



The British Thoracic Society

Annual Report and Financial Statements

for the year ended 30 June 2023

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The Trustees of the British Thoracic Society (BTS) present our report and the audited financial statements for the year ended 30 June 2023. The reference and administrative information set out on page 23 forms part of this report.

The financial statements comply with the Charities Act 2011; the Companies Act 2006; the Memorandum and Articles of Association; and the Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015).

CHAIR'S FOREWORD



It gives me great pleasure to introduce the BTS Annual Report for 2022/23. One of the highlights of the past year was the launch of the new BTS strategy at the AGM in November 2022, and this reflects a renewed commitment by the Society to provide high-quality support to its members and to ensure respiratory care remains at the forefront of the agendas of the four governments and their NHS leaders. The new strategic priorities focus the Society on providing education and training, promoting quality improvement, including the relaunch of our ILD Registry, delivering leading-edge guidance and ensuring the work of BTS continues by maintaining good governance.

The Society continues to advocate for increased support not only for the multi-professional workforce but also for changes that will improve respiratory health for everyone. In order to deliver better lung health for all, we need more respiratory professionals, and this

remains a core focus for BTS. It is heartening to see the Government taking note of these challenges through its commitments to deliver a Workforce plan.

This year we have contributed to several consultations to ensure the respiratory voice is heard. We were delighted to see respiratory designated as one of the six major conditions in the Department of Health and Social Care's Major Conditions Strategy and look forward to hearing the outcome of the consultation, which will inform its delivery. We continue to call for investment in services and for initiatives promoting prevention, for example, by increasing the number of Tobacco Dependency Services. We have also taken part in campaigns promoting the right to breathe clean air and have appointed a new Sustainability Trustee, Dr LJ Smith, to help support our ongoing work in this area. Dr Smith is currently working with a group to develop a new BTS Position Statement to complement our existing statement on Air Quality.

BTS continues to explore new ways to deliver respiratory care more effectively, and we have been involved in work ranging from combating health inequality to redistribution of respiratory training posts. We are championing integrated care and have contributed to discussions and outputs about models of care, such as virtual wards. We are also advocating for and supporting interventions to reduce pressure on acute and emergency care services.

We have been lending our voice to new partnerships recognising that joining with others can help to strengthen our message. Alongside Asthma + Lung UK and, through the Taskforce for Lung Health, we are the UK participant in the International Respiratory Coalition, which aims to reduce respiratory disease-related mortality by a third globally by 2030. We are working closely with many stakeholders to explore new ways to share best practice, utilising our online platform, Respiratory Futures, to reach new audiences.

I would like to thank all respiratory specialists for their continued hard work and efforts over the last year, my colleagues for their continued support and guidance and the BTS staff team, who deliver the work of the Society with such skill and passion. We look forward to helping BTS to achieve an even greater impact in 2024.

Dr Paul Walker, Chair of the BTS Board of Trustees

OUR STRATEGY AND PURPOSE

The Society published new strategic priorities this year for the period 2023-2025.

Our Vision

Better lung health **for all**.

Our Mission

- To influence the provision of the optimum respiratory workforce and the development of services that promote sustainable solutions and reduce health inequalities.
- To educate professionals to advance knowledge and share learning in the prevention, diagnosis, and treatment of lung disease.
- To support all members of the respiratory team to improve standards of care.

Our strategic priorities for 2023 – 2025

The outcomes we intend to achieve are set out as follows:

To represent the entire multi-professional respiratory team across the four nations.

Outcome: We will continue to work with stakeholders to provide an expert and authoritative voice to champion the role, expansion, and impact of the respiratory workforce to ensure that everyone has access to high quality respiratory care from the right person, at the right time, in the right setting.

To deliver education and continued professional development to the entire multi-professional respiratory team.

Outcome: We will work to engage, encourage, and support all members of the respiratory team by providing high quality education and networking opportunities that are relevant at all stages of an individual's career.

To support the development and delivery of high-quality respiratory care which encompasses disease prevention, early diagnosis, therapeutic intervention, and supportive care.

Outcome: We will continue to improve standards of care for patients and reduce health inequalities via our internationally recognised scientific meetings, our journals and our programme of evidence-based guidance, standards, and position statements.

To ensure BTS remains a well-governed, inclusive, and financially stable membership organisation.

Outcome: We will continue to represent and involve the growing multi-professional respiratory team in the work of the Society, underpinned by a strong and transparent business model.

Annual review

The Board reviews progress against the strategic priorities each year and this Report provides an account of the Society's activities undertaken to meet the outcomes specified above. This review helps the Trustees to make sure that the Society's aims, objectives, and activities remain focused on its stated purposes. This report sets out how the Society has worked to deliver its mission during the 2022-2023 year.

HOW OUR ACTIVITIES DELIVER PUBLIC BENEFIT



The Society produces a range of **information, publications, clinical standards**, and related resources which are freely available to all via the BTS website and the Respiratory Futures website.

Health care professionals are able to use these resources to improve practice locally, which in turn benefits patients in their care. Our communications activities ensure that these resources are brought to the widest possible audience including policy makers and the public.

BTS conferences and events attract a wide audience of health care professionals from all members of the respiratory team. Our events ensure that those attending obtain maximum benefit from both face-to-face opportunities to develop networks as well as the flexibility that online attendance offers for some events.

Workforce remains a key priority for the Society. Following the BTS landmark report "*A Respiratory Workforce for the Future*", BTS has continued to raise the profile and importance of respiratory health care professionals.

The Society has continued to highlight the link between **air quality and lung health**. BTS is a partner in the relaunched Healthy Air Coalition and continues to participate as a full member of the UK Health Alliance on Climate Change.

BTS continues to work to meet the stated aims of its **Inclusion, Diversity and Equality** policy published in 2021.

Highlighting **health inequalities** and the impact that this has on respiratory patients has been a theme of the Society's work over the past year leading to the publication of a new BTS Position Statement.

BTS, through **Respiratory Futures**, worked with ITN Business during 2022 to develop a series of important films highlighting the need for more respiratory health care professionals, the importance of clean air and the impressive innovations in respiratory health care that bring benefits to patients.

The Trustees confirm they have referred to the guidance from the Charity Commission on public benefit and complied with the duty in Section 17 of the Charities Act 2011 to have due regard to the Commission's public benefit guidance. The Trustees confirm that they have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the Society's aims and objectives and planning in future activities.

ACHIEVEMENTS AND PERFORMANCE

We describe our three main areas of activity in the Statement of Financial Activities (the SOFA) as follows.

Standards, workforce, and education

These activities are undertaken under the direction of the Society's Standards of Care Committee; the Quality Improvement Committee; the Education and Training Committee; and the Workforce and Service Development Committee, together with the input of the Society's Specialist Advisory Groups (SAGs), the Specialty Trainees Advisory Group (STAG), Nurse Advisory Group and Pharmacist Advisory Group.

Research and innovation

The Society achieves objectives in this area by:

- Publishing the journals *Thorax* and BMJ Open Respiratory Research.
- Organising the annual Winter Scientific Meeting, which is the main function of our Science and Research Committee.
- Contributing to the National Institute for Health Research and other national initiatives including the Lung Research and Innovation Group (LRIG).
- Recognising outstanding contributions in the Respiratory Clinical Research Community through a series of awards and prizes, including those which are awarded in association with the NIHR, A+LUK and BALR.
- Supporting applications for respiratory research projects from UK researchers which meet the required criteria. During the 2022- 2023, BTS had 13 applications to support research, and all of these were accepted.

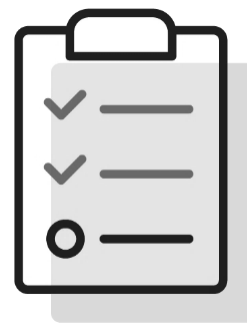
Profile

BTS is committed to working to promote and advance knowledge and awareness of lung health to the public, to healthcare professionals and to policymakers and government bodies. This is done pro-actively and reactively in partnership with other professional societies and lung charities, and via internal and external communications. Our continued membership of the Taskforce for Lung Health is one way of achieving this, as is our membership of the UK Health Alliance on Climate Change.

The Taskforce for Lung Health is acting as the UK coalition for the new International Respiratory Coalition (IRC). BTS with Asthma + Lung UK are the lead organisations representing the UK coalition for the IRC.

The Respiratory Futures platform, coupled with our strengthened communications team, allows us to reach a wider audience and to support the respiratory health care community communications capacity within BTS Head Office.

STANDARDS, WORKFORCE AND EDUCATION



Standards

Clinical Guidelines, Clinical Statements and Quality Standards

BTS published the following guidance documents:

- Guideline for Diagnosing and Monitoring Paediatric Sleep-disordered Breathing
- Clinical Statement on Aspiration Pneumonia
- Clinical Statement on Community Acquired Pneumonia in People with Learning Disability
- Quality Standards for Clinically Significant Bronchiectasis in Adults
- BTS and Intensive Care Society (ICS) Model of Care for Specialised Weaning Units

BTS continued to work with NICE and SIGN to develop a new joint guideline for the diagnosis and management of chronic asthma. Work on a number of other guidance documents is underway.

UK ILD Registry

The new UK Interstitial Lung Disease Registry launched in February 2023. Building on the existing BTS UK patient Registries, the new Registry has been developed to collect information about additional people diagnosed with ILD, including those affected by specific interstitial lung conditions. The BTS UK ILD Registry draws together the existing UK Idiopathic Pulmonary Fibrosis (IPF) and UK Sarcoidosis Registries, as well as expanding to include all fibrosing ILDs. The expansion of the Registry will support a greater understanding of how cases of fibrosing ILD are treated nationwide.

There were just over 1,650 new cases added to the UK ILD Registry between July 2022 and June 2023, with 6,300 cases on the Registry overall.

BTS Multi Drug-Resistant-Tuberculosis Clinical Advice Service

The MDR-TB Clinical Advice Service provides advice and support to clinicians who encounter MDR-TB, providing consensus expert advice from a multi-disciplinary panel of formally appointed Clinical Service Advisers. This UK-wide service forms an integral part of our Quality Improvement activities, and we will use information from the initiative to develop educational resources.

For the period July 2022-June 2023 there were a total of 216 cases discussed through the service of which 161 were newly registered cases.

We also had two abstracts on Clinical Advice Service activity published in *Thorax* and one on the impact of COVID-19 on TB services published in the *Clinical Medicine Journal*.

Clinical Audit Programme

National Respiratory Support Audit

BTS completed a successful pilot of the Respiratory Support Audit (1 December 2021- 31 March 2022) and offered the national audit during 2023. The audit aimed to capture data on patients outside critical care that have required respiratory monitoring or intervention (i.e. either admitted to an acute respiratory support unit or treated in another ward setting with NIV/CPAP/HFNO), with a view to better understanding variations in clinical practice and outcome. 19 organisations took part in the pilot audit and 119 took part in the national audit.

National Pleural Services Organisational Audit 2021 – report published in 2022

This was the first project to bring together national guidance documents on the safe treatment of pleural disease. The 2021 Audit examined how hospitals and clinicians adhered to these organisational standards. 111 sites took part in the audit, which provided organisational information on five key topics: medical leadership, service delivery, pleural nursing, out-of-hours care, patient safety, and clinical governance. The report highlighted many areas in need of improvement relating to patient safety, clinical governance, and staffing levels. The audit also found many sites were unable to meet the recommendations of the National Respiratory GIRFT Report.

Patient Safety

We expanded our work on patient safety issues through a pilot project conducted under the direction of the QI Committee to examine national reporting and learning data on adverse events in respiratory. This is due to report in late 2023.

Tobacco Dependency Project

This important project was formally commissioned by NHSE in 2021, to run for three years to mid-2024 with the aim of providing a sustainable framework of resources for improving tobacco dependence treatment by supporting clinicians working in NHS services. Extensive resources have been provided on the Respiratory Futures website, together with a series of open access webinars. The webinars were initially attended by 432 people and have subsequently been viewed 240 times. The Tobacco Dependency Programme webpages were viewed 8050 times, and resources have been downloaded 1050 times.

Quality Improvement Programme for tobacco dependency treatment

BTS launched a new Quality Improvement (QI) Programme aimed at supporting acute Trusts to develop high quality tobacco dependency treatment services. This programme was led by Dr Robyn Fletcher, a QI Tobacco Fellow working with Professor Sanjay Agrawal, the NHS England National Specialty Adviser for Tobacco Dependence. 24 sites were selected to participate in the programme and were provided with online QI training and support to help them develop projects that will

improve the delivery of tobacco dependency treatment, including 11 webinars. All participants completed a QI project, and the final report will be published in late 2023.

Clinical Data Policy and Data Access

BTS provides access to its clinical datasets (Audit, Registry, MDR-TB Clinical Advice Service) subject to the appropriate approvals being granted. Organisations can make a formal application to BTS, which will be reviewed by the Quality Improvement Committee.

Joint Tuberculosis Committee

BTS hosts this important group which comprises stakeholders from the four nations of the UK and works to ensure that information and good practice are shared for the benefit of patients with Tuberculosis.

Specialist Advisory Groups

Our network of 19 **Specialist Advisory Groups** continues to advise the Society on national matters relating to patients with specific types of respiratory disease. With SAG support, we have provided comment on 32 national consultation exercises.

Workforce

BTS published “**A Respiratory Workforce for the Future**” in May 2022. This document has since been downloaded from the BTS website 2039 times and has been used to support the Society in continued discussions with national leaders in relation to the respiratory workforce.

Through the **Workforce and Service Development Committee**, the Society contributes to the work of the Respiratory Specialty Advisory Committee (SAC)/Joint Royal College Physicians Training Board (JRCPTB), the Royal Colleges of Physicians, and Regional Training Programme Directors.

The Workforce and Service Development Committee continued to oversee the Society’s data collection activities in relation to consultant and trainee posts, as well as raising the profile of the full respiratory team.

The following activities took place during the year:

- A joint webinar with the SAC on the **new respiratory medical curriculum** attended by 245 people.
- Publication of a **BTS Viewpoint on virtual wards** to assist those involved in their creation and delivery.
- Production of a **Framework for pleural nurses**, including example job descriptions
- Publication of 4 new **case studies** outlining the roles of different members of the respiratory team.
- **Regular meetings with those in associated professional societies**, including the Primary Care Respiratory Society, Association of Chartered Physiotherapists in Respiratory Care (ACPRC), Association for Respiratory Technology and Physiology (ARTP), Association of Respiratory Nurse Specialists (ARNS).

- A film, “**Lungs Matter**”, which illustrates the work done by all members of the respiratory team as part of the Respiratory Futures/ITN Business production.

Education

The Society’s range of educational activities included:

- The Summer Meeting, held in person in June 2023 and attracting over 600 delegates.
- An increasingly popular Short Course programme which comprised 10 short courses attracting over 975 delegates (a mix of both in person and online courses). Course attendance increased by 32% from the previous period with representation from across the multi-disciplinary respiratory team.
- Publication of new online learning resources on the theory of thoracic ultrasound, with 322 subscribers in the period 30 March - 30 June 2023.

RESEARCH AND INNOVATION

The Society publishes two journals in partnership with the *British Medical Journal (BMJ)*:

- **Thorax** which attained an Impact Factor (IF) at the end of June 2023 of 10 (ranking 6/65 among respiratory journals).
- **BMJ Open Respiratory Research (BMJORR)**, the Society’s open access journal, which attained an Impact Factor of 4.1 with a listing of 26/65 amongst respiratory journals.



The **BTS Winter Meeting** remains the foremost inclusive respiratory conference in the UK, and undoubtedly one of the most influential conferences of its type globally, attracting a multi-disciplinary audience from the UK and several hundred delegates annually from Europe and more widely. In November 2022, the Winter Meeting attracted over 2179 delegates across three days of high-quality scientific presentation and debate. The Society awarded 25 conference awards to enable delegates to travel to the meeting to present abstracts.

The **BTS Global Lung Health Group** oversaw the pilot scheme of clinical placements which enabled two clinicians from Africa to travel to the UK to undertake a two-week placement with attendance at the Winter Meeting. In June 2023, three clinicians from the UK travelled on a reciprocal visit to Kenya and Nigeria and attended the Pan African Thoracic Society Congress in Mombasa.

The **BTS Science and Research Committee** provided 13 letters of support for applications for research proposals.

BTS is represented on the new **Lung Research and Innovation Group** hosted by Asthma + Lung UK.

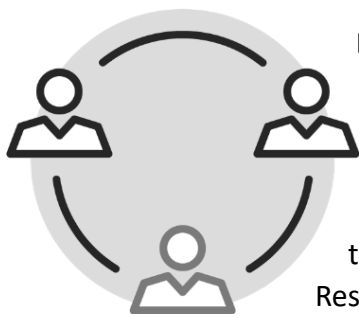
BTS has introduced a number of new **awards** to recognise excellence in the field of respiratory research and clinical care:

- The **joint BTS/NIHR award** to recognise outstanding contributions in the respiratory clinical research community.
- The **BTS/A+LUK/BALR mid-career lecture awards**, which provide researchers with the opportunity to give a prestigious plenary lecture at the Winter Meeting.

- The **BTS President's Award** which will recognise individuals making an outstanding contribution to respiratory care.

BTS, via Respiratory Futures, hosted a networking event with Asthma and Lung UK at the Summer Meeting to facilitate connections between clinicians and innovators who are working to develop new products and technologies to improve respiratory care.

PROFILE



BTS **Membership** grew during the year from 4254 to 4480 in June 2023. BTS has continued to promote the benefits of membership to all members of the respiratory team, and has seen the number of BTS members from the nursing, allied health care professions as well as by over 20% over the past 3 years. Over 50% of BTS members are able to take advantage of the discounted membership rates for the European Respiratory Society.

BTS has enhanced and expanded its **communications** activities supported by the new BTS communications team aiming to raise the “respiratory voice” wherever the opportunity occurs. 124 pieces of coverage were placed, Twitter followers grew from 26,800 to 29,683 across our @BTSRespiratory and @resputures accounts, and LinkedIn followers grew from 1522 followers to 2394 followers.

BTS continues to develop and maintain **effective partnerships** and relationships across the NHS and with stakeholder organisations to support and influence national and local policy. We are involved in national working groups overseeing the implementation of the NHS England Long Term Plan. We respond to national calls for evidence in support of the NHS workforce and participate in discussion and meetings with national groups including the Royal Colleges and with from Wales, Northern Ireland and Scotland through BTS Council.

BTS is an active partner in the **Taskforce for Lung Health**, and with Asthma + Lung UK, takes the lead in the UK involvement in the **International Respiratory Coalition**.

BTS remains an active partner in the Taskforce for Lung Health and **valued relationships with organisations** including Asthma + Lung UK, the Association for Respiratory Technology and Physiology (ARTP), the Association of Respiratory Nurse Specialists (ARNS), the Association of Chartered Physiotherapists in Respiratory Care (ACPRC), Action for Pulmonary Fibrosis, the Primary Care Respiratory Society (PCRS), and the British Paediatric Respiratory Society (BPRS).

BTS became a member of **UK Health Alliance on Climate Change (UKHACC)**, a collaboration of organisations working to raise the profile of climate change across healthcare and also the Healthy Air Coalition (HAC) a collective of health, environment and transport organisations. The publication of the **BTS Position Statement on Air Quality** provides an important indicator of how important this area is for the Society.

BTS appointed a new trustee for **sustainability and the environment**. Dr Laura-Jane Smith joined the Board in November 2022 and leads a group which will develop a new BTS Position statement on the environment and sustainability.

THE BTS HEAD OFFICE TEAM

The Society's Senior Management Team comprises Sally Welham, Chief Executive, Rosie O'Carroll, Head of Strategic Communications, Louise Preston, Head of Strategic Programmes, Miguel Souto, Head of Clinical Programmes and Kathryn Wilson, Head of Operations. The full list of BTS staff members is listed on page 23.

BTS would like to acknowledge and thank all the many respiratory healthcare professionals for their outstanding hard work, flexibility, resilience, and compassion.

The Society is proud to represent the respiratory community - we applaud all you have done and continue to do for your patients and for the health service.

Making an Impact

This year there were...

4,480

BTS members

29,683

Twitter followers across our @BTSRespiratory and @RespFutures accounts

1,522

followers on our LinkedIn account

8,050

views of the Tobacco Dependency Project webpages



6

new Guidance documents published

32

responses to national consultations

75%

of the cases discussed by the MDR-TB Clinical Advice Service were newly registered cases

119

organisations that took part in the national Respiratory Support Audit

1,650

new cases added to the UK ILD Registry



600

delegates at the 2023 Summer Meeting

2,179

delegates at the 2022 Winter Meeting

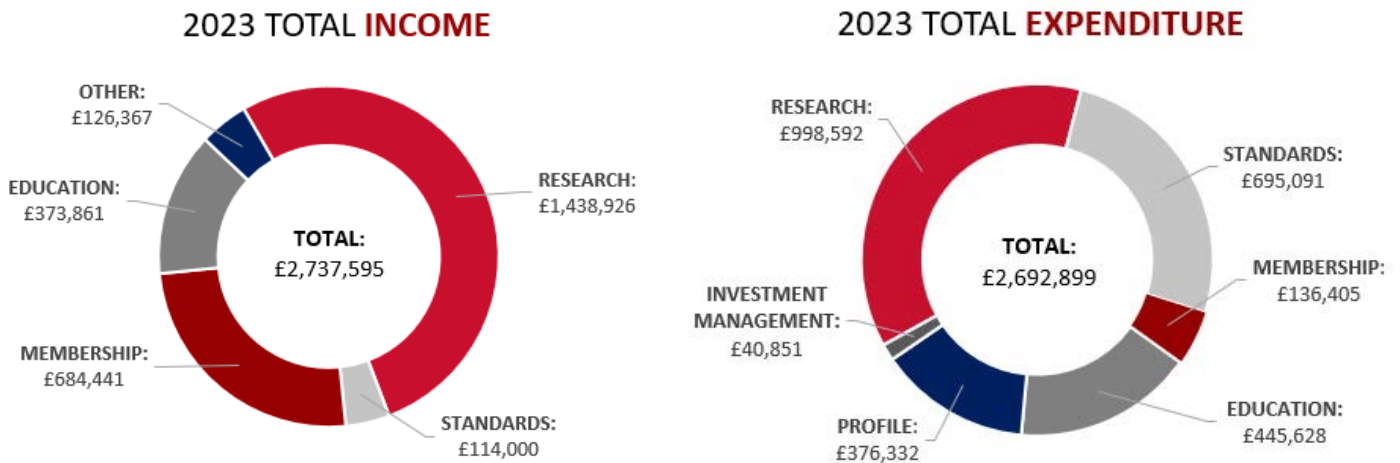
32%

more delegates attending a BTS short course than the previous 12 months - over 975 in total

FINANCIAL REVIEW

Core costs

Trustees have approved deficit budgets for the last four years, 2019/20, 2020/21, 2021/22 and 2022/23 as a result of considered decisions taken since 2016 to support efforts to raise the respiratory profile. This has accommodated appointment of a number of new members of staff over the past 3 years and ensured a smooth transition to the current Senior Management Team. Trustees still have no doubt that the Society remains a going concern.



We are fortunate to have **robust income streams** that support our core work. These are membership subscriptions, at £684,441 in 2023 compared to £666,540 in 2022. At the end of June 2023, we had 4,480 members (4,254 in June 2023, 4,109 in June 2021 and 3,778 in June 2020). The partner's share of the profit from the journal Thorax and BMJ Open Respiratory Research is the other core income stream. Income from the journals decreased to £540,259 in 2023 compared to £565,044 in 2022, £659,894 in 2021 and £646,788 in 2020. This is the expected continuation of an overall downward trend in journal income which the Management Committee for the journals will continue to monitor closely.

Investment Policy and Performance

Management of the BTS investment portfolio is undertaken by Evelyn Partners (formerly Tilney Asset Management). The Society's Investment Policy is reviewed annually by the Board each December and currently sets out a "Growth Strategy", which is defined as follows:

"... appropriate for an investor with a five-year time horizon, who is comfortable with significant volatility of returns and having up to 80% of their portfolio in equities, and who is able to tolerate a loss of up to 20% of the value of the portfolio in any one year".

Quarterly reports are received from the Investment Managers and bi-annual meetings are held between the investment managers and the Honorary Treasurer and Chief Executive to review progress and assess the approach to management of the funds. The Honorary Treasurer speaks to the Society's dedicated Investment Manager before each meeting of the Board of Trustees in order to report on progress.

The Investment Policy. The instruction not to invest in the tobacco industry or tobacco-related products remains strictly in place. The Investment Policy was amended in 2016 to include the requirement that investments are not made in industries involved in the extraction of fossil fuels or in industries that make weapons. In 2017 Trustees agreed to draw a proportion of the annual investment gain as income to support the Society's activities.

Reserves

Total funds at 30 June 2023 were £7,146,926 (£6,779,598 in 2022) comprising restricted funds of £30,370 (£29,342 in 2022) and unrestricted funds of £7,116,556 (£6,750,256 in 2022).

The Society holds reserves for two purposes. The first is to generate income for its operational needs (the investment reserve). This is held as a designated fund and stands at £4,662,672 (compared to £4,386,259 in 2022 and £4,460,163 in 2021). The second purpose is to ensure that the Society can meet its operational needs and working capital requirements (the free reserve). The free reserve is represented by the general fund. This stands now at £782,610 (it was £741,607 in 2022 and £570,346 in 2021). At the November 2022 meeting of the Board, it was agreed that the reserve policy should be amended and maintained in future at a level equivalent to between three and six months, or 25-50% of projected expenditure based on that year's budget, with the Society holding a minimum of three months, or 25%, projected expenditure.

Funds

Interest & Investment income earned has been attributed to individual funds in the ratio of the fund balance to total funds.

STRUCTURE, GOVERNANCE AND MANAGEMENT

The British Thoracic Society (“the Society”/ “BTS”) is a charitable company limited by guarantee which has no share capital. It was incorporated on 21 June 1982 and registered as a charity on 21 June 1982. The Office of the Scottish Charity Regulator (OSCR) approved the Society’s application to be registered as a charity in Scotland in early 2010.

As a registered charity, the Society is governed by its Memorandum and Articles of Association. Trustees review these regularly. The most recent revisions were approved by the Charity Commission in December 2016. The document can be viewed at <https://www.brit-thoracic.org.uk/about-bts/governance/>

Board of Trustees

The Board comprises five honorary officer positions; the Chairs of the Society’s main (Standing) Committees; and up to three others, chosen by the Board for their particular expertise in relevant areas according to the requirements of the Society’s Strategic Plan. A list of all Trustees who served during the year and up to the date this Report was approved appears on page 22.

The Board provides strategic decision-making and direction for those who are responsible for delivering the Society’s operations and activities. The normal term in office for Trustees is three years, as it is for all who serve on BTS Committees and Advisory Groups. All Trustees are made aware of relevant Charity Commission and Companies House Guidance on appointment and are required to undertake induction training provided by the Society’s lawyers and senior staff. Any Trustee may attend refresher training annually if they wish. In accordance with the Society’s constitution the Chair, Honorary Secretary and Honorary Treasurer are selected a year in advance of taking up their posts, to allow some shadowing to take place. An induction programme is provided to the three Honorary Officers in the months before they take up post, and they usually start to attend meetings of the Board of Trustees and Council in the autumn of the year they assume office.

BTS Council

The Society’s Council has a significant role. It comprises 18 elected members plus the President (who chairs meetings of the Council), the Chair of the Board of Trustees and several ex-officio appointments including the Chairs of the BTS Specialty Trainees Advisory Group and the BTS Nurse Advisory Group, the British Paediatric Respiratory Society, British Association of Lung Research and Asthma + Lung UK (formerly the British Lung Foundation). Elections take place annually for 6 new Council members. The constitution requires that one member under the age of 35 should be elected each year.

Council acts as a sounding board for Society policies and a guide for Trustees about general membership opinion. Bi-annual meetings of Council are timed to take place in the mornings before Trustees meet, so that related operational decisions can be made quickly and effectively. Topics covered during the year included the increasing challenges placed on those working in the specialty in the face of the pandemic, continued workforce shortages and the annual Winter Pressures on health systems.

Standing Committees and Specialist Advisory Groups (SAGs)

These important groups enable the Society to organise and deliver core work programmes (the Standing Committees) and communicate quickly and efficiently with expert opinion when required (the Committees and Advisory Groups). Senior staff ensure that the agendas of the Board and Standing Committees are aligned with a focus on how the work of the latter contribute to the Society's overall strategy, allowing sufficient space for discussion and approval by Trustees of annual work plans of the main Committees. A standard constitution for Committees and SAGs ensures regular and planned turnover of members and consistent methods of operation. The SAG Chairs meet Trustees once a year to discuss strategic and operational matters, and each provides a written report. Each SAG holds an Open Meeting during the Society's Winter Meeting to report to BTS members and others about their activities and seek feedback.

A recruitment round for new members of Committees and SAGs takes place each June – August (of the order of 70 vacancies), as well as recruitment of the President-Elect and any other Officer or Trustee roles that fall due.

Involving the public

Since 2007 one of the Society's Trustees has been a lay person. The Society also benefits from patient and carer representation on many of its Guideline and Quality Standards Groups and a system is in place to achieve this. Following the departure of the most recent lay trustee, the Society is engaged in an exercise to identify and recruit appropriate lay expertise to the Board.

Member Engagement and Involvement

The Society's Strategic Plan mentions that one of the ways by which the Society expects to achieve its objectives is by harnessing the expertise and commitment of its members. The Society had 4,480 members at the end of June 2023 (4,254 in 2022, 4,109 in 2021, 3,778 in 2020, 3,349 in 2019 and 3,049 in 2018). 430 members, around 10 % of UK-based members, were engaged in and/or working on BTS projects or in BTS Committees and Advisory and Guideline Groups during the year. They are listed in Appendix A and we wish to record our thanks and gratitude to all of them. We are proud of this level of engagement, which is supported by a robust and democratic framework of access to membership of Committees and Specialist Advisory Groups (SAGs).

Operational Framework

The Trustees are responsible for all strategic and some of the operational decisions taken by the Society. These include allocation of resources in pursuit of the objectives within the Strategic Plan, although the majority of the latter decisions are devolved to the Officers' Group and most operational decisions are delegated to the Chief Executive and the Senior Management Team.

Standing Financial Instructions exist in relation to decision-making about ordering of goods and services, for authorising expenditure and for authorised signatories on the Society's accounts. These instructions are reviewed annually by the Chief Executive and Honorary Treasurer, at the time of the annual audit. There are three authorised signatories on the BTS accounts (Chief Executive, Honorary Treasurer and Chair of the Board). There is also clear separation of duties in respect of staff roles and responsibilities for financial activities. The "Items of Reserved Business" statement within the Standing Financial Instructions gives details about what decisions must always be discussed in full by all Trustees, and what can be deferred to the Officers' Group and/or senior staff.

From 2020, the Officers Group has also performed the role of Internal Audit Committee and receive and consider the annual report from the auditors.

Accounting

The Board considers quarterly management accounts and reports at each of its four meetings during the year, with narrative provided by the Honorary Treasurer and Chief Executive. The narrative focuses on reasons for variation against budget. Operational decisions that might be needed in the meantime are discussed by the five Honorary Officers and Chief Executive, who usually meet monthly (via Teams) and more frequently when required (weekly or fortnightly meetings were held during the peak of the pandemic). Annual budgeting is the responsibility of the Chief Executive and the Society's accountants, with bi-annual review (at the half -year and end of each financial year). Indicative budgets are prepared for the following two years, and the Chief Executive and Honorary Treasurer will review closely at least once a year prior to the year end.

Remuneration

The Society established a Remuneration Committee in 2007, which reports to the Board. Its remit is to advise the Trustees about the Society's pay policy. It meets annually to agree the remuneration of the staff employed by the Society, by considering the recommendations of the Society's Chief Executive following annual performance development reviews and considers the remuneration of the Chief Executive. The Committee also reviews the BTS Staff Handbook and annual amendments and updates. This year, updates were made to include an enhanced maternity, paternity and adoption policy.

Annual appraisals were conducted in May 2023. The outcome of appraisals informs the recommendations to the Remuneration Committee about pay awards and annual progression of individuals. The Remuneration Committee met in June 2023, and agreed an inflation-linked pay increase of 7% for the 2023/24 which was deemed appropriate in the light of cost-of-living rises.

Risk Assessment and Management

The Society's Senior Management Team review the Risk Assessment matrix every quarter, taking actions to mitigate or remove risk as appropriate and where possible, and prepare an update for the Board's review in June each year. The annual risk review and management plan was undertaken in the final quarter of the year, focussing again on operational and financial recover matters, and the report was approved by the Board in June 2023.

The Senior Management Team monitors the possible impact on income and expenditure of the changes to the way we offer activities such as short courses and the move to and from online conferences for 2022/23. Trustees stand ready to act on advice received and to take steps to maintain the future health of the Society.

Fundraising Practice

The Society does not engage in public fundraising and does not use professional fundraisers or commercial participants. It has not received any complaints relating to fundraising practice.

Related Party Transactions

There were no related party transactions during this year (2021/22: none). Trustees have added into the Standing Instructions for conduct of business the need to treat any further transactions with related parties as an Item of Reserved Business. This means that in future, the Officers' Group will consider any further situations that might arise and will make a recommendation to the full Board if they wish to enter into any similar arrangement(s). The Board will be required to give final approval, or otherwise.

Relationship with Biomedical Industries

Since 1999, the Society has had a policy to support its relationship with the biomedical industry, and in all subsequent years has sought related Declarations of Interest from all members who have undertaken work on its behalf. Since June 2013, the Declarations of Interest have been published on the open access area of its website. These come from all who are involved in BTS Committees, Guidelines groups, SAGs and ad-hoc Working Parties. During the year Trustees and Council reviewed and amended this policy, and confirmed the Society's policy on endorsement which states that, wherever possible, support from a single commercial source for BTS activities should not be sought or accepted. In general, the Society does not endorse any activity – including that which originates from non-commercial organisations - unless it has been involved as a partner from the start. Appendix B gives details of all companies from which the Society received support during the year.

STATEMENT OF RESPONSIBILITIES OF TRUSTEES

Members of the Board of Trustees (who are also directors of The British Thoracic Society for the purposes of company law) are responsible for preparing the Board's report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

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

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

The Board is responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and ensure that the financial statements comply with the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 (as amended). The Board is also responsible for safeguarding the assets of the charitable and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as Board members are aware:

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

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

Members of the charity guarantee to contribute an amount not exceeding £1 to the assets of the charity in the event of winding up. The total number of such guarantees at 30 June 2023 was 4,480 (2022: 4,254). Each of the Board members are members of the charity but this entitles them only to voting rights. No members of the Board have any beneficial interest in the charity.

The report of the Board has been prepared in accordance with the special provisions applicable to companies subject to the small companies' regime.

Approved by the Board of Trustees on 4 October 2023 and signed on its behalf by:

Paul Walker

Dr Paul Walker

Company number 1645201 - Incorporated in the United Kingdom

Charity numbers 285174 – Registered in England and Wales

SC041209 – Registered in Scotland

Registered office 17 Doughty Street

and operational London

address WC1N 2PL

Trustees Trustees, who are also Directors under company law, who served during the year and up to the date of this report were as follows:

Trustees	Roles
Dr Charlotte Addy	Chair, Workforce and Service Development Committee
Dr Martin Allen MBE	Trustee - Getting it Right First Time Lead
Mrs Alison Armstrong	Chair, Education and Training Committee, from November 2022
Professor Jonathan Bennett	President-elect, from November 2022
Professor James Chalmers	Chair, Science & Research Committee
Professor Andres Floto	Honorary Secretary, from November 2022
Dr Alanna Hare	Chair, Education & Training Committee, to November 2022
Dr Simon Hart	Chair, Standards of Care Committee, to November 2022
Professor Adam Hill	Chair, Standards of Care Committee, from November 2022
Dr Mark Juniper	Chair, Quality Improvement Committee
Professor Onn Min Kon	President, from November 2022 President-elect, to November 2022
Mrs Rachael Moses OBE	President, to November 2022
Dr John Park	Honorary Treasurer
Dr Jenni Quint	Chair, Information Governance Committee, November 2022
Dr Lisa Spencer MBE	Honorary Secretary, to November 2022
Dr Laura-Jane Smith	Trustee, Environment and Sustainability, from November 2022
Dr Paul Walker	Chair of the Board
Dr Helen Ward	Trustee - NHSE Long term Plan

Staff

Staff	Post
Angela Barnes	Membership Manager
Deborah Broughton	Executive Assistant (return from Maternity leave from October 2022)
Bernice Bruce-Vanderpuije	Co-ordinator, Clinical and Strategic Programmes
Giorgio de Faveri	Communications Manager, to July 2022
Suzanne Howard	Coordinator, MDRTB Clinical Advice Service, from May 2023
Rajeev Lakhar	CRM Manager
Maria Loughenbury	Manager, Lung Diseases Registry
Christina Moll	Audit Programmes Manager
Rosie O'Carroll	Head of Strategic Communications,
Kirstie Opstad	Manager, Guidelines and Clinical Standards
Daniel Passes	Executive Assistant (Maternity cover), to October 2022
Melanie Perry	Project Manager, Tobacco Dependency Project
Louise Preston	Head of Strategic Programmes
Ranjit Nandra	IT support
Alexandra Saywell	Communications Specialist, from September 2022
Miguel Souto	Head of Clinical Programmes
Joan Thompson	Head of Finance & Events
Trine Tofte	Coordinator, Education and Events, from May 2023
Sally Welham	Chief Executive
Kathryn Wilson	Head of Operations

Bankers	Co-operative Bank 60 Kingsway, London WC2B 6DS
Solicitors	Taylor Vinters Merlin Place, Merlin Road, Cambridge CB4 0DP
Investment Managers	Evelyn Partners (formerly Tilney Asset Management Limited) 6 Chesterfield Gardens, London W1J 5BQ
Accountants	JS2 Limited One Crown Square, Church Street East, Woking, Surrey GU21 6HR
Auditor	Haysmacintyre LLP 10 Queen Street Place, London EC4R 1AG

Independent auditor's report to the members and trustees of The British Thoracic Society

Opinion

We have audited the financial statements of The British Thoracic Society ("the charitable company") for the year ended 30 June 2023 which comprise the Statement of Financial Activities, the Balance Sheet, the Statement of Cash Flows, 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 Financial Reporting Standard 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 charitable company's affairs as at 30 June 2023 and of the charitable company's net movement in funds, including the 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 and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charity in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

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

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

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

Other information

The trustees are responsible for the other information. The other information comprises the information included in the Trustees' 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.

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 (which includes the strategic report and the directors' report prepared for the purposes of company law) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the directors' report included within the Trustees' Annual Report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report (which incorporates the strategic report and the directors' report).

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 and the Charity Accounts (Scotland) Regulations (as amended) requires us to report to you if, in our opinion:

- adequate accounting records have not been kept by the charitable company; or
- the charitable company 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' exemptions in preparing the trustees' report and from the requirement to prepare a strategic report.

Responsibilities of trustees for the financial statements

As explained more fully in the trustees' responsibilities statement set out on page 20, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue 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 the 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:

Based on our understanding of the charitable company and the environment in which it operates, we identified that the principal risks of non-compliance with laws and regulations related to the Companies Act 2006, Charities Act 2011, Charity Accounts (Scotland) Regulations (as amended), and Charities and Trustee Investment (Scotland) Act 2005, and we considered the extent to which non-compliance might have a material effect on the financial statements. We also considered those laws and regulations that have a direct impact on the preparation of the financial statements such as payroll tax and sales tax.

We evaluated management's incentives and opportunities for fraudulent manipulation of the financial statements (including the risk of override of controls), and determined that the principal risks were related to posting inappropriate journal entries to revenue and management bias in accounting estimates. Audit procedures performed by the engagement team included:

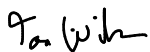
- Inspecting correspondence with regulators and tax authorities;
- Discussions with management including consideration of known or suspected instances of non-compliance with laws and regulation and fraud;
- Evaluating management's controls designed to prevent and detect irregularities;
- Review of minutes of meetings;
- Identifying and testing journals, in particular journal entries posted with unusual account combinations, postings by unusual users or with unusual descriptions; and
- Challenging assumptions and judgements made by management in their critical accounting estimates

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006, section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an Auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members, as a body, for our audit work, for this report, or for the opinions we have formed.



Thomas Wilson (Senior Statutory Auditor)
For and on behalf of Haysmacintyre LLP, Statutory
Auditor

10 Queen Street Place
London
EC4R 1AG

Date: 16/10/23

The British Thoracic Society

Statement of financial activities (incorporating an income and expenditure account)

For the year ended 30 June 2023

	Note	Unrestricted £	Restricted £	2023 Total £	Unrestricted £	Restricted £	2022 Total £
Income from:							
Charitable activities							
Membership	2	684,441	-	684,441	666,540	-	666,540
Donations	2	68,910	-	68,910	56,353	-	56,353
Standards and Education	2	422,862	65,000	487,862	371,157	40,000	411,157
Research and Innovation	2	1,438,926	-	1,438,926	1,009,174	-	1,009,174
Profile	2	-	-	-	-	-	-
Investments	3	57,456	-	57,456	51,910	-	51,910
Total income		2,672,595	65,000	2,737,595	2,155,134	40,000	2,195,134
Expenditure on:							
Investment Management costs							
	4	40,851	-	40,851	31,708	-	31,708
Charitable activities							
Membership	4	136,405	-	136,405	120,159	-	120,159
Standards and Education	4	1,119,821	20,898	1,140,719	1,067,040	45,920	1,112,960
Research and Innovation	4	998,592	-	998,592	572,672	-	572,672
Profile	4	302,574	73,758	376,332	264,608	76,926	341,534
Total expenditure		2,598,243	94,656	2,692,899	2,056,187	122,846	2,179,033
Net income before net gains on investments		74,352	(29,656)	44,696	98,947	(82,846)	16,101
Net gains /(losses) on investments		322,632	-	322,632	(24,477)	-	(24,477)
Net income / (expenditure) for the year	5	396,984	(29,656)	367,328	74,470	(82,846)	(8,376)
Transfers between funds		(30,684)	30,684	-	-	-	-
Net income / (expenditure) and net movement in funds		366,300	1,028	367,328	74,470	(82,846)	(8,376)
Net income / (expenditure) for the year and net movement in funds		366,300	1,028	367,328	74,470	(82,846)	(8,376)
Reconciliation of funds:							
Total funds brought forward	17	6,750,256	29,342	6,779,598	6,675,786	112,188	6,787,974
Total funds carried forward	17	7,116,556	30,370	7,146,926	6,750,256	29,342	6,779,598

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above. Movements in funds are disclosed in Note 17 to the financial statements.

Balance sheet

Company no. 1645201

As at 30 June 2023

	Note	£	2023 £	£	2022 £
Fixed assets:					
Tangible assets	11		1,517,666		1,557,177
Investments	12		4,662,673		4,386,259
			<u>6,180,339</u>		<u>5,943,436</u>
Current assets:					
Debtors	13	502,984		428,607	
Cash at bank and in hand		1,725,285		1,463,503	
		<u>2,228,269</u>		<u>1,892,110</u>	
Liabilities:					
Creditors: amounts falling due within one year	14	(1,261,682)		(1,055,948)	
			<u>966,587</u>		<u>836,162</u>
Net current assets					
			<u>7,146,926</u>		<u>6,779,598</u>
Total net assets					
			<u>7,146,926</u>		<u>6,779,598</u>
The funds of the charity:					
Restricted income funds	17		30,370		29,342
Unrestricted income funds:					
Designated funds		6,333,946		6,008,649	
General funds		782,610		741,607	
		<u>7,116,556</u>		<u>6,750,256</u>	
Total unrestricted funds			<u>7,116,556</u>		<u>6,750,256</u>
Total charity funds			<u>7,146,926</u>		<u>6,779,598</u>

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

Approved by the Board of Trustees on 4th October 2023 and signed on its behalf by

John Park

Dr. John Park
Honorary Treasurer

The British Thoracic Society

Statement of cash flows

For the year ended 30 June 2023

	Note	2023		2022	
		£	£	£	£
Cash flows from operating activities	18				
Net cash used in operating activities			166,597		145,606
Cash flows from investing activities:					
Dividends, interest and rents from investments		57,456		51,910	
Purchase of fixed assets		(8,489)		(19,701)	
Proceeds from investments		987,379		388,218	
Purchase of investments		(1,105,657)		(166,040)	
Movement in cash held by investment managers		164,496		(172,751)	
Net cash provided by investing activities			95,185		81,636
Net cash provided by / (used in) financing activities			-		-
Change in cash and cash equivalents in the year			261,782		227,242
Cash and cash equivalents at the beginning of the year			1,463,503		1,236,261
Cash and cash equivalents at the end of the year			1,725,285		1,463,503

The charity held no debt during the period, as such the above analysis of cash and cash equivalents serves as a reconciliation of changes in net debt.

1 Accounting policies

a) Statutory Information

The British Thoracic Society is a charitable company limited by guarantee and is incorporated in England and Wales (company registration number 01645201). The registered office address is 17 Doughty Street, London, WC1N 2PL.

b) Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2018) - (Charities SORP FRS 102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (September 2015) and the Companies Act 2006.

Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy or note.

c) Public benefit entity

The charitable company meets the definition of a public benefit entity under FRS 102.

d) Going concern

The Trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern and accordingly have prepared the accounts on a going concern basis

e) Principal risks and uncertainties

The Trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

f) Income

The key income streams are from Journals, Meetings and Membership.

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the income have been met, it is probable that the income will be received and that the amount can be measured reliably. Membership income is accounted for in the period to which it relates. Membership receipts in advance are recorded as deferred income.

Income from government and other grants, whether 'capital' grants or 'revenue' grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred.

Income received in advance of the provision of a specified service is deferred until the criteria for income recognition are met.

Investment Income & Interest receivable

Investment income and interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

g) Fund accounting

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund.

Unrestricted funds are donations and other income received or generated for the charitable purposes.

Notes to the financial statements

For the year ended 30 June 2023

Designated funds are unrestricted funds earmarked by the trustees for particular purposes.

1 Accounting policies (continued)

h) Expenditure (including grants) and irrecoverable VAT

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

Raising funds (investment manager fees)

Expenditure on charitable activities includes the costs of delivering services, Meetings and other educational activities undertaken to further the purposes of the charity and their associated support costs

Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

Grants payable are charged in the year when the offer is conveyed to the recipient except in those cases where the offer is conditional, such grants being recognised as expenditure when the conditions attaching are fulfilled. Grants offered subject to conditions which have not been met at the year-end are noted as a commitment, but not accrued as expenditure.

i) Allocation of support costs

Expenditure is allocated to the particular activity where the cost relates directly to that activity. However, the cost of overall direction and administration of each activity, comprising the salary and overhead costs of the central function, is apportioned on the following basis which are an estimate, based on staff time, of the amount attributable to each activity.

☐ Standards and Education	36%
☐ Research	7%
☐ Profile	13%
☐ Membership	6%
☐ Support costs	22%
☐ Governance costs	16%

Support and governance costs are re-allocated to each of the activities on the following basis which is an estimate, based on staff time, of the amount attributable to each activity

☐ Standards and Education	58%
☐ Research	11%
☐ Profile	21%
☐ Membership	10%

Governance costs, included within total support costs, are the costs associated with the governance arrangements of the charity, namely the costs of constitutional and statutory requirements and include any costs associated with the strategic management of the charity's activities.

j) Operating leases

Rental charges are charged on a straight line basis over the term of the lease.

1 Accounting policies (continued)

k) Tangible fixed assets

Notes to the financial statements

For the year ended 30 June 2023

Items of equipment are capitalised where the purchase price exceeds £500. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets are reviewed for impairment if circumstances indicate their carrying value may exceed their net realisable value and value in use.

Where fixed assets have been revalued, any excess between the revalued amount and the historic cost of the asset will be shown as a revaluation reserve in the balance sheet.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life. The depreciation rates in use are as follows:

☒	Fixtures & Fittings	10 years
☒	Computer Equipment & Website	3 years
☒	CRM Software	10 years
☒	Freehold buildings	50 years
	Land	Not Depreciated

l) Listed investments

Investments are a form of basic financial instrument and are initially recognised at their transaction value and subsequently measured at their fair value as at the balance sheet date using the closing quoted market price. Any change in fair value will be recognised in the statement of financial activities and any excess of fair value over the historic cost of the investments will be shown as a fair value reserve in the balance sheet. Investment gains and losses, whether realised or unrealised, are combined and shown in the heading “Net gains/(losses) on investments” in the statement of financial activities. The charity does not acquire put options, derivatives or other complex financial instruments.

m) Debtors

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

n) Cash at bank and in hand

Cash at bank and cash 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.

o) Creditors and provisions

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

The charity 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 Accounting policies (continued)

p) Pensions

Notes to the financial statements

For the year ended 30 June 2023

BTS established an auto-enrolment defined contribution scheme with Legal & General with effect from 1 January 2016 (12 months earlier than required by statute) and makes employer contributions into this scheme. For employees who had their own schemes in place before this date BTS continues to make contributions into their individual schemes. Employer contributions are the same for all employees, on a sliding scale depending on employee contributions as specified in contracts of employment, and those in the auto-enrolment scheme increased their contributions during the year in line with statutory minima.

2 Income from charitable activities

	Unrestricted £	Restricted £	2023 Total £	2022 Total £
Donations				
Donations	68,910	-	68,910	56,353
Sub-total for Donations	68,910	-	68,910	56,353
Membership				
Membership	684,441	-	684,441	666,540
Sub-total for Membership	684,441	-	684,441	666,540
Standards and Education				
Short courses	188,517	-	188,517	141,859
Summer Meeting	133,406	-	133,406	172,269
Speciality Certificate Examination	51,939	-	51,939	8,179
MDRTB project	44,000	-	44,000	40,000
Tobacco Dependency Programme	-	40,000	40,000	40,000
Committees	5,000	-	5,000	8,850
Conference awards	-	25,000	25,000	-
Sub-total for Education and Standards	422,862	65,000	487,862	411,157
Research and Innovation				
<i>Thorax</i>	540,259	-	540,259	565,044
Winter Meeting	898,667	-	898,667	444,130
Sub-total for Research and Innovation	1,438,926	-	1,438,926	1,009,174
Total income from charitable activities	2,615,139	65,000	2,680,139	2,143,224

The British Thoracic Society
Notes to the financial statements
For the year ended 30 June 2023

Prior Year	Unrestricted £	Restricted £	2022 Total £
Donations			
Donations	56,353	-	56,353
Sub-total for Donations	<u>56,353</u>	<u>-</u>	<u>56,353</u>
Membership			
Membership	666,540	-	666,540
Sub-total for Membership	<u>666,540</u>	<u>-</u>	<u>666,540</u>
Standards and Education			
Short courses	141,859	-	141,859
Summer Meeting	172,269	-	172,269
Speciality Certificate Examination	8,179	-	8,179
MDRTB project	40,000	-	40,000
Tobacco Dependency Programme	-	40,000	40,000
Clinical statements for community acquired pneumonia	8,850	-	8,850
Sub-total for Education and Standards	<u>371,157</u>	<u>40,000</u>	<u>411,157</u>
Research and Innovation			
Thorax	565,044	-	565,044
Winter Meeting	444,130	-	444,130
Sub-total for Research and Innovation	<u>1,009,174</u>	<u>-</u>	<u>1,009,174</u>
Total income from charitable activities	<u><u>2,103,224</u></u>	<u><u>40,000</u></u>	<u><u>2,143,224</u></u>

3 Income from investments

	Unrestricted £	Restricted £	2023 Total £	2022 Total £
Income from listed investments	57,456	-	57,456	51,910
	<u>57,456</u>	<u>-</u>	<u>57,456</u>	<u>51,910</u>

4 Analysis of expenditure

	Investment Management Costs £	Charitable activities					Governance £	Support £	2023 Total £	2022 Total £
		Membership £	Standards & Education £	Research £	Profile £					
Staff costs (Note 6)	-	57,587	351,075	67,777	123,886	150,888	213,638	964,851	895,931	
Conferences	-	-	137,439	546,284	-	-	-	683,723	325,368	
Committees & guidelines	-	-	16,700	-	-	-	-	16,700	26,979	
Courses	-	-	124,138	-	-	-	66	124,204	134,280	
Publications	-	-	-	299,952	-	-	-	299,952	289,140	
Public relations	-	-	-	-	58,004	-	35	58,039	54,330	
Project & consortia costs	-	-	249	-	-	-	-	249	1,720	
Investment management	40,851	-	-	-	-	-	-	40,851	31,708	
Other	-	-	-	-	-	-	-	-	-	
	40,851	57,587	629,601	914,013	181,890	150,888	213,739	2,188,569	1,759,456	
Support costs										
Property	-	-	-	-	-	-	73,409	73,409	80,579	
IT costs	-	-	-	-	9,068	-	79,696	88,764	90,645	
Office running costs	-	-	-	-	-	-	102,642	102,642	68,691	
Depreciation	-	-	-	-	-	-	48,000	48,000	77,571	
Audit	-	-	-	-	-	17,670	-	17,670	14,550	
Accountancy	-	-	-	-	-	-	20,413	20,413	27,924	
Council, AGM & Board	-	-	-	-	-	15,000	-	15,000	6,598	
Irrecoverable VAT	-	-	-	-	-	-	109,506	109,506	112,844	
Other	-	-	-	-	-	-	28,926	28,926	15,036	
Support Costs	-	61,993	402,011	66,524	145,803	-	(676,331)			
Governance Costs	-	16,825	109,107	18,055	39,571	(183,558)				
Total expenditure 2023	40,851	136,405	1,140,719	998,592	376,332	-	-	2,692,899		
Total expenditure 2022	31,708	120,159	1,112,960	572,672	341,534	-	-		2,179,033	

Of the total expenditure, £2,598,243 was unrestricted (2022: £2,032,407) and £94,656 was restricted (2022: £146,625).

5 Net income / (expenditure) for the year

This is stated after charging / (crediting):

	2023	2022
	£	£
Depreciation	48,000	82,803
Operating lease rentals:		
Equipment	-	1,260
Auditors' remuneration (excluding VAT):		
Audit	18,420	15,350
	76,420	100,413

6 Analysis of staff costs, Trustee remuneration and expenses, and the cost of key management personnel

Staff costs were as follows:

	2023	2022
	£	£
Salaries and wages	768,754	722,879
Social security costs	83,892	69,956
Employer's contribution to defined contribution pension schemes	87,423	84,450
Recruitment	15,758	14,580
Other forms of employee benefits	1,376	346
Staff Development & HR	7,646	3,720
	964,849	895,931

The following number of employees received employee benefits (excluding employer national insurance and employer pension costs) during the year between:

	2023	2022
	No.	No.
£60,000 - £69,999	2	1
£70,000 - £79,999	-	-
£80,000 - £89,999	-	-
£90,000 - £99,999	1	1
£100,000 - £109,999	-	-

The total employee benefits including employer's national insurance and pension contributions of the key management personnel were £396,026 (2022: £116,927).

No termination payments were made during the year (2022: £nil).

The charity Trustees were not paid or received any other benefits from employment with the charity in the year (2022: £nil). No charity trustee received payment for professional or other services supplied to the charity (2022: £nil).

Trustees' expenses represents the payment or reimbursement of travel and subsistence costs totalling £14,677 (2022: £Nil) incurred by 18 (2022: Nil) members relating to attendance at meetings of the Trustees.

7 Staff numbers

The average number of employees (head count based on number of staff employed) during the year was as follows:

	2023	2022
	No.	No.
Membership	1.0	0.9
Standards & Education	6.1	6.0
Research & Innovation	1.2	1.0
Profile	2.1	2.2
Governance	2.6	2.1
Support	3.7	3.8
	16.7	16.0

8. Grants Awarded

	2023	2023	2022	2022
	Attendees	£	Attendees	£
Best Practice Fellowship				
BTS Winter Meeting	25	20,898	88	40,920
	25	20,898	88	40,920

Best Practice Fellowship

25 grants (2022: 88) were made in September 2023 for the 2023 Winter Meeting.

9 Related party transactions

There were no related party transactions this year, or donations from related parties (2022: None).

10 Taxation

The charitable company is exempt from corporation tax as all of its income is charitable and is applied for charitable purposes.

11 Tangible fixed assets

	Freehold property £	Fixtures and fittings £	Computer equipment £	Total £
Cost or valuation				
At the start of the year	1,928,460	114,737	379,017	2,422,214
Additions in year	6,856	-	1,633	8,489
Disposals in year	-	(19,872)	(44,431)	(64,303)
At the end of the year	1,935,316	94,865	336,219	2,366,400
Depreciation				
At the start of the year	447,373	95,529	322,135	865,037
Charge for the year	30,906	5,742	11,352	48,000
Eliminated on disposal	-	(19,872)	(44,431)	(64,303)

Notes to the financial statements

For the year ended 30 June 2023

At the end of the year	478,279	81,399	289,056	848,734
Net book value				
At the end of the year	1,457,037	13,466	47,163	1,517,666
At the start of the year	1,481,087	19,208	56,882	1,557,177

Land with a value of £390,000 (2022: £390,000) is included within freehold property and not depreciated.

All of the above assets are used for charitable purposes.

12 Listed investments

	2023 £	2022 £
Fair value at the start of the year	4,209,865	4,456,520
Additions at cost	1,105,657	166,040
Disposal proceeds	(987,379)	(388,218)
Net gain on change in fair value	322,632	(24,477)
	4,650,775	4,209,865
Cash held by investment broker pending reinvestment	11,898	176,394
Fair value at the end of the year	4,662,673	4,386,259
Historic cost at the end of the year	2,999,428	2,635,869
Investments comprise:		
	2023 £	2022 £
UK quoted investments	1,538,438	463,085
Overseas quoted investments	3,112,337	3,746,780
Cash	11,898	176,394
	4,662,673	4,386,259

13 Debtors

	2023 £	2022 £
Trade debtors	60,017	17,592
Other debtors	-	15,091
Prepayments	129,698	144,208
Accrued income	313,269	251,716
	502,984	428,607
Prepayments includes deposits for future Winter Meetings as follows:		
	2023 £	2022 £
Due in 1-2 years	25,557	25,056
Due in 2-5 years	26,068	51,625

	51,625	76,681
14 Creditors: amounts falling due within one year		
	2023	2022
	£	£
Trade creditors	39,726	34,904
Other creditors	155,728	146,398
Accruals	241,030	170,276
Deferred income (Note 15)	783,175	671,683
Taxes and Social Security	42,023	32,687
	1,261,682	1,055,948

15 Deferred income

Deferred income comprises of membership subscriptions received for the period 1 July 2023 to 30 June 2024, to income received for short courses in advance of the course taking place.

	2023	2022
	£	£
Balance at the beginning of the year	671,683	667,131
Amount released to income in the year	(671,683)	(667,131)
Short Courses	42,010	26,715
Membership	659,195	638,333
Winter Meeting - Exhibitor income	75,900	-
Winter Meeting - Delegate income	6,070	6,635
Balance at the end of the year	783,175	671,683

16 Analysis of net assets between funds 2023

	General unrestricted £	Designated Funds £	Restricted £	Total funds 2023 £
Tangible fixed assets	-	1,517,666	-	1,517,666
Investments	-	4,662,673	-	4,662,673
Current assets	2,044,292	153,607	30,370	2,228,269
Current liabilities	(1,261,682)	-	-	(1,261,682)
Net assets at the end of the year	782,610	6,333,946	30,370	7,146,926

Analysis of net assets between funds 2022

	General unrestricted £	Designated Funds £	Restricted £	Total funds 2022 £
Tangible fixed assets	-	1,557,177	-	1,557,177
Investments	-	4,386,259	-	4,386,259
Current assets	1,797,556	65,213	29,342	1,892,111
Current liabilities	(1,055,948)	-	-	(1,055,948)

For the year ended 30 June 2023

Net assets at the end of the year	741,608	6,008,649	29,342	6,779,599
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17 Movements in funds 2023

	At the start of the year £	Income & Gains £	Expenditure & losses £	Transfers £	At the end of the year £
Restricted funds:					
Tobacco Dependency Programme	3,074	40,000	(73,758)	30,684	-
Travel Grants	26,268	25,000	(20,898)	-	30,370
Total restricted funds	29,342	65,000	(94,656)	30,684	30,370
Unrestricted funds:					
Designated funds:					
Property Fund	1,481,087	-	(30,906)	6,856	1,457,037
Property Maintenance Fund	8,860	-	(16,485)	35,964	28,339
Investment Fund	4,386,259	377,264	(40,851)	(60,000)	4,662,672
Fixed Assets Fund	76,090	-	(17,094)	1,638	60,634
Legacy	56,353	68,911	-	-	125,264
Total designated funds	6,008,649	446,175	(105,336)	(15,542)	6,333,946
General funds	741,607	2,549,051	(2,492,906)	(15,142)	782,610
Total unrestricted funds	6,750,256	2,995,226	(2,598,242)	(30,684)	7,116,556
Total funds	6,779,598	3,060,226	(2,692,898)	-	7,146,926

17 Movements in funds 2022

	At the start of the year £	Income & Gains £	Expenditure & losses £	Transfers £	At the end of the year £
Restricted funds:					
Tobacco Dependency Programme	40,000	40,000	(76,926)	-	3,074
Travel Grants	72,188	-	(45,920)	-	26,268
Total restricted funds	112,188	40,000	(122,846)	-	29,342
Unrestricted funds:					
Designated funds:					
Property Fund	1,511,856	-	(30,769)	-	1,481,087
Property Maintenance Fund	25,000	-	(16,140)	-	8,860
Investment Fund	4,460,161	51,795	(31,708)	(93,989)	4,386,259
Fixed Assets Fund	108,423	-	(52,034)	19,701	76,090
Legacy Fund	-	56,353	-	-	56,353

Notes to the financial statements

For the year ended 30 June 2023

Total designated funds	6,105,440	108,148	(130,651)	(74,288)	6,008,649
General funds	570,346	2,046,986	(1,925,536)	49,811	741,607
Total unrestricted funds	6,675,786	2,155,134	(2,056,187)	(24,477)	6,750,256
Total funds	6,787,974	2,195,134	(2,179,033)	(24,477)	6,779,598

Purposes of restricted funds

Travel Grants

Financial support for this scheme, formerly Travel Grants, came originally from GSK and Vertex in 17/18. GSK provided an additional grant of £50,000 in January 2020 and two grants were agreed in 22/23. Of these, £20,000 has been received from GSK and £5000 has been invoiced to Astra Zeneca. The grants are offered in open competition to all respiratory healthcare professionals, and are intended to support the costs of attending respiratory conferences in the UK and the abroad. The applicants are asked to demonstrate how their abstracts submitted for these conferences will help improve patient care. The awards are allocated on the basis of anonymous scoring. In this financial year, 25 grants were made to support attendances and awards at the Winter Meeting 2023. The funders have no input into the criteria for the grants, or the selection of the recipients.

Tobacco Dependency Project

The BTS Tobacco Dependency Project was formally commissioned by NHSEI in March 2021, and the Project Manager, Melanie Perry, joined BTS in June 2021 to work on a 3 year project which will aim to provide a sustainable framework of resources for improving tobacco dependence treatment by supporting clinicians working in NHS services. The project will complete in mid 2024.

Purposes of designated funds

Property Fund

The freehold of 17 Doughty Street was purchased in 2001. The fund balance represents the book value of the property including refurbishment costs. The building was valued in July 2017 - £2,800,000.

Property Maintenance Fund

The Society designates funds in order to maintain the building and meet contingencies, and has a five-year property maintenance schedule.

Investment Fund

In accordance with the reserves policy outlined in the Trustees Report, this Fund represents the value of the investment portfolio less amounts accrued and committed for refurbishments.

Fixed Asset Fund

The fixed assets fund is equivalent to the net book value of the fixtures and fittings and computer equipment. This fund has been set aside to cover the future depreciation of these fixed assets.

Legacy Fund

BTS received one legacy in the previous financial year and has been informed of another, intended to arrive in the subsequent financial year. Trustees wish to allocate these funds in support of a specific activity to support the new strategic priorities published in 22/23. Detailed proposals are to be considered in upcoming Board meetings 2024.

18 Reconciliation of net income / (expenditure) to net cash flow from operating activities

2023	2022
£	£

Notes to the financial statements

For the year ended 30 June 2023

Net income / (expenditure) for the reporting period (as per the statement of financial activities)	367,328	(8,376)
Depreciation charges	48,000	82,803
(Gains) / losses on investments	(322,632)	24,477
Dividends, interest and rent from investments	(57,456)	(51,910)
(Increase) / decrease in debtors	(74,377)	77,691
Increase in creditors	205,734	20,921
	<hr/>	<hr/>
Net cash provided by operating activities	166,597	145,606
	<hr/> <hr/>	<hr/> <hr/>

19 Legal Status

The charity is a company limited by guarantee and has no share capital. The liability of each member in the event of winding up is limited to £1.

Appendix A

A

Charlotte Addy
Ireti Adejumo
Sarah Agnew
Sanjay Agrawal
Ahsan Akram
Jamie-Leigh Allen
Martin Allen MBE
Howard Almond
Lynn Altass
Joseph Aluoch
Sachin Ananth
William Anderson
Morag Andrew
Pearlene Antoine-Pitterson
Alison Armstrong
Darius Armstrong-James
Avinash Aujayeb
Cristina Avram
Jonathan Ayling-Smith

B

Matthijs Backx
Mona Bafadhel
Peter Bailey
Lucy Baker
Michelle Baker
Haval Balata
Christopher Barber

Emily Bartlett
Sam Bartlett-Pestell
Hussain Basheer
Simon Baudouin
Caroline Baxter
Eihab Bedawi
Amsalu Bekele Binegdie
David Bell
David Bellamy
Rachel Benamore
Amy Bendall
Jonathan Bennett
Joanna Bennett
Thomas Bewick
Anna Bibby
Surinder Birring
Kevin Blyth
Charlotte Bolton
Graham Bothamley
Stephen Bourke
Aaron Braddy-Green
Elinor Bradley
Tracey Bradshaw
Daniel Braga
Laura Breach
James Brown
Jeremy Brown
Tricia Bryant
Katherine Bunclark
Katie Burke
Graham Burns
Andrew Bush

C

Matthew Callister
Toby Capstick
Charlotte Carter
Leo Casimo
Ellis Cerrone
James Chalmers
Sarah Chamberlain Mitchell
Samantha Chan
Emma Chaplin
Michelle Chatwin
Nazia Chaudhuri
Aneeka Chavda
Christabelle Chen
Peter Siu Pan Cho
Colin Church
Amelia Clive
Meg Coleman
Suzi Coles
Robin Condliffe
David Connell
Aman Coonar
John Corcoran
Sonya Craig
Hannah Crawford
Anjali Crawshaw
Andrew Creamer
Ian Cropley
Heidi Croucher
Paul Cullinan

D

Rachel Daly

Gráinne d'ancona

Gerry Davies

Rachel Davies

Sally Davies

Enya Daynes

Rebecca Francesca D'Cruz

Duneesha De Fonseka

Martin Dedicoat

Patrick Dennison

Nikesh Devani

Anand Devaraj

Damian Downey

Francis Drobniowski

James Duckers

Nicholas Duffy

Akshay Dwarakanath

E

Anthony Edey

Sarah Elkin

Lynn Elsey

Joanna Elverson

Odiri Eneje

Hazel Evans

Rachael Evans

Matthew Evison

Vicky Ewan

Ahmed Fahim

Johanna Feary

Frances Grudzinska

Kevin Gruffydd-Jones

F

Matthew Fagg

Laura Ferreras-Antolin

Lydia Finney

Malene Fischer

David Fishwick

Louise Fleming

Tracey Fleming

Robyn Fletcher

Sophie Fletcher

Andres Floto

William Flowers

Ian Forrest

Daryl Freeman

Dominika Froehlich-Jeziorek

Elizabeth Fuller

Duncan Fullerton

G

Jessica Gates

Johanna Gavlak

Aleksandra Gawlik-Lipinski

Neil Gibson

Francis Gilchrist

Mark Gilchrist

Ted Goodman

Stephanie Graham

Louis Grandjean

Nikki Gray

Neil Greening

Lizzie Grillo

H

Guy Hagan

Jemma Haines

Pranabashis Haldar

Rob Hallifax

Sarah Haney

Alex Haragan

Susan Harden

Alanna Hare

Susanne Harkness

Katharine Harman

Natalie Harper

Stephen Harrow

Simon Hart

Ricky Harwood

Sam Hayes

Joanne Heaton

Sarah Hennessey

Karen Heslop-Marshall

Izak Heys

Katherine Hickman

Adam Hill

Sabrine Hippolyte

Ling-Pei Ho

Clare Hodgkinson

Charlotte Holland

Stephen Holmes

Susan Hope
Freya Howle
Alison Hughes
Gareth Hughes
James Hull
Christopher Huntley
John Hurst
Katharine Hurt
John Hutchinson
Catherine Hyams

I

Hasnaa Ismail-Koch
Sriram Iyer

J

David Jackson
Shamanthij Jayasooriya
Bronwen Jenkinson
Akhilesh Jha
Andrew Jones
Benjamin Jones
Gavin Jones
Ricky Jones
Mark Juniper

K

Jason Kalugarama
Hanna Kaur

Sarah Kearney
Carol Kelly
Alison Kent
Fasihul Khan
Joanne King
Ruth Kingshott
Stephen Kirby-Smith
Merav Kliner
Onn Min Kon
Kartik Kumar
Neelam Kumar
Rashmi Kumar
Heinke Kunst
Om Prakash Kurmi

L

Lynn Ladbrook
Nicholas Lane
Ross Langley
Simon Langton Hewer
Ian Laurenson
Iain Lawrie
Rod Lawson
Andy Lee
Richard Lee
Julian Legg
Colm Leonard
Adam Lewis
Keir Lewis
Patrick Lillie
Eric Lim

Wei Shen Lim
Marc Lipman
Kate Lippiett
Eric Livingston
Julie Lloyd
Vikki Lloyd
Michael Loebinger
Tuck-Kay Loke
Fiona Lynch

M

Jim Macfarlane
Yvonne Macnicol
Lavinia Magee
Hayley Mainman
Anirban Maitra
William Man
Swapna Mandal
Zaheer Mangera
Stephanie Mansell
Paul Marsden
Henry Marshall
Matthew Martin
Anthony Martinelli
Vidan Masani
Refiloe Masekela
Nick Maskell
Hugh McGann
Andrew Mccallum
David Mccracken
Helen Mcdill

Lorcan McGarvey	Neal Navani	Jacqueline Pollington
Laura McNaughton	Andrew Nicholson	Aravind Ponnuswamy
Thomas Medveczky	Camus Nimmo	Helen Powell
Jamilah Meghji	Jennifer Nixon	Arun Prasad
Andrew Menzies-Gow	Claire Nolan	Kathryn Prior
Rachel Mercer	Farinaz Noorzad	Melanie Pritchard
Ben Messer		Poonam Puthran
Fraser Millar	O	
Stephen Milward		Q
Paul Minnis	Emma O'Dowd	
Eleanor Mishra	James O'Hara	Tim Quinnell
Andrew Molyneux	Kate Oulton	Jennifer Quint
Olga Moncayo	Obianuju Ozoh	
Abigail Moore		R
David Moore	P	
Misha Moore		Ananthakrishnan Raghuram
Vicky Moore	Evelyn Palmer	Najib Rahman
Alyn Morice	Rakesh Panchal	Sheila Ramjug
Andrew Morley	Padmasayee Papineni	Darren Ramsay
Stephen Morris-Jones	Dhruv Parekh	Paul Ramsay
Hazel Morrison	John Park	Kate Renton
Kevin Mortimer	Sean Parker	Louise Restrick
Rachael Moses OBE	Maria Parsonage	Carl Reynolds
Yannick Mouchilli	Padmavathi Parthasarathy	Cara Roberts
Anna Murphy	Pujan Patel	Helen Roberts
	Suman Paul	Mark Roberts
	Matt Pavitt	Nicola Roberts
	Karen Payne	Douglas Robinson
N	Donna Peat	Esther Robinson
	Felicity Perrin	Nicola Robinson
Prasad Nagakumar	Gerrard Phillips	Ryan Robinson
Arjun Nair	Marcus Pittman	Helen Rodgers
Manjith Narayanan	John Plevris	David Ross

Andrew Rosser
Kay Roy
Hitasha Rupani
Georgina Russell
Kylie Russo

S

Ravijyot Saggi
Anita Saigal
Martin Samuels
Clare Sander
Ramamurthy Sathyamurthy
Michael Scott
Stephen Scott
James Seddon
Affy Sepahzad
Anand Shah
Neeraj Shah
Joanna Shakespeare
Charles Sharp
Dominick Shaw
Stuart Shields
Fathimath Farah Shiham
Delane Shingadia
Sarah Sibley
John Simpson
Aran Singanayagam
Sally Singh
Rudy Sinha-Ray
Claire Slinger
Derek Sloan

Daniel Smith
Jaclyn Smith
Howard Smith
Laura-Jane Smith
Elspeth Spencer
Lisa Spencer MBE
Katherine Spinks
Arietta Spinou
Kottalai Srinivasan
Lewis Standing
Andrew Stanton
Matthew Steward
Iain Stewart
Carol Stonham MBE
Laura Succony
Rajini Sudhir
Anita Sullivan
Ema Swingwood OBE
Karl Sylvester
Joanna Szram

T

Alison Talbot-Smith
Hui-Leng Tan
Alison Tavare
Alexandra Teagle
Hilary Tedd
Shaun Thein
Mike Thomas
Rhys Thomas

Roger Thompson
Louise Thomson
George Tsaknis
Muhammad Tufail
Daniel Tweedie

U

Mark Unstead

V

Ameet Vaghela
Christopher Valerio
Clare Van Halsema
Ioannis Vogiatzis
Aashish Vyas

W

Naomi Walker Paul
Walker Steven Walker
Ali Bin Waqar Emily
Ward Helen Ward
Thomas Ward Richard
Ward Anthony
Warley Nikki Webster
Steven Welch Douglas
West Sophie West

Jenny White

Andrea Whitney

Elizabeth Whittaker

Melissa Wickremasinghe

Ruth Wiggans

James Wildgoose

Alexander Wilkinson

Mark Wilkinson

Tom Wilkinson Andrew

Wilson Stephen Wilson

Arran Woodhouse Dan

Wootton

Dariusz Wozniak

Y

Michael Yanney

Z

Sabrina Zulfikar

Appendix B

External funding/support received for annual conferences and courses.

List of Exhibitors for the Winter Meeting 2021 held in November 2021

Sponsors for Winter Meeting 2022

Adherium
Air Liquide
AMBU
APR Medtech
AstraZeneca
BD (Bard)
Broncus Medical/Uptake Medical
Chiesi
Creo Medical
CSL Vifor Pharma UK Ltd
Dolby Vivisol
Gilead Sciences
GSK
Insmmed
Inspire Medical Systems
It's Interventional
Janssen
Johnson & Johnson
Medtronic
NuvoAir
Olympus
Orion Pharma
Pari Medical
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