hard under the leadership of its chair, Dr Clare van Halsema. The online modules receive excellent feedback and continue to provide CPD and education for senior doctors, those in training and the BHIVA international members.

Future plans

The subcommittee is looking forward to continuing its work, reopening the exchange and implementation science award rounds, and awarding the 2021 research awards. BHIVA is also looking to merge educational work through pod and webcasts, e-Learning, and via the international group under one educational chair, to ensure a breadth and depth of education for all, including community members and representatives. It has not been an easy 18 months, and everyone is ready for face-to-face meetings and conferences, not least to meet those who have joined the field of HIV during the periods of lockdown and meeting old friends and familiar faces. The Education and Scientific Subcommittee will continue to support the members with educational content delivery and oversight, and obtaining funding to support research, implementation science, and international educational exchange programmes.

EXTERNAL RELATIONS SUBCOMMITTEE REPORT

Dr Rageshri Dhairyawan, Chair, External Relations Subcommittee (to Nov 2020)

Dr Matthew Page, Chair, External Relations Subcommittee (from Nov 2020)

The External Relations Subcommittee works in line with BHIVA's objectives to promote good practice in the treatment and care of HIV to its membership and external organisations.

Media

BHIVA is now seen as a mainstream media commentator on HIV, increasingly sought to respond to media enquiries. During 2020, BHIVA spokespeople were featured regularly on a wide range of media including BBC Radio 4 Today, Sky News, ITN, Reuters, BBC Woman's Hour, TRT World, BBC Asian Network, the Guardian, Mail online, Huffington Post, Buzzfeed and the i-newspaper.

The subcommittee worked with the BHIVA Conferences Subcommittee to produce the online documentary for World AIDS Day 2020 called 'Health and HIV'. This was viewed over 30,000 times and its campaign reach was >850,000 people.

Statements and COVID-19 response

Since the start of the COVID-19 pandemic BHIVA has produced over25 statements in collaboration with other organisations including EACS, other European HIV sector societies, the Terrence Higgins Trust (THT) and the Intensive Care Society. This guidance has been critical for both health professionals and the HIV community. The External Relations Subcommittee has been integral in ensuring that this guidance is disseminated widely and promptly.

In response to HIV community concern about COVID-19, BHIVA has established together with the National AIDS Trust (NAT) a register of

community organisations and the services they offer, and an online community 'Slack' network, which meets weekly to share updates. Statements are also written with a plain English version. A COVID-19 Frequently Asked Questions (FAQ) document has been created. With the UK Community Advisory Board (UK-CAB), BHIVA has produced webcasts on COVID-19 and the immune system, risk to people with HIV from minoritised ethnic communities and COVID-19 vaccines. Spokespeople have also regularly participated in Aidsmap 'LIVE' webinars.

The External Relations Subcommittee has also assisted with several other non-COVID-19 related statements, responses to enquiries and letters.

Website and BHIVA apps

The External Relations Subcommittee has responsibility for maintaining the content of the BHIVA website. In 2020, there was a very large rise in the number of people visiting the website, mainly due to the guidance on HIV and COVID-19 and then subsequently on COVID vaccination. BHIVA also launched an updated guidelines app in 2020 and a new YouTube channel.

Social media

The subcommittee manages BHIVA's social media feeds including the Twitter account, Facebook page and Instagram account and the *HIV Medicine* journal Twitter account. There has been significant growth in followers for all these accounts and they remain a useful method of communication with members and external organisations.

Going forwards – 2021 and beyond

The External Relations Subcommittee will continue to promote the work of BHIVA internally and externally, in line with BHIVA's objectives. It will grow its media and social media reach. Discussions are ongoing regarding another potential collaboration with ITN for World AIDS Day 2021.

GUIDELINES SUBCOMMITTEE REPORT

Dr Nadi Gupta, Chair, Guidelines Subcommittee (to Nov 2020)

Dr Clare van Halsema, Chair, Guidelines Subcommittee (from Nov 2020)

BHIVA produces guidelines on a comprehensive range of topics to support clinicians in testing for and managing HIV and its complications, as well as working with other organisations to produce co-badged guidelines on HIV prevention, testing and other areas.

In 2020, BHIVA adapted rapidly to the changing demands on clinicians and the environment in which people living with HIV needed to access care, providing real-time updates on evidence on COVID-19 as relevant to the HIV community. Rapid guidance, produced outside the BHIVA guideline development process accredited by the National Institute for Health and Care Excellence (NICE), was produced quickly and updated on the website, to support decision making.

Guideline production

The gastrointestinal chapter of the opportunistic infections guidelines and HIV testing guidelines, in collaboration with BASHH and the British Infection Association (BIA), as well as post-exposure prophylaxis guidelines, in collaboration with BASHH, were fully updated in 2020.

Interim updates were made to guidelines on the management of tuberculosis in adults living with HIV, and an interim update on the management of HIV in pregnancy.

Progress on new and updated guidelines was slower than in previous years, as guideline writing group members in clinical roles were redeployed to COVID-19-related work in their institutions and meetings cancelled in the early months of the COVID-19 pandemic.

Discussions with UK-CAB members requesting a guideline on psychological care has led to the initiation of an update of the *'Standards for psychological support for adults living with HIV'* 2011, which is now being taken forward by the Audit and Standards Subcommittee.

NICE accreditation

An interim meeting with NICE was held in December 2020, in anticipation of re-accreditation in 2022, and was attended by the current and past chairs and vice-chairs of the subcommittee, and the BHIVA Guidelines Facilitator. BHIVA is putting plans in place to meet the requirements for re-accreditation.

2020 successes

In response to a clear need, rapid guidance on COVID-19 and HIV was well-received and processes for such guidance will be incorporated into procedures to ensure transparency and timely update or archiving of rapid guidance, as well as opportunities for feedback from BHIVA members and other users.

2020 learning

Virtual meetings by videoconference have been a success and have replaced teleconferencing. BHIVA will recommence face-to-face meetings when circumstances allow. BHIVA has developed and formalised processes to produce rapid guidance, responding to rapidly changing NHS services during the COVID-19 pandemic.

2021 plans and actions so far

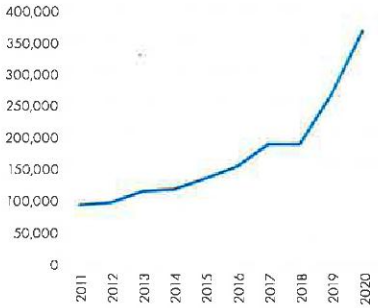
2021 will be another busy year, as a reduction in COVID-19-related clinical workload allows acceleration of guideline writing and a re-focus on routine HIV care. BHIVA anticipates consultation and publication of guidelines on HIV-2, vaccines and antiretroviral therapy and further chapters of the opportunistic infection guidelines. BHIVA looks forward to the launch of the new BHIVA position statement on HIV and the law, rewritten for the 'undetectable = untransmittable' (U=U) era and a position statement on disclosure of substance use and professional duty. BHIVA works towards NICE re-accreditation in 2022, ensuring processes are in place to produce the highest quality guidance for colleagues working in the field of HIV.

HIV Medicine (https://onlinelibrary.wiley.com/journal/14681293) is the official journal of BHIVA with all members getting complementary access. The co-editors-in-chief are Prof Brian Gazzard CBE and Prof Caroline Sabin. BHIVA has appointed several new associate editors and is currently reviewing the membership of the editorial board and supporting editorial panel to take the journal forward.

READERSHIP

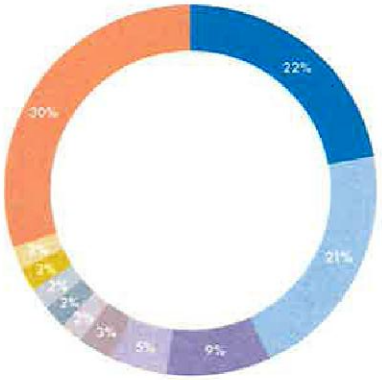
In 2020, 7,397 institutions offered access to the latest content in *HIV Medicine* via either a Wiley license or a traditional (title-by-title) subscription.

ARTICLE DOWNLOADS TREND



This chart shows the increase in the number of full-text article downloads for your journal in the period 2011 to 2020. The total includes usage on Wiley Online Library, EBSCO, and other third-party databases. Downloads via Wiley Online Library increased by 40.4% in 2020. This compares with an increase of 312.2% across all Wiley journals in the Infectious Disease & Microbiology.

TOP 10 DOWNLOADING COUNTRIES



China	22%	Australia	2%
United States	21%	South Africa	2%
United Kingdom	9%	France	2%
India	5%	Spain	2%
Germany	3%	Others	30%
Canada	2%		

This chart shows the top 10 countries from which articles in *HIV Medicine* were downloaded via Wiley Online Library in 2020, and the percentage each country contributed to total usage. All other countries are combined under 'Others'.

FUTURE PLANS

Education and training

Growing the field of HIV care, encouraging excellence among trainees and developing their skills is of paramount importance. BHIVA will continue to provide information on careers in HIV medicine, through attendance at careers fairs, provision of information to learned societies, working collaboratively with other organisations to promote the field to encourage increased numbers of trainees to enter the field.

Through representation on appropriate Specialty Advisory Committees of the Royal College of Physicians, BHIVA supports medical specialty curriculum development and contributes to the assessment of trainees via the Diploma in HIV Medicine.

BHIVA will continue to run annual courses to support those wishing to undertake the Diploma in HIV Medicine examination and a general medicine course. It is hoped that these courses will be run as a series of online webinars making them more accessible to all.

BHIVA will continue to run the annual spring and autumn conferences to provide continued professional development for its members and the wider HIV community.

By carrying out regular reviews of the educational needs of members, BHIVA will develop updated educational material on factors pertinent to the optimal management of those with HIV, including through web-based e-learning modules and using that feedback in the development of the scientific and educational programmes for the BHIVA conferences.

International growth and membership

Furthering its reach through collaboration with other learned societies and HIV charities will enable BHIVA to establish its reputation on an international stage to raise BHIVA's profile and grow both its international and UK membership.

Developing its international presence through joint working with international learned societies will also enable the association to support best clinical practice in non-UK settings through the successful international exchange programme.

BHIVA will encourage wider participation, through supporting trainees, new researchers and community members to become involved with the BHIVA Executive Committee and/or its subcommittees, to encourage people to speak on behalf of BHIVA at national/international meetings, and to represent BHIVA on external groups and committees.

Promoting research and sharing best practice

BHIVA has an opportunity to shape the future of HIV care through representation on national bodies and contributing to policies impacting the health and wellbeing of people living with HIV.

The association will continue to share updated information on the latest topics of relevance for those managing HIV, such as through the provision of conference feedback meetings for the major international conferences and/or the development of a programme of podcasts highlighting new and evolving areas of research.

The charity's provision of collaborative responses to consultations, media representation of HIV, workforce planning and, exceptionally, individual cases of stigma, discrimination or suboptimal care is an important part of maintaining standards and ensuring best practice in the field.

BHIVA's ongoing work in supporting high-quality research projects through the provision of research awards will continue to ensure that research will have impact and value to the UK setting.

The association will continue to use its peer-reviewed journal, *HIV Medicine*, to disseminate the highest quality research by publishing original articles, reviews and guidelines on all aspects of HIV treatment and diagnosis.

Community/Third sector engagement

BHIVA will support community organisations to promote healthy living and engagement in care decisions through development and review of information materials and community forums.

The charity plans to build mutually beneficial relationships with and support related third-sector organisations working within the HIV field.

BHIVA SPONSORS AND SUPPORTERS 2020

BHIVA wishes to thank the following companies for their support during the year:

GILEAD

Mylan
Better Health for a Better World

ViiV Healthcare

"I am now retiring from the NHS and from clinical work. I have been a BHIVA member for many years and it is with some sadness that I end my membership. I wish you all the best in the endeavour to end HIV transmission in the UK and look after the remaining people living with HIV in the best possible ways."

A BHIVA member

BHIVA membership annual report to 31 October 2020

BHIVA membership numbers are reported in May of each year. Membership in 2020 (758) showed a drop from a high point in May 2014 (966).

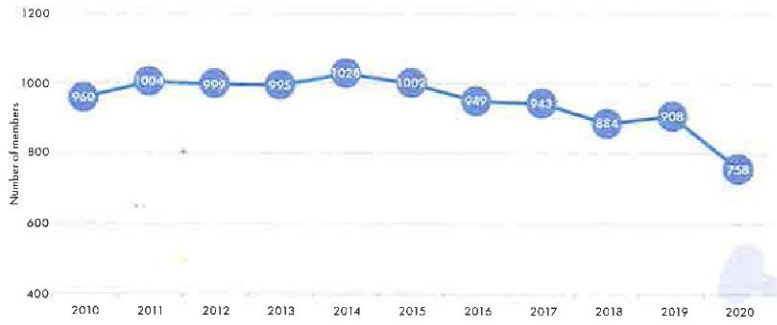
The reduction in numbers may have been due to the change in the direct debit (DD) payment system requiring members to re-engage with BHIVA to submit their bank details and continue their membership from 2020 onwards. Also, data protection restrictions have reduced the number of previous members who can be emailed. HIV/ Sexual Health services have been reorganized following tendering of services with some clinicians no longer providing HIV clinics. The BHIVA officers have personally contacted some members directly to encourage them to renew but 2020 may have been a year of new priorities for a good number of members, many of whom have led the response to COVID-19. Of note, retired consultants are retaining membership for a period after retiring, showing loyalty to BHIVA.

The recently introduced BHIVA international membership category has been successful and BHIVA will continue to promote this.

BHIVA membership benefits include:

- Discounted registration for BHIVA conferences (CPD approved)
- Access to the BHIVA website members' area
- Voting rights for BHIVA Officers and Executive Committee elections (eligibility subject to joining date)
- Eligibility to stand for election to the BHIVA Executive Committee (eligibility subject to joining date)
- Free subscription to the BHIVA journal, *HIV Medicine* (10 issues p.a. and online access)
- Access to online e-learning modules
- Free subscription to the BHIVA Members Matters email (up to 12 issues p.a.)
- Free subscription to *HIV Treatment Bulletin*, provided by HIV i-Base (by email)
- BHIVA nominations for Clinical Excellence Awards (eligible UK-based consultant members only)
- Access to BHIVA Research Awards and other scholarships and bursaries
- Access to BASHH/BHIVA/FSRH Mentoring Scheme
- Membership subscription fees approved for income tax relief
- Access to online webcasts

MEMBERS AT MEMBERSHIP YEAR END (31 OCTOBER)

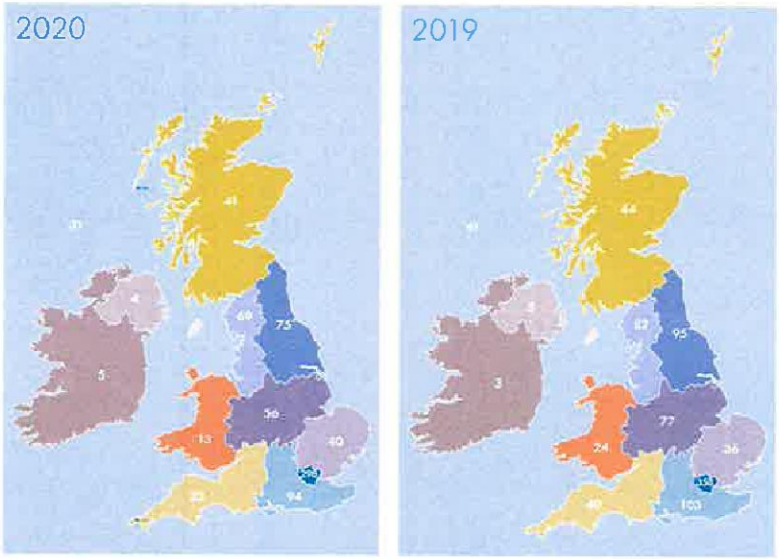


MEMBERSHIP CATEGORY	2020		TREND	2019		FEES
	No	%	%	No	%	2021
Consultant	372	49%	↑	427	47%	£210
Non-consultant	199	26%	↓	285	31%	£95
BHIVA Affiliated[2]	75	10%	=	92	10%	£75
BHIVA UK-CAB (community)	40	5%	↑	32	3%	£20
BHIVA International (HMIC/ LMIC)[1]	29	4%	↑	21	2%	£40/£20
Retired consultant	15	2%	=	19	2%	£95
Life member[4]	18	2%	=	16	2%	FOC
Medical student	8	1%	↓	15	2%	£40
Annual member[3]	2	1%	=	1	1%	FOC
Total BHIVA members	**758**	**100%**	**[–19.79%]**	908	**100%**	

Membership fee income is vital to the association, both in terms of securing funding which helps to contribute towards the work of BHIVA and in reinforcing the independence of the association. Despite the anticipated drop in membership, BHIVA, being considerate of the difficulties faced by its members during the COVID-19 pandemic, the charity trustees took the decision not to increase the membership fees in 2020. This decision was taken to enable more HIV professionals to enjoy all the benefits that BHIVA membership offers.

Members are drawn from across the specialty and include healthcare and allied professionals, as well as representatives from the pharmaceutical industry and the community of people living with HIV. Following the creation in 2016 of a membership category for community, BHIVA has seen a significant increase in community membership numbers and participation within the association overall is one of the things that sets BHIVA apart. This strong community link and liaison has also helped to improve community led participation with conferences and guidelines.

MEMBERS WORK REGION 2020 v 2019



SUMMARY OF MEMBERS NOT RENEWING BY 31 OCTOBER 2020

MEMBERS NOT RENEWED	2020	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010
Total cancellations	39	20	23	29	40	39	33	40	38	18	26
Not renewed (lapsed)	212	101	149	116	112	109	79	99	79	109	108
Total	**251**	**121**	**172**	**145**	**152**	**148**	**112**	**139**	**117**	**127**	**134**

As ever, BHIVA is disappointed when members leave the association and during the year 2020 there was a higher number of members not renewing (212) than has been usual in previous years, most likely due to redeployment. However, of those who contacted BHIVA to cancel their subscription, some generous remarks have been recorded:

- *I am retiring and will not be renewing my BHIVA membership. I would like to thank you for the work you do and the quality of events and meetings I have attended over the years. 'Old soldiers never die they just fade away'.*
- *Working only occasionally in HIV now, seeing only SH/GUM patients. I have had great benefit and enjoyment from being part of BHIVA for so many years and have met many wonderful colleagues (retired from my permanent NHS post in 2016).*
- *Sadly, my consultant post no longer includes HIV clinic. I will re-join in future if things change.*

REASON FOR CANCELLATION	NO	%
Retired	15	39%
No reason given/Other	11	29%
No longer working in HIV	6	16%
Financial pressures	4	11%
Parental leave	2	5%
Total cancelled members	38	100%

In July 2020, BHIVA conducted a survey of its international members and key feedback showed that BHIVA is delivering a useful service to members working overseas.

66% of respondents have attended a BHIVA conference and 100% of those found the conference to be extremely or very useful to their clinical practice

83% of respondents use BHIVA guidelines in their practice

Use of the BHIVA online membership benefits are key to international members and 83% accessed the BHIVA website at least weekly. All respondents found the e-learning modules useful and would value more online content.

Some feedback from international members:

- I attended a seminar with BHIVA members in Pakistan and got to learn a lot; additionally, its guidelines are quite practical and e-learning is the thing which I enjoy
- e-learning modules are very good – learned more quickly

BHIVA will continue to promote BHIVA membership through social media and engagement with the wider HIV multidisciplinary team such as HIV pharmacists and nurses.

Structure, governance and management

BHIVA is a Charitable Incorporated Organisation (as of 12 December 2016) governed by its Constitution and registered as a charity with the Charity Commission.

BHIVA is a membership association currently governed by a Board of 20 elected trustees who make up the Executive Committee including four officer posts of Chair, Vice Chair, Honorary Secretary and Honorary Treasurer.

BHIVA endeavours to ensure that the specialty is well represented on the Executive Committee to ensure that local challenges and issues that affect all those working within the field are addressed UK wide. Trustees are drawn from across the HIV sector and include clinicians and other healthcare professionals, academics, a representative from the UK-CAB as well as a trainee Doctors' representative and a new Consultant Doctors' representative.

The methods adopted for the recruitment and appointment of new trustees are as follows:

- A list of nominees is forwarded to all eligible members of the association with a request for their selections to fill the vacancies
- The election scrutineer will normally be the immediate past chair of the association or another person nominated by the Executive Committee
- The results of the election are declared at the Annual General Meeting.

Nominees are required to complete a trustee declaration form, a conflict-of-interest form and a skills assessment form at time of nomination. All members of the Executive Committee give their time voluntarily and receive no paid benefits from the charity.

On joining the BHIVA Executive Committee, trustees are provided with an induction pack that includes an outline of the role and expectations, a copy of the constitution, relevant policy and administration documents required to carry out the role as well as Charity Commission information about the responsibilities of becoming a charity trustee. Each new trustee also undertakes a tailored induction programme and is offered mentoring support from existing trustees.

Beyond their governance duties, trustees are expected to take an active role in the work of the charity according to their expertise through engagement with at least one of the five specialist subcommittees. Each subcommittee manages the activities of the charity and is led by a chair and vicechair. Under the subcommittees also sit a variety of specialist working and writing groups, led by an elected or appointed BHIVA member, who have specific responsibilities and bring a depth of knowledge and expertise to the subcommittees.

The trustees hold quarterly Executive Committee meetings to review the activities of the charity and consider its plans and strategies.

To retain its position at the forefront of HIV care, BHIVA is also affiliated with all the other key charities and associations who work within the field including:

- Children's HIV Association (CHIVA)
- British Dietetic Association HIV Care Specialist Group (BDA)
- HIV Pharmacy Association (HIVPA)
- National HIV Nurses Association (NHIVNA)
- HIV Trainee Association (HIVTA)
- Rehabilitation in HIV Association (RHIVA)
- Society of Sexual Health Advisers (SSHA)
- UK Community Advisory Board (UK-CAB)

BHIVA has developed important links with other organisations, encouraging exchange of information between national and international centres including:

- British Psychological Society (BPS)
- Federation of Infection Societies (FIS)
- European AIDS Clinical Society (EACS)
- International AIDS Society (IAS)
- Medical Research Council (MRC)
- National AIDS Trust (NAT)
- Terrence Higgins Trust (THT)
- University of Liverpool HIV Drug Interactions website.

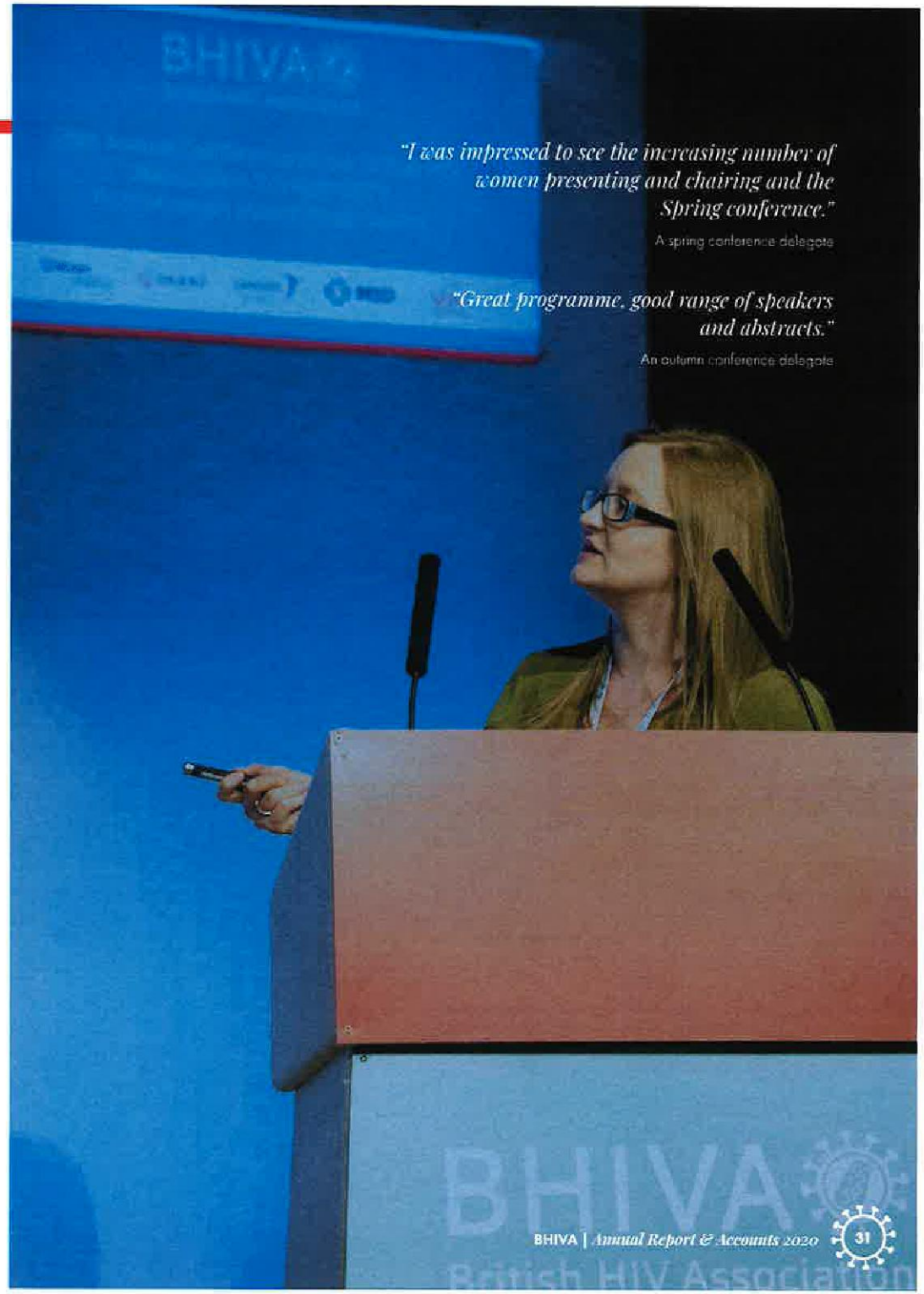
Governance review update

Following the commissioning of a governance review in August 2018, the Executive Committee agreed on a development strategy to implement those recommendations it perceived to be fundamental to achieving the charity's overall aims and objectives.

A thorough appraisal of the charity's policies and procedures has been carried out and an updated set of policies and procedures have been drafted and ratified by the trustees and are now in place.

Having taken the strategic decision to delay the review of the financial governance until the newly elected Treasurer was in post, this review is now under way and the recruitment of a trustee with financial expertise to the Executive Committee is in progress.

The proposed adjustments and addendums to the BHIVA *Constitution* and *Byelaws* set out to improve the structure and governance of the association were approved at the 2020 AGM. The suggestions included reducing the number of trustees and increasing the flexibility to appoint them based on the skills required following an annual skills audit.



2020 financial review

BHIVA remains in a good position financially, despite the disruptions caused by the pandemic.

Sponsorship from pharmaceutical companies remains an important source of income underpinning our activities, though it is slightly down with respect to 2019. The income from membership fees is also down slightly. On the positive side, income from the *HIV Medicine* journal, in the form of royalties and subscriptions, has increased. As expected, conferences income was down substantially, but this was offset by the move to virtual platforms and our good fortune in avoiding venue cancellation fees. BHIVA holds restricted funds from the MAC AIDS Fund, which are slightly underspent as projects were put on hold last year. This income is spent on quality improvement activities such as audit and the publication of the "*Your Guide to...*" *BHIVA Standards of Care for people living with HIV*, a user-friendly version of the BHIVA *Standards of Care 2018*, as well as e-learning module development.

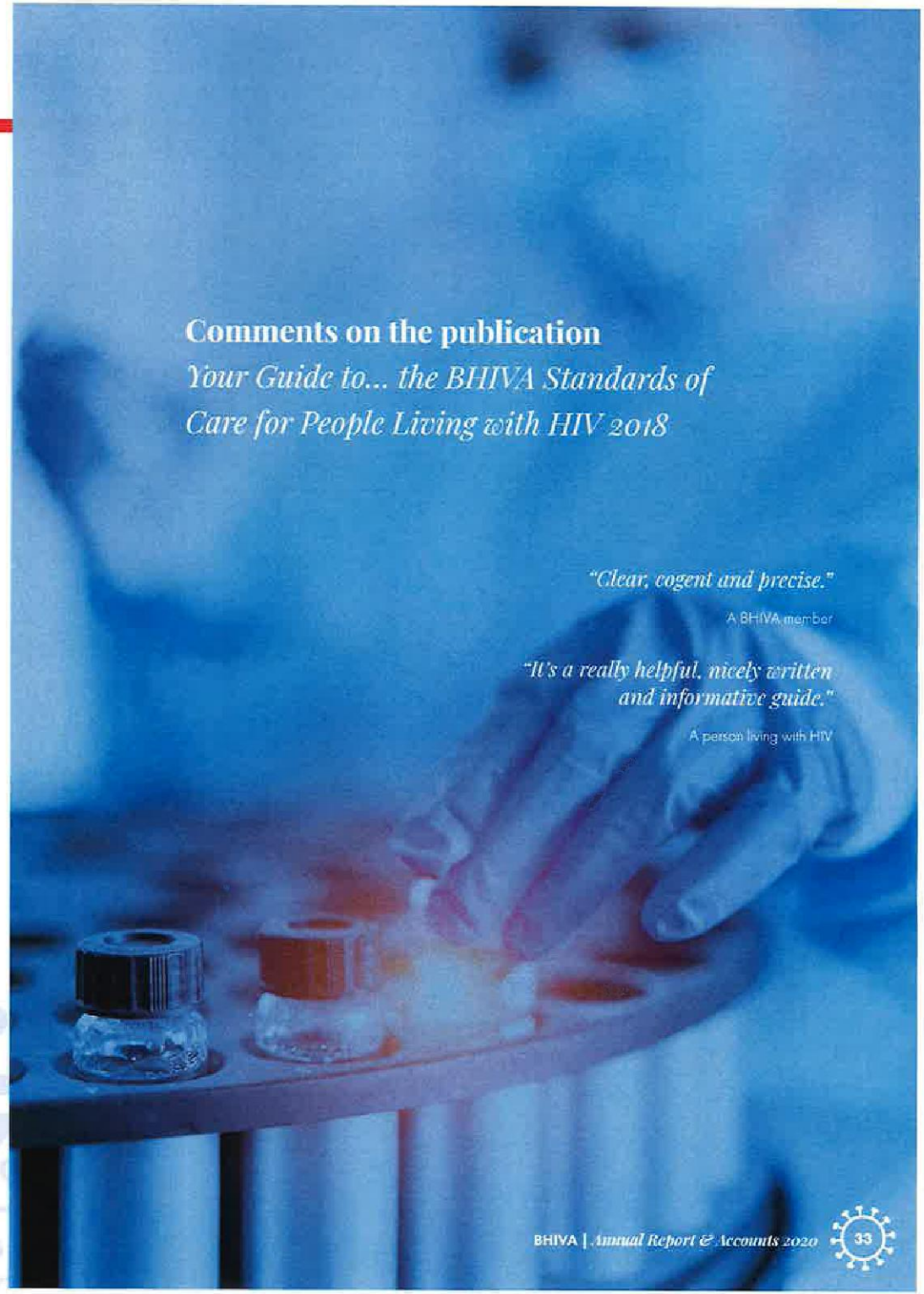
As noted in BHIVA *Members Matters*, 17 August 2021, BHIVA, has sought to take an ethical and sustainable approach to our investments in recent years. The investment fund, managed by Rathbones, does not directly invest in armaments, alcohol, tobacco and pharmaceuticals. The investments held in fossil fuel companies were sold in February 2020. In the future, we will work with the new, appointed financial trustee to see if it is possible to apply further sustainability criteria. The investment fund remains an important source of income to guard against financial risks in the future.

Looking to the future, risks to income include a continuing decrease in income from membership and pharmaceutical company sponsorship. Uncertainty remains as to whether there will be further conference cancellations in the coming year. Other potential risks are changes in the secretariat and loss of support for the BHIVA website, though these risks are likely very small.

BHIVA has reserves which are in excess of our policy to hold enough to cover our costs for 18 months of usual activities. The BHIVA Executive Committee recently held a strategy meeting and we will seek to develop an approach to spending some of these reserves to further the aims of the association.

Iain Reeves 12/16/2021

Dr Iain Reeves
BHIVA Honorary Treasurer



Comments on the publication *Your Guide to... the BHIVA Standards of Care for People Living with HIV 2018*

"Clear, cogent and precise."

A BHIVA member

"It's a really helpful, nicely written and informative guide."

A person living with HIV

Statement of Directors' and Trustees' responsibilities

The trustees are responsible for preparing a trustees' annual report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales requires the charity trustees to prepare financial statements for each year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, of the charity for that period. In preparing the financial statements, the trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- Observe the methods and principles in the applicable Charities SORP;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable accounting standards have been followed, subject to any material departures that must be 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 in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the applicable Charities (Accounts and Reports) Regulations, and the provisions of the Trust deed. They are also responsible for safeguarding the assets of the charity and taking reasonable steps for the prevention and detection of fraud and other irregularities.

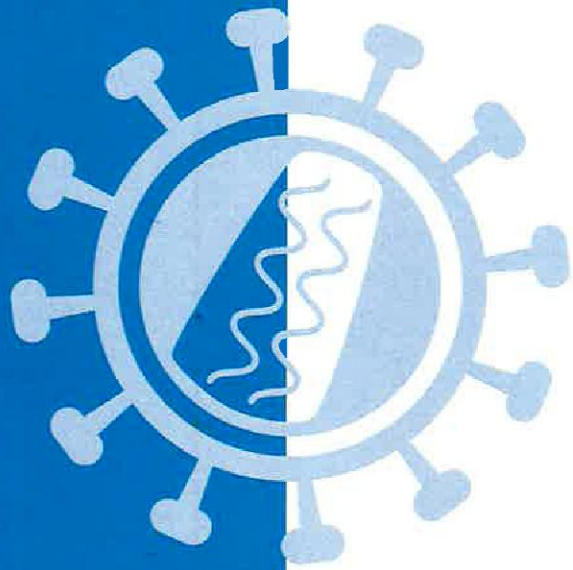
The trustees are responsible for the maintenance and integrity of the charity and financial information included on the charity's website in accordance with legislation in the United Kingdom governing the preparation and dissemination of financial statements.

TRUSTEE DECLARATION

I declare that:

- I am over age 18.
- I am not an undischarged bankrupt.
- I have not previously been removed from trusteeship of a charity by a Court or the Charity Commission.
- I am not under a disqualification order under the Company Directors' Disqualification Act 1986.
- I am, in the light of the above, not disqualified by the Charities Act 1993 (section 72) from acting as a charity trustee.
- I undertake to fulfil my responsibilities and duties as a trustee of the British HIV Association (BHIVA) in good faith and in accordance with the law and within the objects of BHIVA.

I do not have any financial interests in conflict with those of BHIVA (either in person or through family or business connections) except those that I have formally notified in a declaration of interest statement. I will specifically notify any such interest at any meeting where trustees are required to make a decision, which affects my personal interests, and I will absent myself entirely from any decision on the matter and not vote on it.



Appendices

Appendix 1

Trustees' Report and Financial Statements for the year ended 31 December 2020

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REFERENCE AND ADMINISTRATIVE DETAILS OF THE CIO, ITS TRUSTEES AND ADVISERS FOR THE YEAR ENDED 31 DECEMBER 2020

Trustees

Dr T Barber (appointed 3 October 2019)
Dr D Chadwick (re-appointed 3 October 2019)
Dr D Churchill (retired as Honorary Treasurer 22 November 2020)
Dr D Clutterbuck (appointed 22 November 2020)
Dr R Dhairyawan (retired as New Consultant Doctors' Representative 22 November 2020)
Dr A Fox (appointed 22 November 2020)
Prof B Gazzard CBE, Joint Editor-in-Chief *HIV Medicine* (re-appointed 10 October 2008)
Dr Y Gilleece, Honorary Secretary (appointed 3 October 2019)
Dr N Gupta (retired as trustee 22 November 2020)
Miss J Josh, UK-CAB Community Representative (appointed 17 September 2019)
Dr R Kulasegaram (appointed 3 October 2019)
Dr N Larbalestier (appointed 22 November 2020)
Dr N Mackie (re-appointed 3 October 2019)
Dr R Metcalfe, New Consultant Doctors' Representative (appointed 22 November 2020)
Mrs S Morris (appointed 3 October 2019)
Ms A Namiba (retired as UK-CAB Community Representative 22 November 2020)
Dr M Page, Trainee Doctors' Representative (appointed 11 February 2020)
Dr I Reeves, Honorary Treasurer (appointed 22 November 2020)
Prof C Sabin, Vice-chair (appointed 3 October 2019)
Dr J Underwood (appointed 3 October 2019)
Dr C van Halsema (appointed 5 October 2018)
Dr L Waters, Chair (appointed 3 October 2019)

Charity registered number

1170707

Registered office and operational address

BHIVA secretariat, Medivents Ltd, Spirella Building, Bridge Road, Letchworth, Hertfordshire SG6 4ET

Investment advisers

Rathbone Investment Management Ltd, 1 Curzon Street, London, W1J 5FB

Auditors

Moore Kingston Smith LLP, 4 Victoria Square, St Albans, Hertfordshire AL1 3TF

Bankers

Santander Bank, Bootle, Merseyside L30 4GB

Solicitors

Stone King LLP, Boundary House, 91 Charterhouse Street, London EC1M 6HR

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF BRITISH HIV ASSOCIATION

Opinion

We have audited the financial statements of British HIV Association (the 'parent CIO') for the year ended 31 December 2020 which comprise Consolidated Statement of Financial Activities, the Consolidated and Parent CIO Balance Sheets, the Consolidated 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 CIO's affairs as at 31 December 2020 and of the Group's incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006 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 CIO 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 CIO'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.

Opinions on other matters prescribed by the Companies Act 2006

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

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

We have nothing to report in this regard.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and parent CIO and its environment obtained in the course of the audit, we have not identified material misstatements in [the strategic report or] the trustees' annual report.

We have nothing to report in respect of the following matters where the Companies Act 2006 and the Charities Act 2011 require us to report to you if, in our opinion:

- the parent CIO has not kept adequate and sufficient accounting records, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent CIO's financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies exemption in preparing the Trustees' Annual Report and from preparing a strategic report.

Responsibilities of Trustees

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

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

Auditors' responsibilities for the audit of the financial statements

We have been appointed as auditor under the Companies Act 2006 and section 152 of the Charities Act 2011 and report in accordance with those Acts.

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 CIO.

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the CIO and considered that the most significant are [the Companies Act 2006, 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 CIO 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 noncompliance 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 group and parent CIO'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 group and parent CIO'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 group or parent CIO 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.
- Obtain sufficient appropriate audit evidence regarding the financial information of the entities or business activities within the group to express an opinion on the consolidated financial statements. We are responsible for the direction, supervision and performance of the group audit. We remain solely responsible for our audit report.

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 CIO's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and, in respect of the consolidated financial statements, 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 CIO's members and trustees those matters which 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 CIO, the CIO's members, as a body, and the charity's trustees, as a body, for our audit work, for this report, or for the opinion we have formed.

Moore Kingston Smith LLP
Chartered Accountants
Statutory Auditors
4 Victoria Square
St Albans
Hertfordshire
AL1 3TF

Date: 16 December 2021

Silvia Vitiello (Senior Statutory Auditor) Moore Kingston Smith LLP
for and on behalf of Moore Kingston Smith LLP, Statutory Auditor

Moore Kingston Smith LLP are eligible to act as auditors in terms of section 1212 of the Companies Act 2006.

CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 DECEMBER 2020

	Note	Unrestricted funds 2020 £	Restricted funds 2020 £	Total funds 2020 £	Total funds 2019 £
INCOME FROM:					
Donations and legacies	2	-	28,300	28,300	64,327
Charitable activities	3	723,442	30,000	753,442	1,002,021
Investments	4	25,801	-	25,801	34,663
TOTAL INCOME		749,243	58,300	807,543	1,101,011
EXPENDITURE ON:					
Raising funds		11,017	-	11,017	10,850
Charitable activities	5	794,654	106,741	901,395	1,164,183
TOTAL EXPENDITURE		805,671	106,741	912,412	1,175,033
NET EXPENDITURE BEFORE NET GAINS ON INVESTMENTS		(56,428)	(48,441)	(104,869)	(74,022)
Net gains on investments	9	163,921	-	163,921	232,803
NET INCOME/(EXPENDITURE) BEFORE TAXATION		107,493	(48,441)	59,052	158,781
Taxation	7	(82)	-	(82)	-
NET INCOME/(EXPENDITURE) AFTER TAXATION		107,411	(48,441)	58,970	158,781
Transfers between funds	12	(29,107)	29,107	-	-
NET MOVEMENT IN FUNDS		78,304	(19,334)	58,970	158,781
RECONCILIATION OF FUNDS:					
Total funds brought forward		2,015,460	66,910	2,082,370	1,923,589
Net movement in funds		78,304	(19,334)	58,970	158,781
TOTAL FUNDS CARRIED FORWARD		2,093,764	47,576	2,141,340	2,082,370

The Statement of Financial Activities includes all gains and losses recognised in the year.

The notes on pages 49 to 62 form part of these financial statements.

CIO STATEMENT OF FINANCIAL ACTIVITIES AS AT 31 DECEMBER 2020

	Note	Unrestricted funds 2020 £	Restricted funds 2020 £	Total funds 2020 £	Total funds 2019 £
INCOME FROM:					
Donations and legacies	2	-	28,300	28,300	64,327
Charitable activities		712,547	30,000	742,547	1,002,021
Investments	4	25,801	-	25,801	34,663
TOTAL INCOME		738,348	58,300	796,648	1,101,011
EXPENDITURE ON:					
Raising funds		11,017	-	11,017	10,850
Charitable activities		784,189	106,741	890,930	1,164,183
TOTAL EXPENDITURE		795,206	106,741	901,947	1,175,033
NET EXPENDITURE BEFORE NET GAINS ON INVESTMENTS		(56,858)	(48,441)	(105,299)	(74,022)
Net gains on investments	9	163,921	-	163,921	232,803
NET INCOME/(EXPENDITURE)		107,063	(48,441)	58,622	158,781
Transfers between funds	12	(29,107)	29,107	-	-
NET MOVEMENT IN FUNDS		77,956	(19,334)	58,622	158,781
RECONCILIATION OF FUNDS:					
Total funds brought forward		2,015,460	66,910	2,082,370	1,923,589
Net movement in funds		77,956	(19,334)	58,622	158,781
TOTAL FUNDS CARRIED FORWARD		2,093,416	47,576	2,140,992	2,082,370

The notes on pages 49 to 62 form part of these financial statements.

CONSOLIDATED BALANCE SHEET AS AT 31 DECEMBER 2020

	Note		2020 £		2019 £
FIXED ASSETS					
Tangible assets	8		**463**		383
Investments	9		**1,632,122**		1,527,579
			1,632,585		1,527,962
CURRENT ASSETS					
Debtors	10	**309,803**		256,836	
Cash and cash equivalents		**562,440**		541,202	
		872,243		798,038	
Creditors: amounts falling due within one year	11	**(363,488)**		(243,630)	
NET CURRENT ASSETS			**508,755**		554,408
TOTAL ASSETS LESS CURRENT LIABILITIES			**2,141,340**		2,082,370
TOTAL NET ASSETS			**2,141,340**		2,082,370
CHARITY FUNDS					
Restricted funds	12		**47,576**		66,910
Unrestricted funds	12		**2,093,764**		2,015,460
TOTAL FUNDS			**2,141,340**		2,082,370

The financial statements were approved and authorised for issue by the Trustees and signed on their behalf by:

Iain Reeves

Dr I Reeves
Honorary Treasurer

Date: 12/16/2021

The notes on pages 49 to 62 form part of these financial statements.

CIO BALANCE SHEET AS AT 31 DECEMBER 2020

	Note		2020 £		2019 £
FIXED ASSETS					
Tangible assets	8		**463**		383
Investments	9		**1,632,123**		1,527,580
			1,632,586		1,527,963
CURRENT ASSETS					
Debtors	10	**308,396**		256,836	
Cash at bank and in hand		**550,185**		541,202	
		858,581		798,038	
Creditors: amounts falling due within one year	11	**(350,175)**		(243,631)	
NET CURRENT ASSETS			**508,406**		554,407
TOTAL ASSETS LESS CURRENT LIABILITIES			**2,140,992**		2,082,370
TOTAL NET ASSETS			**2,140,992**		2,082,370
CHARITY FUNDS					
Restricted funds	12		**47,576**		66,910
Unrestricted funds	12		**2,093,416**		2,015,460
TOTAL FUNDS			**2,140,992**		2,082,370

The financial statements were approved and authorised for issue by the Trustees and signed on their behalf by:

Iain Reeves

Dr I Reeves
Honorary Treasurer

Date: 12/16/2021

The notes on pages 49 to 62 form part of these financial statements.

CONSOLIDATED STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31 DECEMBER 2020

	Note	2020 £	2019 £
CASH FLOWS FROM OPERATING ACTIVITIES			
Net cash used in operating activities	14	**(62,526)**	(18,825)
CASH FLOWS FROM INVESTING ACTIVITIES			
Dividends and interests received from investments		**25,801**	34,663
Purchase of tangible fixed assets		**(599)**	-
Proceeds from sale of listed investments		**601,498**	145,181
Purchase of listed investments		**(542,936)**	(104,516)
NET CASH PROVIDED BY INVESTING ACTIVITIES		**83,764**	**75,328**
CHANGE IN CASH AND CASH EQUIVALENTS IN THE YEAR		**21,238**	**56,503**
Cash and cash equivalents at the beginning of the year		**541,202**	484,699
CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR	15	**562,440**	541,202

The notes on pages 49 to 62 form part of these financial statements.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2019

1. ACCOUNTING POLICIES

1.1 BASIS OF PREPARATION OF FINANCIAL STATEMENTS

The financial statements have been prepared in accordance with the Charities SORP (FRS 102) – Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Charities Act 2011. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

There were no significant estimates or judgements made by management in preparing these financial statements.

British HIV Association meets the definition of a public benefit entity under FRS 102.

The Consolidated Statement of Financial Activities (SOFA) and Consolidated Balance Sheet consolidate the financial statements of the charity and its subsidiary undertaking. The results of the subsidiary are consolidated on a line by line basis.

1.2 GOING CONCERN

The Trustees have considered the charity's forecasts and projections and have taken account of pressures on income, particularly with consideration to the ongoing impact of the COVID-19 pandemic. After making enquiries the Trustees have concluded that there is a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. Therefore, these accounts have been prepared on the going concern basis.

1.3 INCOME

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

In pursuit of its charitable objectives, the CIO organises and hosts conferences, for which registration fees, sponsorship income, exhibition stand income and other sundry income is received. Where this income is received in advance of the given conference taking place, it is treated as deferred income and included within creditors in the accounts. The income is released once the conference has taken place.

Income from membership subscriptions is recognised in line with the period to which it relates.

Income from royalties is recognised in line with the period to which it relates.

Income from grants and donations are recognised when the CIO has been notified in writing of both the amount and settlement date. In the event that a grant or donation is subject to conditions that require a level of performance before the CIO is entitled to the funds, the income is deferred and not recognised until those conditions are fully met, or the fulfillment of those conditions is wholly within the control of the CIO and it is probable that those conditions will be fulfilled in the reporting period.

Investment income is recognised in the period in which the CIO becomes entitled to the income.

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

1.4 EXPENDITURE

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably.

All expenditure is accounted for on an accruals basis.

Governance costs are those incurred in connection with administration of the CIO and compliance with constitutional and statutory requirements.

Expenditure on raising funds comprises investment management fees.

1.5 TAXATION

The CIO is considered to pass the tests set out in Paragraph 1 Schedule 6 of the Finance Act 2010 and therefore it meets the definition of a charitable company for UK corporation tax purposes. Accordingly, the CIO is potentially exempt from taxation in respect of income or capital gains received within categories covered by Chapter 3 Part 11 of the Corporation Tax Act 2010 or Section 256 of the Taxation of Chargeable Gains Act 1992, to the extent that such income or gains are applied exclusively to charitable purposes.

1.6 TANGIBLE FIXED ASSETS AND DEPRECIATION

Tangible fixed assets are carried at cost, net of depreciation and any provision for impairment. Depreciation is provided at rates calculated to write off the cost of fixed assets, less their estimated residual value, over their expected useful lives on the following bases:

Office equipment – 3 years straight line

1.7 INVESTMENTS

Fixed asset investments are a form of financial instrument and are initially recognised at their transaction cost and subsequently measured at fair value at the Balance Sheet date, unless fair value cannot be measured reliably in which case it is measured at cost less impairment. Investment gains and losses, whether realised or unrealised, are combined and shown in the heading 'Gains/(losses) on investments' in the Statement of Financial Activities.

Investments in subsidiaries are valued at cost less provision for impairment.

1.8 DEBTORS

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

1.9 CASH AT BANK AND IN HAND

Cash at bank and in hand includes cash and short-term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

1.10 CREDITORS

Liabilities are recognised when there is an obligation at the Balance Sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Liabilities are recognised at the amount that the CIO anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

1.11 FINANCIAL INSTRUMENTS

The Group only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

1.12 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 Group and which have not been designated for other purposes.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the Group for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

2. INCOME FROM DONATIONS AND GRANTS

	Unrestricted funds 2020 £	**Restricted funds 2020 £**	**Total funds 2020 £**
Donations	-	16,300	**16,300**
Grants	-	12,000	**12,000**
TOTAL 2020	-	28,300	**28,300**

	Unrestricted funds 2019 £	Restricted funds 2019 £	Total funds 2019 £
Donations	-	15,000	15,000
Grants	2,500	46,827	49,327
TOTAL 2019	2,500	61,827	64,327

3. INCOME FROM CHARITABLE ACTIVITIES

	Unrestricted funds 2020 £	Restricted funds 2020 £	Total funds 2020 £
Membership subscriptions	115,301	-	**115,301**
Major sponsorship fees	214,900	-	**214,900**
HIV medicine royalty & DAIG subscriptions	257,827	-	**257,827**
Conference registration fees	16,887	-	**16,887**
Exhibition stands	68,906	-	**68,906**
Other conference income	49,558	-	**49,558**
MAC AIDS Fund	-	30,000	**30,000**
Miscellaneous income	63	-	**63**
TOTAL 2020	723,442	30,000	**753,442**

	Unrestricted funds 2019 £	Restricted funds 2019 £	Total funds 2019 £
Membership subscriptions	129,445	-	129,445
Major sponsorship fees	231,930	-	231,930
HIV medicine royalty & DAIG subscriptions	113,146	-	113,146
Conference registration fees	157,259	-	157,259
Exhibition stands	250,103	-	250,103
Other conference income	67,291	-	67,291
Advertising	2,000	-	2,000
Scholarships and bursaries	15,000	-	15,000
MAC AIDS fund	-	35,000	35,000
Miscellaneous income	847	-	847
TOTAL 2019	967,021	35,000	1,002,021

4. INVESTMENT INCOME

	Unrestricted funds 2020 £	Total funds 2020 £
Bank deposit interest	87	**87**
Dividends received from investments	25,714	**25,714**
TOTAL 2020	25,801	**25,801**

	Unrestricted funds 2019 £	Total funds 2019 £
Bank deposit interest	1,955	1,955
Dividends received from investments	32,708	32,708
TOTAL 2019	34,663	34,663

5. ANALYSIS OF EXPENDITURE BY ACTIVITIES

	Direct costs 2020 £	Support and governance costs 2020 £	Total funds 2020 £
Charitable activities	575,548	325,847	**901,395**
TOTAL 2020	575,548	325,847	**901,395**

	Direct costs 2019 £	Support and governance costs 2019 £	Total funds 2019 £
Charitable activities	791,849	372,334	1,164,183
TOTAL 2019	791,849	372,334	1,164,183

5. ANALYSIS OF EXPENDITURE BY ACTIVITIES *(CONTINUED)*

	Total funds 2020 £	Total funds 2019 £
Subsidies to affiliated associations and donations	**11,000**	11,345
Research awards	**57,737**	102,777
Exchange scholarship programme	**12,635**	16,686
Conferences, courses and events	**321,342**	538,421
National clinical audit	**16,100**	19,410
HIV medicine, guidelines and educational tools	**104,058**	57,201
Website and app development and maintenance	**52,676**	46,009
	575,548	791,849

Analysis of support costs

	Total funds 2020 £	Total funds 2019 £
Secretariat fees	**211,500**	252,925
Establishment, committee and communications	**51,840**	75,179
Accountancy and bookkeeping fees	**8,871**	10,855
Auditors remuneration	**5,750**	4,500
Legal and professional fees	**4,976**	858
Bank and currency charges	**3,694**	6,634
Irrecoverable VAT	**38,697**	17,518
Depreciation	**519**	366
Interest payable on overdue VAT	**-**	3,499
	325,847	372,334

6. KEY MANAGEMENT PERSONNEL

The CIO considers its key management personnel to be the Trustees. The Trustees give their time and expertise without any form of remuneration or other benefit in kind as noted below.

During the year, no Trustees received any remuneration or other benefits (2019 – £NIL).

During the year, seven Trustees received reimbursement of expenses or had expenses paid directly to a third party on their behalf totalling £1,274 (2019 - £2,730 to eight Trustees).

The CIO has no employees and therefore, no employee received emoluments over £60,000 per annum.

7. TAXATION

	2020 £	2019 £
Corporation tax payable by trading subsidiary	**82**	-

8. TANGIBLE FIXED ASSETS

GROUP AND CIO

	Office equipment £
COST OR VALUATION	
At 1 January 2020	**1,057**
Additions	**599**
At 31 December 2020	**1,656**
DEPRECIATION	
At 1 January 2020	**674**
Charge for the year	**519**
At 31 December 2020	**1,193**
NET BOOK VALUE	
At 31 December 2020	**463**
At 31 December 2019	383

9. FIXED ASSET INVESTMENTS

Group	Listed investments £
COST OR VALUATION	
At 1 January 2020	**1,527,579**
Additions	**542,936**
Disposals (proceeds £601,498, realised loss £8,994)	**(610,492)**
Revaluations	**172,099**
AT 31 DECEMBER 2020	**1,632,122**
NET BOOK VALUE	
AT 31 DECEMBER 2020	**1,632,122**
AT 31 DECEMBER 2019	1,527,579

All the fixed asset investments are held in the UK.

All investments are carried at their fair value. Investment in equities and fixed interest securities are all traded in quoted public markets, primarily the London Stock Exchange. Holdings in common investment funds, unit trusts and open-ended investment companies are at the bid price. The basis of fair value for quoted investments is equivalent to the market value, using the bid price. Asset sales and purchases are recognised at the date of trade at cost (that is their transaction value).

The Trustees delegate the management of their investments to Rathbones. The CIO is operating an investment policy that provides for a degree of diversification of holdings within different shares and unit trust investments. The CIO has invested in a range of holdings in order to protect against exposure to volatility in the market to reduce risk and preserve capital.

The CIO does not make use of derivatives and similar complex financial instruments as it takes the view that investments are held for their longer term growth and annual income.

The CIO has no material investment holdings in markets subject to exchange controls or trading restrictions.

The total net gains on investments as per the Statement of Financial Activities comprises realised losses of £8,994, unrealised revaluation gains of £172,099 and corporate action gains of £816.

CIO	Investments in subsidiary companies £	Listed investments £	Total £
COST OR VALUATION			
At 1 January 2020	**1**	**1,527,579**	**1,527,580**
Additions	**-**	**542,936**	**542,936**
Disposals	**-**	**(610,492)**	**(610,492)**
Revaluations	**-**	**172,099**	**172,099**
AT 31 DECEMBER 2020	**1**	**1,632,122**	**1,632,123**
NET BOOK VALUE			
AT 31 DECEMBER 2020	**1**	**1,632,122**	**1,632,123**
AT 31 DECEMBER 2019	1	1,527,579	1,527,580

INVESTMENTS IN SUBSIDIARY COMPANIES

BHIVA Trading Limited is a private company limited by shares, which was incorporated in England and Wales on 9 December 2019. It is 100% owned and controlled by the British HIV Association. Its first period of account is to 31 December 2020.

The following was a subsidiary undertaking of the CIO:

Name	Company number	Registered office or principal place of business	Class of shares	Holding
BHIVA Trading Limited	12353562	Spirella Building, Bridge Road, Letchworth, Herfordshire,SG6 4ET	Ordinary	100%

The financial results of the subsidiary for the year were:

	Income £	Expenditure £	Profit for the period £	Net assets £
BHIVA Trading Limited	**28,058**	**(27,710)**	**348**	**349**

10. DEBTORS

	Group 2020 £	Group 2019 £	CIO 2020 £	CIO 2019 £
DUE WITHIN ONE YEAR				
Trade debtors	**88,525**	53,327	**87,405**	53,327
Accrued income	**220,297**	142,468	**220,010**	142,468
Prepayments	**981**	61,041	**981**	61,041
	309,803	256,836	**308,396**	256,836

11. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	Group 2020 £	Group 2019 £	CIO 2020 £	CIO 2019 £
Trade creditors	**219,125**	81,230	**193,084**	81,230
Amounts owed to group undertakings	-	-	**14,809**	-
Corporation tax	**82**	-	-	-
Other creditors	-	-	1	1
Accruals and deferred income	**144,281**	162,400	**142,281**	162,400
	363,488	243,630	**350,175**	243,631

	Group 2020 £	Group 2019 £	CIO 2020 £	CIO 2019 £
DEFERRED INCOME				
Deferred income at 1 January 2020	**41,145**	69,884	**41,145**	69,884
Resources deferred during the year	**36,218**	41,145	**36,218**	41,145
Amounts released from previous periods	**(41,145)**	(69,884)	**(41,145)**	(69,884)
Deferred income as at 31 December 2020	**36,218**	41,145	**36,218**	41,145

12. STATEMENT OF FUNDS

CURRENT YEAR

	Balance at 1 January 2020 £	Income £	Expenditure £	Taxation £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 December 2020 £
UNRESTRICTED FUNDS							
General funds	**2,015,460**	**721,185**	**(778,043)**	-	**(29,107)**	**163,921**	**2,093,416**
Trading subsidiary	-	**28,058**	**(27,628)**	**(82)**	-	-	**348**
	2,015,460	**749,243**	**(805,671)**	**(82)**	**(29,107)**	**163,921**	**2,093,764**
RESTRICTED FUNDS							
Research awards fund	-	**16,300**	**(44,772)**	-	**28,472**	-	-
Website development fund	**4,000**	-	-	-	-	-	**4,000**
MAC AIDS fund	**32,103**	**30,000**	**(49,334)**	-	-	-	**12,769**
Gilead podcasts fund	**27,617**	-	-	-	-	-	**27,617**
Gilead Pakistan fund	**3,190**	-	-	-	-	-	**3,190**
Exchange scholarship fund	-	**12,000**	**(12,635)**	-	**635**	-	-
	66,910	**58,300**	**(106,741)**	-	**29,107**	-	**47,576**
TOTAL OF FUNDS	**2,082,370**	**807,543**	**(912,412)**	**(82)**	-	**163,921**	**2,141,340**

PRIOR YEAR

	Balance at 1 January 2019 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 December 2019 £
UNRESTRICTED FUNDS						
General funds	1,883,397	1,016,184	(1,081,369)	(35,555)	232,803	2,015,460
RESTRICTED FUNDS						
Research awards fund	36,192	15,000	(86,747)	35,555	-	-
Website development fund	4,000	-	-	-	-	4,000
MAC AIDS fund	-	35,000	(2,897)	-	-	32,103
Gilead podcasts fund	-	27,617	-	-	-	27,617
Gilead Pakistan fund	-	7,210	(4,020)	-	-	3,190
	40,192	84,827	(93,664)	35,555	-	66,910
TOTAL OF FUNDS	1,923,589	1,101,011	(1,175,033)	-	232,803	2,082,370

The income and expenditure of the trading subsidiary, BHIVA Trading Limited, is presented separately above. These results are consolidated into the overall consolidated financial statements on a line by line basis.

Research awards fund
Originally launched in 2016, the BHIVA research awards are intended to provide funding for research projects that will improve the clinical care and management of people living with HIV in the UK. Income is received annually from Gilead. The fund is expended by way of making awards to individuals.

Website development fund
This fund represents funding received specifically for the development of the BHIVA website. Unspent funds have been carried forward to be utilised in subsequent years.

MAC AIDS Fund
MAC AIDS Fund is a charity established in 1994 to support people living with HIV worldwide. It donates funds to communities and organisations that offer services to people with HIV/AIDS and help to prevent the disease through educational programs. This is given each year as restricted funding for this purpose.

Gilead podcasts fund
This fund represents funding received specifically for the production of BHIVA podcasts. These podcasts will take place in 2020-21. Accordingly, the unspent funds have been carried forward at the balance sheet date.

Exchange Scholarship fund
The exchange scholarship enables winning applicants to travel internationally to take be placed at a HIV unit. The programme enables a unique opportunity to increase understanding of the treatment and management of HIV in particularly, the developing world. The scholars can disseminate this information and experience when they return to the UK.

BHIVA/ViiV implementation science fellowships
These fellowships are available to UK-based BHIVA members from any discipline to be trained in implementation science methodology and deliver a project. Implementation science is a way of putting scientific principles behind projects that enhance the quality of patient care. Outcomes often relate to how previously encountered barriers were overcome and results may be translatable to other geographical settings and clinical environments.

13. ANALYSIS OF NET ASSETS BETWEEN FUNDS

CURRENT PERIOD

	Unrestricted funds 2020 £	Restricted funds 2020 £	Total funds 2020 £
Tangible fixed assets	463	-	**463**
Fixed asset investments	1,632,122	-	**1,632,122**
Current assets	824,667	47,576	**872,243**
Creditors due within one year	(363,488)	-	**(363,488)**
TOTAL	2,093,764	47,576	**2,141,340**

PRIOR PERIOD

	Unrestricted funds 2019 £	Restricted funds 2019 £	Total funds 2019 £
Tangible fixed assets	383	-	383
Fixed asset investments	1,527,579	-	1,527,579
Current assets	731,128	66,910	798,038
Creditors due within one year	(243,630)	-	(243,630)
TOTAL	2,015,460	66,910	2,082,370

14. RECONCILIATION OF NET MOVEMENT IN FUNDS TO NET CASH FLOW FROM OPERATING ACTIVITIES

	Group 2020 £	Group 2019 £
Net income for the period (as per Statement of Financial Activities)	**58,970**	158,781
ADJUSTMENTS FOR:		
Depreciation charges	**519**	366
Gains on investments	**(163,105)**	(232,803)
Dividends and interests received from investments	**(25,801)**	(34,663)
(Increase)/decrease in debtors	**(52,967)**	44,434
Increase in creditors	**115,618**	45,060
NET CASH USED IN OPERATING ACTIVITIES	**(66,766)**	(18,825)

15. ANALYSIS OF CASH AND CASH EQUIVALENTS

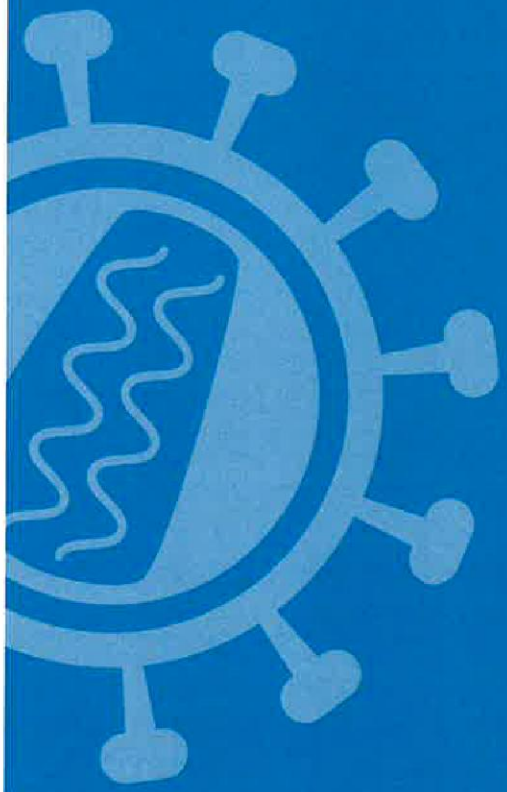
	Group 2020 £	Group 2019 £
Cash in hand	**464,819**	457,657
Cash at broker	**97,621**	83,545
TOTAL CASH AND CASH EQUIVALENTS	**562,440**	541,202

16. ANALYSIS OF CHANGES IN NET DEBT

	At 1 January 2020 £	Cash flows £	At 31 December 2020 £
Cash and cash equivalents	**541,202**	**21,238**	**562,440**
	541,202	**21,238**	**562,440**

17. RELATED PARTY TRANSACTIONS

There were no related party transactions during the year.



BHIVA
British HIV Association

www.bhiva.org