

**REPORT OF THE TRUSTEES AND
FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 APRIL 2024
FOR
THE BRITISH HERNIA SOCIETY (CIO)**

P B Syddall & Co
Chartered Accountants
Grafton House
81 Chorley Old Road
Bolton
Lancashire
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THE BRITISH HERNIA SOCIETY (CIO)

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FOR THE YEAR ENDED 30 APRIL 2024**

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THE BRITISH HERNIA SOCIETY (CIO)

REPORT OF THE TRUSTEES FOR THE YEAR ENDED 30 APRIL 2024

The trustees present their report with the financial statements of the charity for the year ended 30 April 2024. The trustees have adopted the provisions of Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019).

OBJECTIVES AND ACTIVITIES

Objectives and aims

The object of The British Hernia Society is the advancement of health for public benefit by educating the public and healthcare professionals about hernia surgery.

We aim to ensure national and international quality in hernia surgery.

More details can be found on our website www.britishherniasociety.org.

Significant activities

We run educational events including courses and conferences about the management of hernias for healthcare professionals. We also provide online information for healthcare professionals, the public and patients on hernias and their management.

We are developing a registry to collect information on hernia surgery in the UK.

There is more information on the activities of the charity detailed in a separate document titled Annual Report May 2023 to April 2024 which is filed along with the financial statements on the Charity Commission website..

Public benefit

The trustees consider that during the year under review they have successfully achieved the objectives set out in its governing document and have given due regard to the guidance published by the Charity Commission on public benefit.

FINANCIAL REVIEW

Financial position

The charity is in a healthy financial position.

The charity continued to receive project sponsorship grants to aid in the establishment of a registry which will become available to all surgeons who carry out hernia repairs. These grants totalled £17,500.

Whilst the British Hernia Society did not make any research grants to individuals in the year to 30 April 2024, it awarded ASIT prize money to the tune of £650.

A further £10,335 was spent by the charity on the data capture software to establish the UK National Hernia Registry.

Reserves policy

The charity is still in its infancy and is building up reserves for future projects. The British Hernia Society is in the process of setting up national teaching, training, mentorship and coaching programmes at all career levels. There are also a number of projects detailed in the Annual Report which will call on these reserves.

Going concern

There are no events or conditions that, individually or collectively, may cast significant doubt on the charity's ability to continue as a going concern. As such the trustees have prepared the account's on a going concern basis.

STRUCTURE, GOVERNANCE AND MANAGEMENT

Governing document

The charity is controlled by its governing document, a deed of trust and constitutes a Charitable Incorporated Organisation (CIO). The constitution was last amended on 5th December 2023 and this was ratified at the AGM held on 18th January 2024.

THE BRITISH HERNIA SOCIETY (CIO)

**REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 30 APRIL 2024**

REFERENCE AND ADMINISTRATIVE DETAILS

Registered Charity number

1193226

Principal address

Manchester University NHS Trust
Manchester Royal Infirmary
Oxford Road
Manchester
M13 9WL

Trustees

Mr D L Sanders Chair
Ms S R G Smith
Miss N N Alam
Mr H Jayamanne
Mr P Chitsabesan
Miss O Ali
Mr D Damaskos
Mr L F Horgan
Mr T M Hammond
Professor A J Sheen
Mr S Chintapatla
Mr J M Findlay
Mr D A J Slade

Independent Examiner

Mr Adam J. Syddall MA FCA
P B Syddall & Co
Chartered Accountants
Grafton House
81 Chorley Old Road
Bolton
Lancashire
BL1 3AJ

Approved by order of the board of trustees on 23 October 2024 and signed on its behalf by:

Ms S R G Smith - Trustee

**INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF
THE BRITISH HERNIA SOCIETY (CIO)**

Independent examiner's report to the trustees of The British Hernia Society (CIO)

I report to the charity trustees on my examination of the accounts of The British Hernia Society (CIO) (the Trust) for the year ended 30 April 2024.

Responsibilities and basis of report

As the charity trustees of the Trust you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ('the Act').

I report in respect of my examination of the Trust's accounts carried out under Section 145 of the Act and in carrying out my examination I have followed all applicable Directions given by the Charity Commission under Section 145(5)(b) of the Act.

Independent examiner's statement

I have completed my examination. I confirm that no material 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 Trust as required by Section 130 of the Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 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.

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 accounts to be reached.

Mr Adam J. Syddall MA FCA
The Institute of Chartered Accountants in England and Wales

P B Syddall & Co
Chartered Accountants
Grafton House
81 Chorley Old Road
Bolton
Lancashire
BL1 3AJ

23 October 2024

THE BRITISH HERNIA SOCIETY (CIO)

**STATEMENT OF FINANCIAL ACTIVITIES
FOR THE YEAR ENDED 30 APRIL 2024**

	Notes	Unrestricted fund £	Restricted fund £	30.4.24 Total funds £	30.4.23 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies		-	-	-	79
Charitable activities					
The establishment of a UK National Hernia Registry		-	17,500	17,500	61,600
Total		-	17,500	17,500	61,679
EXPENDITURE ON					
Charitable activities					
The establishment of a UK National Hernia Registry		8,182	10,335	18,517	9,370
Other		2,421	2,909	5,330	6,357
Total		10,603	13,244	23,847	15,727
NET INCOME/(EXPENDITURE)		(10,603)	4,256	(6,347)	45,952
RECONCILIATION OF FUNDS					
Total funds brought forward		68,646	152,880	221,526	175,574
TOTAL FUNDS CARRIED FORWARD		58,043	157,136	215,179	221,526

The notes form part of these financial statements

THE BRITISH HERNIA SOCIETY (CIO)

**BALANCE SHEET
30 APRIL 2024**

	Notes	Unrestricted fund £	Restricted fund £	30.4.24 Total funds £	30.4.23 Total funds £
CURRENT ASSETS					
Debtors	4	7,500	-	7,500	10,000
Cash at bank		51,203	157,136	208,339	212,625
		<u>58,703</u>	<u>157,136</u>	<u>215,839</u>	<u>222,625</u>
CREDITORS					
Amounts falling due within one year	5	(660)	-	(660)	(1,099)
NET CURRENT ASSETS		<u>58,043</u>	<u>157,136</u>	<u>215,179</u>	<u>221,526</u>
TOTAL ASSETS LESS CURRENT LIABILITIES		<u>58,043</u>	<u>157,136</u>	<u>215,179</u>	<u>221,526</u>
NET ASSETS		<u>58,043</u>	<u>157,136</u>	<u>215,179</u>	<u>221,526</u>
FUNDS	6				
Unrestricted funds				58,043	68,646
Restricted funds				157,136	152,880
TOTAL FUNDS				<u>215,179</u>	<u>221,526</u>

The financial statements were approved by the Board of Trustees and authorised for issue on 23 October 2024 and were signed on its behalf by:

Mr D L Sanders - Trustee

Ms S R G Smith - Trustee

The notes form part of these financial statements

THE BRITISH HERNIA SOCIETY (CIO)

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 APRIL 2024

1. ACCOUNTING POLICIES

Basis of preparing the financial statements

The financial statements of the charity, which is a public benefit entity under FRS 102, have been prepared in accordance with the Charities SORP (FRS 102) 'Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)', Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' and the Charities Act 2011. The financial statements have been prepared under the historical cost convention.

Income

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

Expenditure

Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

Taxation

The charity is exempt from tax on its charitable activities.

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

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

2. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 30 April 2024 nor for the year ended 30 April 2023.

Trustees' expenses

Trustees are allowed to claim travel expenses to board meetings and can reclaim any out of pocket expenses incurred on behalf of the charity.

THE BRITISH HERNIA SOCIETY (CIO)

NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 30 APRIL 2024

3. COMPARATIVES FOR THE STATEMENT OF FINANCIAL ACTIVITIES

	Unrestricted fund £	Restricted fund £	Total funds £
INCOME AND ENDOWMENTS FROM			
Donations and legacies	79	-	79
Charitable activities			
The establishment of a UK National Hernia Registry	-	61,600	61,600
Total	79	61,600	61,679
EXPENDITURE ON			
Charitable activities			
The establishment of a UK National Hernia Registry	-	9,370	9,370
Other	6,357	-	6,357
Total	6,357	9,370	15,727
NET INCOME/(EXPENDITURE)	(6,278)	52,230	45,952
RECONCILIATION OF FUNDS			
Total funds brought forward	74,924	100,650	175,574
TOTAL FUNDS CARRIED FORWARD	68,646	152,880	221,526

4. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	30.4.24	30.4.23
	£	£
Grants receivable	-	10,000
Prepayments	7,500	-
	7,500	10,000

THE BRITISH HERNIA SOCIETY (CIO)

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 30 APRIL 2024**

5. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	30.4.24	30.4.23
	£	£
Other creditors	<u>660</u>	<u>1,099</u>

6. MOVEMENT IN FUNDS

	At 1.5.23	Net movement in funds	At 30.4.24
	£	£	£
Unrestricted funds			
General fund	68,646	(10,603)	58,043
Restricted funds			
BHS UK National Hernia Registry	152,880	4,256	157,136
TOTAL FUNDS	<u>221,526</u>	<u>(6,347)</u>	<u>215,179</u>

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

	Incoming resources	Resources expended	Movement in funds
	£	£	£
Unrestricted funds			
General fund	-	(10,603)	(10,603)
Restricted funds			
BHS UK National Hernia Registry	17,500	(13,244)	4,256
TOTAL FUNDS	<u>17,500</u>	<u>(23,847)</u>	<u>(6,347)</u>

Comparatives for movement in funds

	At 1.5.22	Net movement in funds	At 30.4.23
	£	£	£
Unrestricted funds			
General fund	74,924	(6,278)	68,646
Restricted funds			
BHS UK National Hernia Registry	100,650	52,230	152,880
TOTAL FUNDS	<u>175,574</u>	<u>45,952</u>	<u>221,526</u>

THE BRITISH HERNIA SOCIETY (CIO)

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 30 APRIL 2024**

6. MOVEMENT IN FUNDS - continued

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

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General fund	79	(6,357)	(6,278)
Restricted funds			
BHS UK National Hernia Registry	61,600	(9,370)	52,230
TOTAL FUNDS	<u>61,679</u>	<u>(15,727)</u>	<u>45,952</u>

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

	At 1.5.22 £	Net movement in funds £	At 30.4.24 £
Unrestricted funds			
General fund	74,924	(16,881)	58,043
Restricted funds			
BHS UK National Hernia Registry	100,650	56,486	157,136
TOTAL FUNDS	<u>175,574</u>	<u>39,605</u>	<u>215,179</u>

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

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General fund	79	(16,960)	(16,881)
Restricted funds			
BHS UK National Hernia Registry	79,100	(22,614)	56,486
TOTAL FUNDS	<u>79,179</u>	<u>(39,574)</u>	<u>39,605</u>

THE BRITISH HERNIA SOCIETY (CIO)

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 30 APRIL 2024**

7. RELATED PARTY DISCLOSURES

There were no related party transactions for the year ended 30 April 2024.

THE BRITISH HERNIA SOCIETY (CIO)

**DETAILED STATEMENT OF FINANCIAL ACTIVITIES
FOR THE YEAR ENDED 30 APRIL 2024**

	30.4.24 £	30.4.23 £
INCOME AND ENDOWMENTS		
Donations and legacies		
Donations	-	79
Charitable activities		
Grants	<u>17,500</u>	<u>61,600</u>
Total incoming resources	17,500	61,679
EXPENDITURE		
Charitable activities		
Registry software	10,335	9,370
Other		
Website and IT costs	3,137	2,843
ASIT prizes	<u>650</u>	<u>800</u>
	3,787	3,643
Support costs		
Management		
Insurance	883	846
Finance		
Bank charges	-	1
Governance costs		
Independent examination	660	600
Meetings and conferences	<u>8,182</u>	<u>1,267</u>
	8,842	1,867
Total resources expended	<u>23,847</u>	<u>15,727</u>
Net (expenditure)/income	<u>(6,347)</u>	<u>45,952</u>

This page does not form part of the statutory financial statements

British Hernia Society

Annual Report

1 May 2023 to 30 April 2024

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Annual Summary of the Society

The British Hernia Society (BHS) became a Charitable Incorporated Organisation in January 2021. There are thirteen Trustees of the Charity who all sit on the Board plus two patient representatives.

The Society has 523 active members.

Board members

To strengthen the Board and develop workstreams in research and patient and public liaison, further positions on the Board were advertised in January 2023. The calibre of applicants was incredibly high and three very strong appointments were made. We welcomed Mr Srinivas Chintapatla, Mr Dominic Slade and Mr John Findlay to the Board in April 2023.

Subcommittees

The Abdominal Wall Reconstruction, Education and Training and Registry Subcommittees continue to flourish.

I would like to thank the board and the subcommittees for their achievements over the past year and their ongoing work which is detailed below in the subcommittee sections.

Workstreams

In addition to the work of the subcommittees, the principle focus of the society has been in developing the British Hernia Society Registry, under the leadership of Liam Horgan, and this will launch later this year. The development and implementation of this national hernia registry will be a huge milestone for the Society. It will permit benchmarking and research into hernia surgery on a previously unknown scale. Output from the registry will guide the future of hernia surgery, technology development and, ultimately, improve patient safety.

National Patient Decision Aid

The board including the patient representatives have been involved in developing the National Patient Decision Aid, the inguinal hernia playbook, in conjunction with Get it Right First Time (GIRFT). The Board have also developed national consent forms.

13th BHS Congress

Planning has begun for the 13th BHS congress to be held in Oxford in November 2024. An excellent provisional programme has been developed with speakers from Europe and the USA.

Abdominal Wall Reconstruction Subcommittee report

Members:

Toby Hammond, Chair

Dominic Slade

Sanjoy Basu

Jonathan Hodgkinson

Oliver Warren

Jackie Bullock (patient representative)

Additional invited attendees & project leaders:

Neil Smart

David Layfield

Association of Coloproctology of Great Britain and Ireland (ACPGBI) Abdominal Wall Subcommittee

Subcommittee Aims:

Promote safe & standardised care to prevent & manage incisional and parastomal hernias through education & training of:

1. How to open & close the abdomen
2. Management of the open abdomen
3. Principles of simple midline ventral/ incisional hernia repair which should be within the skillset of any general surgeon
4. Stoma management, including:
 - a. Stoma formation
 - b. Parastomal hernia prevention
 - c. Parastomal hernia management

Workstreams

1. Abdominal midline closure survey

A questionnaire designed to be asked by a trainee and answered by a consultant surgeon with answers being directly uploaded to a web-based survey tool (RedCAP). The purpose is to capture national

practice and help drive quality improvement in making surgeons aware of evidence-based closure techniques.

Published :

Messenger DE, Rajaretnam N, Slade DAJ; Closure of Abdominal Midline Survey (CLAMSS) Collaborative, Abdominal Wall Subcommittees of the Association of Coloproctologists of Great Britain and Ireland (ACPGBI) and the British Hernia Society (BHS), The Dukes' Club. Closure of Abdominal Midline Survey (CLAMSS): A national survey investigating current practice in the closure of abdominal midline incisions in UK surgical practice. Colorectal Dis. 2024 Jun 27. doi: 10.1111/codi.17081. Epub ahead of print. PMID: 38937910.

2. National Open Abdomen Audit (NOAA)

The aim is to carry out an audit of national practice which ultimately (like NASBO) should inform and educate which management options/ treatment modalities are used nationally to manage the open abdomen.

Launched August 2023.

NOAA continues to recruit well - we are over halfway to the UK target of 600 cases.

iNOAA the international version of the study now rolled out to Republic of Ireland with 5 centres registered (all the trauma centres) and one approved. Also a new version of the protocol has been created to try and include Australia and new Zealand with 1 site in New South Wales registered.

Also launched across Europe via ESCP with a further 20 sites registered.

3. Parastomal hernia projects

Project 1 - to develop a descriptor set for studies on parastomal hernias.

We have produced and sent out a Delphi consensus questionnaire

The premise being that the treatment of parastomal hernias is complex with different options available. One of the challenges of putting surgical techniques into practice is understanding which patients they work best for. Unfortunately, published studies show lots of variation in how they describe patients in their studies. We would like to address that by agreeing on a set of key descriptors which can be used in future parastomal hernia studies.

Written up & submitted to colorectal disease-awaiting publication decision

Project 2 - to develop a Delphi consensus document for the management of parastomal hernias. We have put together a global collaborative of hernia surgeons, patient representatives and stoma nurses

with a specific interest in the management of parastomal hernias. The EHS guidelines showed that the evidence base regarding PSH repair is not strong and current attempts to strengthen it are likely to take many years. Surgical innovation moves faster than the published literature, and we know that surgeons adopt and discard techniques due to poor performance faster than case series, registries and RCTs can detect.

The aim of the collaborative is to share best practice, mistakes made and learnt from, management pathways, and technical modifications to recognised techniques in the management of parastomal hernias. The Delphi method will be used to develop a non-evidence based expert consensus document with a focus on patient safety and improving their outcomes regarding the management of parastomal hernias.

Delphi rounds completed

Project stalled as lead for project has moved jobs and has all data - all data to be passed on to new lead with view to writing & submitting by end of 2024.

4. Education & Training

We are setting up national teaching & training programmes at all career levels:

- **Foundation Year Drs & Core Trainees**

Aim – To amend the Basic Surgical Skills (BSS) Course to transition from teaching the mass closure of the abdomen using loop 1/0 nylon to single layer aponeurotic closure using slowly absorbable sutures in a small bites technique.

We have a confirmed agreement with the RCS Basic Surgical Skills committee and have almost completed new course material for the national BSS course

- **Core Trainees to ST4 trainees:**

We are hoping to incorporate a “Principles of Abdominal Wall Surgery” section into a new Intermediate Surgical Skills Course being developed by the RCS. This will focus on:

- a. how to open & close the abdomen – small bites technique
- b. how to manage the open abdomen – mesh mediated fascial traction closure
- c. how to create the ‘perfect’ stoma
- d. how to perform a standard Rives-Stoppa hernia repair

- **ST5 trainees to early year consultants:**

A standardised Cadaveric AWR course

It solely covers the open management of midline incisional and large primary ventral hernias. The course is delivered over 2 days combining lecture-based tutorials and hands-on cadaveric training.

Next course planned for 2025 in Bristol.

- **Parastomal Hernia Symposium - April 2025**

We are planning a PSH symposium joint with ACPGBI & EHS

Future plans

Perineal Hernia Working Group

Initial plans & interested parties being developed.

Aim – To develop guidelines for prevention and treatment

Fasciotens Audit of UK Practice

In early stages of development

Education and Training Subcommittee Report

Members

Oroog Ali (Chair)

Christian Wakefield

Balendra Kumar

Srinivasan Balchandra

Duncan Scrimgeour

Susannah Hill (patient representative)

Workstream

The BHS education and training subcommittee has had another year focusing on ensuring high quality and opportunity in hernia surgery education. Over the last tenure we have gone from strength to strength in the education and training subcommittee. We have had a real focus on delivering and engaging in high quality hernia surgery training.

Our subcommittee has continued to collaborate with organisations including ASGBI, ACPGBI, EHS and the colleges to bring one voice to hernia surgery.

We have arranged season 3 of our webinar hernia series in collaboration with RCSED due end of 2024/2025 so please look out for that!

We have delivered courses, webinars and developed strategies to focus on key areas of hernia surgery that both trainees and trainers would find valuable. The subcommittee members continue to deliver live operating hernia courses which have proven to be invaluable to trainees in the current climate. We are keen to understand the current climate of hernia courses and education delivered, so if this is relevant to you please reach out.

Some key areas of emphasis for the next year include focus on robotic hernia surgery, complex abdominal wall hernia surgery and “getting the basics right”.

We are excited for the upcoming BHS conference in Oxford where some educational activities include a robotic groin hernia preconference course with live operating and robotic themed educational sessions with key note speakers.

We have had a change in subcommittee members. I would like to thank Bala and Balen for their contribution to the BHS during their tenure. I would like to welcome the new subcommittee members to the team and I look forward to some exciting projects to be delivered.

2024/2025 will be an exciting time for the education and training subcommittee so do look out for upcoming events.

Registry Subcommittee Report

Members

Liam Horgan (Chair)

Stella Smith

Nasra Alam

Sue Blackwell (patient representative)

John Findlay

Andrei Mihailescu

Praminthra Chitsabesan

Grace Kettle

Isabelle Legood

Aims

The BHS Registry sub-committee (RSC) was formed in Jan 2021 as an operational group to develop the new BHS Registry. The aims of the RSC are to raise funding, develop the dataset, commission the registry, and then open the registry to all surgeons who carry out hernia repairs.

Background

This exciting, ground-breaking project will inform hernia surgery and hernia-related technology for many years to come. The Registry will give real-time data on operative details, implant use and outcomes. The Registry has been designed with and for patients. What doctors think are important outcomes from hernia surgery are not necessarily what patients think are important. Consequently, patient-reported outcome measures (PROMS) will be built into the registry.

By contributing to the registry, we can finally understand what works well, and what doesn't. We can learn from patients' experiences and target surgery accordingly. We hope to ensure that patients get the right operation, at the right time.

Data will be analysed and reported on an annual basis. It will be made public, and readable, to both patients and healthcare professionals. As time progresses, more detailed analyses on specific operations and groups of implants will be reported.

Progress

The RSC has worked hard, holding regular monthly meetings to drive the registry forward. The group have made substantial progress over the past year. The RSC has two new members this year: Dr Grace Kettle and Ms Isabelle Legood.

The subcommittee has driven funding to design and sustain the registry for three years. The Registry has been developed by the British Hernia Society with Industry funding. Industry funding has been donated on an ethical, and proportionate, basis with all companies having an opportunity to contribute. No single company dominates the funding stream, and no company has access to raw data or influence over the data collected. Industry only has access to reports. We are grateful to our Industry sponsors for their help in developing the Registry and look forward to sharing product information to help inform product design.

We have partnered with Dendrite Clinical Systems Ltd to design and maintain the registry. We have a prototype registry developed and it has been extensively tested over 2023/2024. The launch of the registry will be an iterative exercise with ongoing snagging.

The governance of the registry is of paramount importance. Patients must consent to have their data entered into the registry and be able to see or remove their data if they desire. Appropriate information leaflets and consent forms have been developed to support this. There are regulations around data safety and procedures have been designed in partnership with Dendrite to meet those regulations. Research on the data in the registry will be key to understanding outcomes and a Health Research Authority Ethics Application has been submitted to gain permission to do this.