



FACULTY OF  
PUBLIC HEALTH

# Better health for all

The Faculty of Public Health's annual report and accounts for the year ended 31 December 2018





Our membership exceeded  
**4,000**  
people for the first time

**67,196**  
users logged on to  
our new website



**1,594** members  
participated in the CPD scheme



Over 400  
people attended 34 public health  
training courses across the UK



**25%**  
increase in our Twitter followers



**18** Specialty Registrars joined  
our Project Scheme



**76** public health professionals  
received FPH awards  
and prizes



**97** Specialty Registrars  
passed the Part A exam



**95** Specialty Registrars  
passed the Part B exam

A coalition of  
**65**

organisations supported  
our campaign to protect the  
public's health after Brexit

**5,000**  
people used our  
new jobs board

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# Intro from the President and CEO

## Welcome to our new-look Annual Report for 2018.

We want to begin by saying a big thank you to all of our members for making 2018 such a successful year, and for helping us work towards our goal of achieving ‘better health for all’. Thanks to you, we made significant progress against each one of our strategic priorities. Particular thanks must be conveyed to our Trustees, many of whom dedicate huge amounts of time to FPH and are crucial to our success.

When it came to advocacy, we began 2018 by launching two policy-led campaigns on public health funding and Brexit, which were developed and delivered in collaboration with our members. FPH members involved in Special Interest Groups (SIGs) and committees agreed 14 policy statements and consultation responses on important public health issues like air quality and the NHS Long-Term Plan. We also built stronger links with Public Health Wales, NHS Scotland, Health and Social Care in Northern Ireland (HSC) and Public Health England, and supported members involved in the public health reform in Scotland. As a result, we enhanced our reputation and position of trust in major national policy discussions across all four nations.

To successfully promote public health knowledge, we assembled formal advisory boards and information sounding boards, we expanded our Special Interest Group (SIG) programme, and we encouraged more public health experts to write for our blog. Our Registrar Project Scheme was also a big success, giving Public Health Specialty Registrars the chance to get involved in our policy and communications work. With the support of our members we continued to champion high public health standards with our Continuing Professional Development (CPD) and Revalidation schemes, as well as providing input to 171 senior appointment panels. We also continued to be the standard-setter and assessment body for the public health workforce, to ensure they are trained, developed and fit for the future.

The year had its challenges and it has been necessary for us to make substantial cuts to budgets, and increase fees above inflation. 2019 will see us in a balanced budgetary position towards which officers and staff have worked

extremely hard. FPH staff continue to work tirelessly to support our members and we are extremely grateful for their dedication and commitment.

As always though, you – our members – are the golden thread that runs through everything we do as an organisation. Whether it be helping to develop the public health curriculum and invigilating exams, or delivering work on behalf of our committees and SIGs, you played a significant role in our success last year and we can’t thank you enough.

We know that it’s a difficult time for the public health community so as we look to the year ahead, and develop our new five-year strategy, we want to continue to support improvements in the training and development of public health professionals to reflect the many new challenges our members face. We also want to continue to work with our members to lobby the Government on issues that affect the public’s health and the vital work that all of our members do. It is also vital that we continue to look for ways to add value to your membership.

We want to end this welcome message by again saying thank you to all of our members for your unwavering support in 2018. In particular, we want to say a sincere thank you to all of the Officers for their hard work and commitment to FPH. Looking forward to 2019 and beyond, we want to continue to be a professional body that you feel proud to be a member of and where you feel your membership helps to save and improve people’s lives.

We hope you enjoy reading our 2018 Annual Report in full to learn more about the positive impact your work has had on FPH and the wider public health community. We have reflected on the past year with an enormous amount of pride and we hope that you do too.



Prof John Middleton,  
President, FPH



James Gore, CEO,  
FPH

Our mission is to  
promote and protect the  
health and wellbeing  
of everyone in society  
by playing a leading role in  
assuring an effective public  
health workforce, promoting  
public health knowledge,  
and advocating for the very  
best conditions for good health

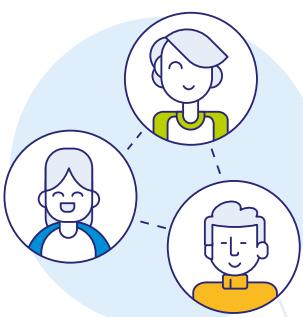
The Faculty of Public Health (FPH) is a membership organisation for over 4,000 public health professionals across the UK and around the world. We are also a registered charity. Our role is to improve the health and wellbeing of local communities and national populations.

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### Our charitable objects:

1. Promote for the public benefit the advancement of knowledge in the field of public health
  2. Develop public health with a view to maintaining the highest possible standards of professional competence and practice
  3. Act as an authoritative body for the purpose of consultation and advocacy in matters of educational or public interest concerning public health
- 

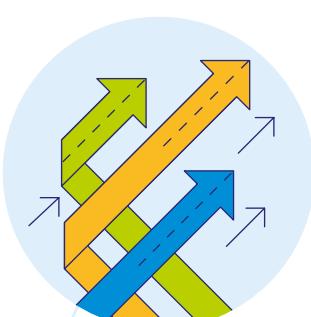
### Our Values



We are member-focused



We promote learning and development



We strive for excellence



We work as one team



We value each other



'KIDS Run Free Banbury' was one of two highly commended photos from our inaugural photo competition to celebrate what 'public health looks like'. The photo was taken by Alex Tandy and entered by Marie McLoughlin.

**Trustees' report, part one:**

# our achievements and the year ahead



# What we do

In 2015, FPH launched a five-year strategy - Better Health For All.  
We committed to:

1. set an ambitious **advocacy** agenda with clear priorities and a strong evidence-base to drive positive changes in public health policy. We do this by campaigning to improve the public's health and wellbeing in partnership with local and national governments
2. act as a synthesizer of **knowledge** and evidence to speak as the independent advocate for population health
3. set high quality **standards** that assure effective public health functions for the specialist public health workforce to improve and protect the public's health and wellbeing
4. be the standard-setter and assessment body for specialists and practitioners in the public health **workforce**. This means that we oversee the quality of training and professional development of public health consultants in the UK to make a positive change to the public's health

The following pages will showcase our achievements against each of these priorities.

In agreeing our priorities and associated work plans, we have regard to the Charity Commission's general guidance on public benefit. The trustees always ensure that the activities we undertake are in-line with our charitable objectives and aims.



# Our priorities in 2018

## Advocacy: achievements in 2018

With the support of two Advisory Boards, 2018 marked the start of delivering FPH's Brexit and Public Health Funding campaigns. It was also a successful year for member-led advocacy work led by the Policy Committee and its sub-committees.

## Advocacy delivered by FPH's Public Health Funding Project Group

In January 2018, FPH launched a national public health funding campaign to make the case for increased investment in public health and prevention across local government and the NHS.

Key achievements:

- 1. Influencing PHE's Public Health Dashboard:** We partnered with Public Health England (PHE) to help them develop their new local authority Public Health Dashboard. The new dashboard is a tool that Directors of Public Health

and others can use to advocate for investment in public health services and the services that impact highly on the wider determinants of health once the public health grant ring-fence is removed. The new dashboard will be available for use from July 2019.

- 2. Policy development project on the role of the NHS in prevention:** The Health Foundation co-funded a nine-month policy development and research project on the role of the NHS in prevention. As part of this work we convened a policy workshop in October 2018 which brought together over 40 leaders from the NHS, PHE, and the wider health sector to prioritise prevention interventions for inclusion in the NHS Long Term Plan.
- 3. Prevention Transformation Fund for local authority public health teams:** In consultation with our members, the civil service, and partner organisations, we developed our proposal for a Prevention Transformation Fund for the 2019 Comprehensive Spending Review. The proposal calls for an increase in public health budgets worth between £1-2 billion per year.

## Advocacy delivered by FPH's Brexit Project Group

Key achievements:

### 1. Influencing the UK's post-Brexit relationship with the European Centre for Disease Prevention & Control (ECDC):

In June 2018, FPH developed and published a blueprint for a post-Brexit relationship with ECDC following a survey of 40 consultants in communicable disease. The aim was to support the Government in delivering their commitments to improve health security and maintain the important and mutually beneficial collaboration with Europe on health issues. We achieved the following:

- The Secretary of State for Health and Social Care made a commitment to maintain current standards for health security after Brexit
- Health security featured prominently in the Government's Brexit White Paper as a direct result of the blueprint and FPH's engagement on it
- The blueprint was discussed by the Health and Social Care Select Committee by Tamara Hervey, Professor of European Union Law and a member of FPH's Brexit Advisory Board

### 2. Do No Harm campaign:

In January 2018, FPH began a six-month campaign to ensure that Brexit will 'Do No Harm' to the public's health. By working closely with the public health and wider health sector, we sought to secure a 'Do No Harm' amendment to the EU (Withdrawal) Act 2018 to make sure that the public's health will remain of paramount importance to this and future governments, and that the UK's public health standards won't slip. We achieved the following:

- Secured five Ministerial assurances that there will be "no rollback of standards" after we leave the EU
- The Government issued a statement guaranteeing a "high level of human health protection"
- A coalition of 65 organisations – one of the largest health coalitions ever assembled – supported the amendment
- We published a 'Do No Harm' guide to support civil servants working on Brexit and public health campaigners in using the Government commitments to protect the public's health as the UK leaves the EU

### 3. Making the case for 'healthy' trade deals

Following a three month consultation with the public health community, EU legal experts, civil servants, Select Committees and the business community, in October 2018 we held a workshop to share our interim findings and develop our intelligence and strategic insights with these people. This resulted in the development of six principles for healthy trade. These principles were used to form the basis of a response to the Department for International Trade's (DIT) post-Brexit trade consultation.

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## Advocacy delivered by FPH's Policy Committees and Special Interest Groups

In 2018, 280 FPH members were involved in the FPH Policy Committee and Special Interest Groups. In total, they produced eight new position statements and submitted 11 responses to public consultations on issues including fracking, food and substance misuse.

**Feedback from Peers on the success of the 'Do No Harm' campaign:**

“ It is right that we pay tribute to the Faculty of Public Health. I would like to think that there is now genuine recognition on all sides of the Brexit argument that public health must be at the epicentre of our engagement.”

**Lord Duncan of Springbank**

“ The excellent briefing provided by the Faculty of Public Health to me and to many other Members of this House.”

**Lord Warner**

“ I add my thanks to the Faculty of Public Health for its support with this amendment.”

**Baroness Jolly**

## Supporting the 20mph Bill

The Faculty of Public Health (FPH) in Scotland sent a letter to the Scottish First Minister, the transport and health cabinet secretaries, and public health minister supporting the 20mph bill in September 2018. FPH in Scotland has now signed an open letter to the First Minister of Scotland supporting the 20mph bill alongside other organisations.

## Responding to TfL's public consultation on air quality in Central London

In July 2018, FPH's Health Improvement Committee responded to Transport for London's (TfL) consultation on measures to reduce traffic and improve air quality in central London.

## Advocacy

### In 2019 we will....

1. Continue to make the case for increased investment in public health and prevention across local government and the NHS
2. Publish two more 'prevention in the NHS' discussion papers to influence the implementation of the NHS Long-Term Plan
3. Campaign to secure additional investment for local authority public health teams in the 2019 Spending Review. This will be in the form of a Prevention Transformation Fund worth between £1-2 billion per year and will be dedicated to prevention and early intervention
4. Deliver a blueprint to set out a public health approach to securing 'healthy' trade deals

5. Begin a conversation with FPH members and stakeholders to understand how well the Government has been doing in upholding its commitments to 'Do No Harm', and opportunities it can now explore and deliver to improve the public's health
6. Champion the role our members play in advocating on public health issues on our behalf
7. Working with our partners in national and local public health and health service bodies, we will increase our influence on policy making and services to campaign more effectively for the health of the public. This will be led by FPH members, committees and Special Interest Groups, and with strong formal partnership working

## Knowledge: achievements in 2018

In 2018, we set out to develop a series of member networks to develop, review and improve the public health evidence base. We did this in two ways:

1. We assembled two formal advisory boards and one informal sounding board of FPH members and subject experts to support FPH's Brexit and Public Health Funding campaigns. Their role is to provide evidence, share their expertise, help us develop policy and finesse campaign messaging, and we are hugely grateful to all of them for their ongoing support.
2. We expanded our Special Interest Group (SIG) programme which went from strength to strength in 2018, welcoming six new SIGs. It now involves over 250 FPH members and covers a broad range of public health issues in the UK and around the world.

Here are some examples of the varied work delivered by SIGs in 2018:

1. To mark the centenary of the ending of the First World War, the Global Violence Prevention SIG partnered with international humanitarian charity Médecins Sans Frontières (MSF) to launch a powerful short film to highlight the impact of war on a nation's health.



Still from the short film co-developed with MSF.

2. The Welfare Rights SIG won a £60,000 award from the Health Foundation as part of their new 'Taking Action on the Social Determinants of Health' programme. The project – run in partnership with UK Health Forum and Citizens Advice – focuses on the role of money and income in shaping our health and will run for 12-18 months.
3. The Health Protection, Education, and Training SIG, comprised entirely of Specialty Registrars, produced a 'Public Health Specialty Training in Health Protection' handbook for dissemination and use across all training programme regions

## **Advocacy delivered by the Committee of the Faculty of Public Health (FPH) in Scotland**

The 2018 FPH in Scotland Conference took place on 1-2 November and was attended by nearly 250 public health professionals. Dr Julie Cavanagh, Chair of the Committee of FPH in Scotland, curated the advocacy-led agenda which included:

1. A Ministerial Address from MSP and Minister for Public Health, Joe FitzPatrick
2. A presentation from Dr Catherine Calderwood, Chief Medical Officer for Scotland
3. A plenary session by Dr Jim McCormick, Associate Director Scotland to the Joseph Rowntree Foundation
4. Public Health Ethics expert, Prof John Coggan, launched a new report on the 'nanny state' debate
5. Dr Lynda Fenton from NHS Health Scotland presented detailed new analysis on mortality rate trends in Scotland



Craft corner at FPH in Scotland's Annual Conference at Peebles Hydro. Photo taken by SHSC.

“ The SIGs give you a great opportunity to explore areas of interest that are not necessarily covered through your training. There are opportunities to network and do some advocacy and lobbying work, teaching a topic that you are passionate about and there is much more freedom for yourself to explore and enjoy whilst training ”

**Bayad Nozad, Former Global Violence Prevention SIG Co-Chair**

## Sharing public health knowledge with the Journal of Public Health

In 2018 we adopted a new ‘digital first’ approach to the Journal of Public Health which means that the vast majority of FPH members now access it online, instead of receiving a printed copy.

By encouraging our members to receive a digital copy instead of receiving it through the post, we have saved a lot of paper and reduced our carbon footprint – something we are very passionate about. We ended the year with more than 860,000 downloads of Journal of Public Health articles which is our highest ever figure.



## Providing a platform for public health knowledge with our blog, Better Health For All

In 2018, we actively sought out blogs that would support FPH members, showcase public health and champion the work being delivered by FPH members and the wider public health community. We also improved our blog guidelines to ensure that our blogs are accessible for everyone.

## Knowledge

### In 2019 we will....

- Review the curriculum to ensure it is fit for the future
- Recruit new editors for the Journal of Public Health
- Finalise a new three-year strategy for the Journal of Public Health to raise awareness of the Journal amongst the public health community, increase the readership, and improve the impact of articles
- Embed FPH’s Editorial Board to deliver impactful comms that bring public health to life
- Continue to champion our Special Interest Group (SIG) programme
- Continue to commission blogs that champion public health
- Continue to share public health knowledge via all of our communications platforms

## Standards: achievements in 2018

FPH works to maintain standards in public health by reviewing and approving consultant level job descriptions and by providing external assessors for interview panels. This assures employers and the public that individuals are being recruited to the highest standard required to protect the population's health and enables us to contribute to the planning of an efficient, high quality public health workforce.

In 2018, 80 FPH members sat on 171 Advisory Appointment Committee (AAC) interview panels in their role as assessors.

## Continuing Professional Development (CPD)

In public health, the overall aim of continuing professional development is to ensure that those who work in the field develop and maintain the necessary knowledge, skills and attributes to practise effectively and work towards improving the health of the population.

Nearly 1,600 of our members participated in our CPD scheme in 2018, demonstrating our members' commitment to maintaining their high standards of public health. Additionally, 491 of them were audited, achieving a 92% success rate.

In 2018, the CPD Advisers Committee led a review of the CPD audit process, which identified a number of improvements that could be made to the current CPD Policy. The revised Policy was launched in early 2019 and the changes came into effect straight away.

## Revalidation

Revalidation is the process by which doctors demonstrate they are up to date and fit to practice. FPH is a designated body for revalidation to a small number of public health doctors who we support in their revalidation which includes allocating suitably trained appraisers to carry out annual appraisals, and access to guidance and to a Responsible Officer (RO) who makes a recommendation to the General Medical Council (GMC). In 2018, 17 positive recommendations were made to the GMC.

## Professional Appraisal Scheme

**FPH member, Roland Salmon, said:**

"FPH's revalidation service is supportive, accessible and user-friendly."

The FPH Workforce Committee led the development of a professional appraisal scheme that will be available to specialists from backgrounds other than medicine. This will be launched in 2019.

## Standards: in 2019 we will....

- Implement our revised CPD policy to ensure it is fit for purpose in maintaining the standards of our members, whilst ensuring its flexibility where appropriate
- We will continue to work closely with the General Medical Council (GMC) and UK Public Health Register (UKPHR) to set standards and maintain quality within the public health training programme

- Continue to ensure that public health professionals deliver quality controlled expertise that is relevant to the current challenges to our health through our Good Public Health Practice framework, revalidation and professional appraisal systems
- Work with employers to set and maintain standards to support the delivery of professional public health practice

## Workforce: achievements in 2018

FPH is unique in setting the standards for the specialist public health workforce to improve and protect the public's health and wellbeing. In 2018, we began delivering the new three-year workforce strategy. It is focused on achieving the following strategic objectives:

1. championing the unique value of public health specialists
2. ensuring that a flexible public health specialist workforce is trained, developed and fit for the future
3. ensuring clear and appropriate data is available on the current workforce and to ensure that effective longer term workforce planning is undertaken
4. supporting the development of an effective public health practitioner workforce and enable the wider workforce to deliver improvements to the public's health

So far, we have:

- Been involved in the delivery of the Practitioners Programme for the following schemes: Thames Valley Health Education England (HEE), UKPHR Scheme for London, Kent, Surrey & Sussex and East of England HEE
- Been commissioned to deliver a series of Public Health Masterclasses

## Exams

In 2018, we made some positive changes to the application process for the Objective Structured Public Health Examination (OSPHE), also known as the Part B exam.

A working group, comprised of Specialty Registrars, Part B Examiners, Training Programme Directors and FPH staff, was tasked with ensuring that the application process was streamlined and fit for purpose going forward.

This resulted in the launch of a revised Part B Exam Policy, a new application process and the introduction of an additional sitting in 2019 only. This will be kept under review to ensure the needs of Specialty Registrars are being met.

### At a glance: exams in 2018

- 90 Specialty Registrars passed the Part A exam in the UK
- 7 Specialty Registrars passed the Part A exam in Hong Kong
- 95 Specialty Registrars passed the Part B exam in the UK
- 60 FPH members gave their time and expertise to make sure the exams ran smoothly via the Committees, or as examiners and invigilators

“ Thank you very much for such an informative and inspiring course. I was already certain about my decision to apply but after meeting you all and meeting others due to go through the process, I am certainly more excited! I am very motivated to become a public health consultant! ”



## FPH's training courses and workshops programme

In 2018, we focused on developing and delivering a series of events aimed at providing learning and development opportunities for existing and potential new members. This included courses aimed at people considering a career in public health and workshops to help our current members strengthen their interview techniques.

Over 400 people attended one of 34 public health training courses across the UK in 2018. They included one attendee who fed back after our Introduction to Public Health course to say: “Thank you very much for such an informative and inspiring course. I was already certain about my decision to apply but after meeting you all and meeting others due to go through the process, I am certainly more excited! I am very motivated to become a public health consultant!”

## Workforce

### In 2019 we will...

- Continue to review the changes to the Part B Exam Policy in collaboration with our members
- Continue to support our members to ensure they feel valued
- Campaign on issues that impact the public health workforce
- Continue to deliver Public Health Masterclasses
- Continue to champion the unique value of public health specialists
- Ensure that a flexible public health specialist workforce is trained, developed and strengthened to meet employer and the public’s health needs in the future
- Work in partnership with the public health community to support the development of an effective public health practitioner workforce





# Our enablers

## Membership: achievements in 2018

From developing the public health curriculum and invigilating exams, to chairing committees and providing expertise on a range of issues, FPH members play a vital role in the success of the organisation. We simply wouldn't be able to achieve everything we do without them and they were involved in all of the successes shared in this year's annual report. In 2018, 34 FPH members were involved in the strategic leadership of the organisation in roles that included Elected Officers, Elected Members or Lay Observers.

In June 2018, we hosted our Annual Awards and Prizes ceremony. Our awards promote and celebrate the contributions and achievements of our members and the impact they have in improving the public's health. FPH has a proud history of rewarding excellence and the achievements of our Members and the wider public health community. We are indebted to the generosity of our Founding Fellows, Past Presidents and Friends of FPH who fund these awards and prizes each year.

### In 2018, we welcomed:

- 10 Honorary Fellows
- 15 Honorary Members
- 32 Fellows through Distinction
- 21 Members through Distinction
- 2 Practitioners through Distinction

### FPH Membership Survey

In early 2018, we shared the interim findings of the membership survey with our members to communicate what the initial findings were and what we would be improving. This included the launch of the Jobs Board. The findings then fed into the development of the Communications Strategy.

### FPH's Membership Task & Finish Group

FPH's Membership Task and Finish Group improved the initial 'welcome' communication new members to receive to make sure they are engaged with FPH from the beginning.

## The Specialty Registrar Committee (SRC)

The SRC is another example of our members being actively involved in our work.

Did you know that the SRC has 34 members based in all training regions across all four nations?

The SRC is a sub-committee of the Education Committee, and the work they lead is an example of the positive impact our members have on our organisation. They represent the interests of Specialty Registrars in Public Health from across the UK, and in 2018 they achieved the following:

- Identified improvements and changes to the Part B exam which are expected to improve the experience for all Specialty Registrars
- Worked with FPH's membership team to produce a comprehensive set of FAQs that have greatly helped Specialty Registrars understand their membership status
- Proactively gathered and expressed the views of registrars on the new UKPHR portfolio route to registration
- Provided a forum for registrars in different training regions to share their experiences, concerns and good practice. In 2018 this included work on pastoral support, health protection out of hours' processes, and organisation of regional teaching

## FPH's Registrar Project Scheme

In 2018, FPH launched the Registrar Placement Scheme. In total, 14 Specialty Registrars worked on vital FPH projects which ranged from policy development and communications-led work on our Brexit and Public Health Funding campaigns, to our next five-year organisational strategy.

## Membership

In 2019 we will...

- Continue to ensure FPH membership is valued for both UK and International members, and is seen as essential to the public health workforce
- Increase engagement with our existing members to support them in their daily work through our charitable objectives
- Continue to expand our membership to improve capacity and diversity within FPH
- Welcome a new President and several new Trustees to lead the organisation

## Profile: achievements in 2018

### We launched a new brand and website

Following an extensive consultation with members and feedback from our 2017 membership survey, we launched our new website on 30 April 2018.

We are really proud of our new website because we think it does a much better job of showcasing the diversity of our membership and wider public health community. It is also much easier to navigate and find the content you're looking for. Together, our new website and brand have helped to significantly modernise our organisation.

### We launched a new communications strategy

Following a significant consultation with FPH members and staff, we launched a new three-year communications strategy. It seeks to better champion the breadth and diversity of our membership, and better celebrate and value the work that FPH members do.

## Press coverage achieved during the 'Do No Harm' campaign

### Brexit bill needs 'do no harm' amendment to protect public health

We welcome the government's recent reassurances that the public's health will be protected as we leave the European Union. But they can only speak for this government one after that. They also offer a view

### Doctors go on lobbying warpath to defend EU health regulations

The medical profession is launching a lobbying campaign today to write a commitment to "do no harm" into the government's Bill. Peers are backing an attempt to force

### Do no harm: the three words that could help unite our divided nation

When you ask people to name the thing they remember most about Brexit, nearly always "that £350 million extra"

### Lord Warner: Peers can unite around our Brexit public health amendment

As we approach Report Stage of the EU (Withdrawal) Bill, a small but important amendment to protect the public's health has united the medical and public

### Public health community unites to ensure Brexit 'does no harm'

Last week, cross-Party Peers debated the 'Do No Harm' amendment to the EU (Withdrawal) Bill in the House of Lords. FPH's Senior Policy Officer was there to wat

### Baroness Judith Jolly writes...Brexit must not put public health at risk

Liberal Democrat spokesperson for health, Baroness Jolly, asks for your support on a crossbench Public Health amendment to the EU (Withdrawal) Bill Committee Stage in the

### 'Do no harm': Protecting the public's health as we leave the EU

When it comes to Brexit, regardless of what side of the fence we sit, one thing that unites us is our desire to promote

### Naren Patel and John Middleton: Brexit must "do no harm" to the public's health

Next week crossbench peer Lord Warner will propose a Public Health amendment to the European Union (Withdrawal) Bill, supported by peers from across

### Join me in supporting the cross-party 'Do No Harm' amendment to EU (Withdrawal) Bill

Whatever one's position on Brexit, an issue I hope we can all agree on is the health of our citizens.

We started to take a more strategic approach to support and drive our two policy-led influencing campaigns on Brexit and public health funding. This had a positive impact on the quality and quantity of media coverage we achieved, helped to increase engagement on Twitter and encouraged other organisations to actively support our work.

### Achieving impactful comms in support of our policy campaigns

We significantly raised the profile of FPH, securing timely media coverage, comment pieces and blogs authored by FPH President Prof John Middleton and the cross-bench Peers who tabled the Do No Harm amendment.

We significantly increased our media profile, achieving 12 pieces of coverage for the Do No Harm campaign with cross-party Peers or FPH members at the heart of each piece.

We rebalanced our communications activity towards raising greater awareness of our FPH services with at least 1-2 services and events-focused tweets per week, and a marked increase around 'key moments' such as our Annual Awards.

Our communications function continues to actively support our members by communicating more clearly on issues that are important to them as both members of FPH and public health professionals.

**Faculty of Public Health**  
@FPH

Good luck to everyone taking the Part A exam today or tomorrow - you've got this 😊  
#publichealth

1:20 AM - 11 Jun 2018

13 Retweets 21 Likes



**Faculty of Public Health**  
@FPH

Follow

If you're considering a career in public health, would love to meet PH professionals & find out more about the specialty, sign up to FPH's day-long 'Intro to Public Health' workshop in London or Manchester. Maybe one for your students @drnjshelton 😊



FACULTY OF  
PUBLIC HEALTH

#### Introduction to Public Health September

Introduction to Public Health Are you hoping to embark on a career in public health or to just broaden your skills, then this is the course for you.  
[fph.org.uk](http://fph.org.uk)

9:28 AM - 24 Jul 2018

24 Retweets 23 Likes



**Faculty of Public Health**  
@FPH

Follow

The Part B exam is coming up in a couple of weeks. Here's a blog from @DrVTurner who won the 2018 FPH McEwan Award for the highest score for the Part B exam with advice on how to prepare for it 😊

The winner of the 2018 FPH McEwan Award shares her advi...  
My name is Victoria and I am a public health registrar (ST3) in Yorkshire & the Humber. I am currently on an academic placement at the University of York, where I am doing qualitativ...  
[betterhealthforall.org](http://betterhealthforall.org)

4:52 AM - 8 Jun 2018

13 Retweets 18 Likes



### We launched a photography competition

In July 2018, FPH launched a photo competition to celebrate what 'public health looks like'. The aim of the competition was to encourage our members, the wider health and care community, and professional and amateur photographers to capture powerful images that bring to life the incredible breadth and diversity of public health. This achieved the following:

- We received over 250 inspiring, high-quality photos
- Nearly 800 people, 449 of whom were FPH members, voted for their favourite photos – the second highest amount of member-engagement we've ever had

**Faculty of Public Health**  
@FPH

Good luck to everyone taking the Part A exam today or tomorrow - you've got this 😊  
#publichealth

1:20 AM - 11 Jun 2018

13 Retweets 21 Likes





'Shelter' was the winning photograph from our inaugural photo competition to celebrate what 'public health looks like'.  
The photo was taken by Laura Finucane.

- The competition drove a significant volume of traffic to our new website and existing blog
- We communicated in innovative ways to raise awareness of the competition
- We secured a diverse judging panel of high profile public health and photography experts, including three members of FPH
- We engaged stakeholders from across the public health and wider health communities
- We recruited our first ever digital officer

**Public Health England** @PHE\_uk

What does public health look like to you? The [@FPH](#) are running a photo competition to find out... Time to get snapping!

**Faculty of Public Health** @FPH

We've just launched a photo competition to celebrate what #PublicHealthLooksLike. By entering, you'll help us showcase the value of public health and the impact your work has. Find out more and enter here [fph.org.uk/policy-campaigns](http://fph.org.uk/policy-campaigns)

Show this thread

2:09 AM - 20 Aug 2018

28 Retweets 33 Likes

## Profile

### In 2019 we will...

- Empower and encourage our members to be spokespeople for FPH
- Launch our first ever digital communications strategy
- Secure national media coverage for our two policy-led campaigns on Brexit and public health funding

## Partnership

In 2018, we were delighted to receive a funding award from the Health Foundation to deliver a project examining the role of the NHS in prevention, which runs from August 2018 - July 2019.

Dr Dominique Allwood, Assistant Director of Improvement and Consultant in Public Health Medicine for the Health Foundation, said:

**“** We look forward to supporting the Faculty of Public Health to understand what good prevention in the NHS looks like. **”**

### In 2019 we will...

- Continue to work in close partnership with other organisations committed to improve the public's health and wellbeing

## Global public health: achievements in 2018

During 2018, FPH was actively engaged in developing strategic partnerships in global public health. In June, it co-hosted a workshop with Public Health England, the Association of Schools of Public Health in the European Region and the International Association of National Public Health Institutes, on building public health capacity internationally. It was also invited by WHO Euro to support the development of a public health competency framework for Europe.

The Africa SIG was represented by co-chair, Aliko Ahmed, at the annual conference of the Association of Schools of Public Health in the African Region in October and is a key partner in the development of a competency framework for Africa. The Pakistan SIG was active in establishing relationships with federal and provincial administrations in Pakistan, and the Sudan SIG worked with the Sudan Medical Specialisation Board as an external examiner and in supporting the development of their curricula for public health and family medicine.

Following the success of the India SIG in developing a public health cadre in the Indian state of Odisha, Sushma Acquilla, the SIG's chair, was invited to support the development of an MPH curriculum for India. This was completed in 2018 and has now been adopted nationally.

The Yemen SIG has initiated a project on the prevention of diarrhoeal diseases and cholera by using simple health messages through Whatsapp.

Finally, two further global health SIGs on 'Addressing Non-communicable Diseases in Low and Middle Income Countries' and 'Women in Global Health' have been engaging with potential partners in developing their work plans for 2019.

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## Global public health

### In 2019 we will...

- Continue our vital global public health work mentioned above

FPH has nearly 600 members living and working in 85 countries around the world from Albania to Zimbabwe



This photo titled 'Eye care in rural India' was one of 29 photos shortlisted for our inaugural photo competition to celebrate what 'public health looks like'. The photo was taken by Sudip Maiti.

**Trustees' report, part two:**

# financial review

# Treasurer's Report



I am pleased to deliver my third report as the FPH Treasurer. 2018 has proved to be both an interesting and challenging year. We continue working to achieve our vision of an organisation which helps improve the health of the population, meets the needs of current and future members and maintains financial solvency. We have continued to implement change within FPH and this is reflected in our accounts. From the financial point of view, we have completed the year in an expected position relative to our operating budgetary forecast. However poor investment returns in the last quarter meant we finished the year in a slightly worse than forecast position.

Membership numbers over the year have been stable. However, we continue to forecast that over the next few years a small decline in traditional membership numbers may occur, potentially adversely affecting our main source of income.

In 2018 our “Masterclass” courses performed better than forecast and we will continue to run these in 2019.

The Scottish conference continues to be a popular event and generates a small surplus.

The switching of the Journal of Public Health from hard copy to mainly online access while contributing to our sustainable goals has also had a very favourable impact on our bottom line. The move to themed supplements has also had a positive impact.

We continue to invest in our systems and launched our new website in 2018. Towards the end of 2018 we started developing our financial strategy. The Board has agreed the following key principles

- plan to have balanced budgets each year
- prudent, realistic budgeting
- increase/maintain our reserves to six months cover
- actively plan for the future
- ethical investing

The Board has also agreed a series of actions by which the above will be achieved. The strategy will be finalised in 2019 to support the future FPH strategy.

## Financial summary

In looking at our financial statements, the most important figures to consider are those in the columns headed ‘unrestricted funds’. These are the sums that are fully available for FPH to use for our operational activities. The other types of funds we report in our accounts have various restrictions placed on them, and they cannot be used for everyday activity. Some of these funds resource our prizes whilst others relate directly to grant-based projects and only become available once the project has been undertaken.

The unrestricted deficit before investment losses (see below) was £82,255- this compares with an unrestricted deficit in 2017 before investment gains of £289,162. The 2018 deficit is shown after £55,196 paid in redundancy and termination costs (see note 5 to the accounts)

Overall receipts for member services have increased over the year by just over £70k. Likewise professional standards and examination income have increased on prior years. The decision not to host the FPH Annual Conference or continue producing the quarterly publication Public Health Today has meant a reduction in income in Health Policy & Advocacy but this is exceeded by related costs.

FPH benefited from good investment returns in the years 2015 – 2017, however this was not repeated in 2018 where total investment losses were £75,718. Much of this loss was recouped in the first quarter of 2019 but we remain vigilant with our mix of investments and funds. It is expected that we will be able to operate a “greener” investment portfolio without an adverse impact on the return on our investments. The overall deficit amounted to £230,229 (after investment losses) which was slightly less than in 2017. The overall net deficit before adjusting for investment

movements was £154,511 compared with £353,173 in 2017. This is reported in the two columns on the far right of the Statement of Financial Activities.

## Investments

Our investments are managed by Smith and Williamson Investment Managers. The key objectives of the FPH investment policy are:

1. Achieve an annual unrestricted income of at least £35,000 from dividends and interest.
2. Achieve a return on investment at least in line with inflation within an acceptable level of risk.
3. Where feasible, to channel investments into sectors that promote and support public health objectives whilst maintaining acceptable returns.

Unrestricted investment income in 2017 was £32,941 down from £40,886 in 2017 and the total return on investments was 3.5% compared with a 12.8% in the prior year when the market conditions were better. In accordance with our standard practice we will tender for our investment managers in 2019.

## Unrestricted reserves

Unrestricted funds at 31 December (including designated funds of £168,924) totaled £1,088,344 representing 6.6 months of normal operational expenditure and 57% of yearly unrestricted turnover.

We currently aim to maintain reserves of at least 4 months normal operational expenditure- this policy will be reviewed in 2019.

## Other reserves

The following amounts were held at 31 December 2018:

Restricted funds	£180,141
Endowment funds	£29,669

Details of funds are shown in Note 15a to the accounts.

## Risk management

The Risk Management, Audit & Finance Committee (RMAFC) continues to manage risk for FPH and regularly reviews the risk register. All high risk items were monitored closely throughout the year.

The principal risks facing the organisation and the means by which they are being managed are;

### 1. Effectiveness of Governance structure

After considerable work, the plan to achieve incorporation has been set aside. There has been an initial review of governance structures and the Board has agreed that there will now be a Governance Standing Committee and has approved increased expenditure in the 2019 budget to support its work.

### 2. Risk that the current financial strategy doesn't achieve its objectives

The treasurer is leading on a new FPH financial strategy and the main principles have been agreed by the Board;

- Aim to have breakeven budgets
- Identify new sources of funding to support business development ideas from the new strategy
- Limit draw on reserves

### 3. Risk that membership fails to generate sufficient numbers of new members within planned timetable to achieve income targets

The 2019 business planning process contains realistic targets for increasing member numbers. These targets will be translated into required numbers to be recruited each month throughout the year.

## Committee issues

The RMAFC has developed a comprehensive work plan which is RAG rated. A Remuneration Committee set up in 2016 has operated satisfactorily.

A pilot “support and challenge” initiative was introduced in 2018 which sought to improve our business planning. Members of the RMAFC worked with other committees to support their business planning initiatives.

## VAT

From 2016, FPH has been VAT registered.

## Audit

In 2018 FPH tendered for new auditors and appointed Sayer Vincent LLP. Sayer Vincent LLP replaced Crowe Clark Whitehill LLP and audited FPH activities in 2018. The audit statement is attached to the financial statements that follow.

I am pleased to report that we received an unqualified external audit report for the year.

## Thanks

Finally and arguably most importantly, I wish to pay credit to the support I have received from FPH staff and the members of the RMAFC.

Dr Ellis Friedman  
Honorary Treasurer



# Governance

The Faculty of Public Health (FPH) is a faculty of the Royal Colleges of Physicians of the UK, the latter consisting of the Royal College of Physicians of Edinburgh, the Royal College of Physicians and Surgeons of Glasgow and the Royal College of Physicians of London. FPH is a registered charity (charity number 263894) and its governing instrument is its standing orders.

The charity has given due consideration to Charity Commission published guidance on the operation of the Public Benefit requirement.

The trustees are the voting members of the FPH Board. Three trustees are appointed by the parent colleges. The President and Vice President are elected by the membership through a single transferable vote system. The remaining officers are elected by the trustees. All officers are elected for a term of three years and, with the exception of the President, can stand for a further two-year term.

The remaining trustees are elected in accordance with the terms of Standing Orders 37-42, and the detailed procedures for the timetable and the single transferable vote system as agreed by the Board. The trustees who served during 2018 are listed in Appendix 1.

Following their election, the trustees are presented with the FPH trustee handbook, given a briefing by the President and given the opportunity to discuss administrative details further at the FPH offices. The trustees are also invited to spend time with FPH staff so that they can gain an understanding of how the organisation works.

The Board meets five times a year, once after the Annual General Meeting in accordance with Standing Order 49, three times to discuss general matters and a fifth time as an away day. The functions and powers of the Board are detailed in Standing Orders 50 and 52.

In 2013 the Board reviewed and agreed the mission and values of the charity. In 2014 the Board again, as part of the strategic review and governance projects, revisited the mission and values and agreed they should remain as are.

The Executive Committee, appointed by the Board, carries out the functions set out in Standing Order 63, which include the power to act on behalf of the Board at the request of the President on matters of urgency.

A number of other standing committees are appointed by the Board to provide the structure to support the principal purposes of

the organisation and are, in general, chaired by the officer with responsibility for that function.

Sub-committees and special committees with a limited lifespan may be appointed by the Board to assist it in any matter. All committees report to the Board via the Executive Committee. The committee structure in 2018 is set out in Appendix 2.

FPH relies heavily on its members who work voluntarily on committees and are appointed into posts to take forward the work programme.

The Chief Executive is appointed and removed by the Board and is responsible for the day-to-day management of the staff and FPH headquarters in accordance with guidelines agreed by the Board.

## Resources

Our financial resources are described in the financial statements. In addition to its paid staff, FPH relies heavily on the voluntary work of its honorary officers, Board and committee members.

## Key management personnel in 2018

**Chief Executive** - David Allen  
(until September 2018)

**Interim Chief Executive** – James Gore  
(from September 2018 until his permanent appointment in January 2019)

**Director of Education and Professional Standards** - James Gore (until September 2018)

**Director of Policy and Communications** - Angus Baldwin

**Director of Business Services** - Magdalene Connolly

## Remuneration policy for key management personnel

Remuneration for the Chief Executive is set by the FPH remuneration committee. Remuneration for other key management personnel is set by the Chief Executive having regard to the budget agreed by the Board.

## Principal advisers

### Bankers

National Westminster Bank Plc  
125 Great Portland Street  
London W1N 6AX

### Solicitors

Bates Wells and Braithwaite London LLP  
10 Queen Street Place  
London EC4R 1BE

### Auditors

Sayer Vincent LLP  
Invicta House  
108-114 Golden Lane  
London, EC1Y 0TL

### Investment Managers

Smith and Williamson  
25 Moorgate  
London  
EC2R 6AY

## Conflict of interest

On appointment Trustees are invited to complete a register of interests. Trustees are asked to consider anything which may lead to a conflict of interest, or any circumstance that might be viewed by others as a conflict of interest. Each meeting of the Board of Trustees provides an opportunity for Trustees to reiterate this declaration.

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## Statement of trustees' responsibilities

### Status

The Faculty of Public Health of the Royal Colleges of Physicians of the United Kingdom is a registered charity.

### Charity number 263894

The trustees are responsible for the preparation of the Annual Report and Financial Statements in accordance with the applicable laws and regulations.

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

Under charity law, the trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charity and of its net outgoing resources for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently
- make judgments and estimates that are reasonable and prudent
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going-concern basis unless it is inappropriate to presume that the charity will continue to operate

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

Professor John Middleton, President, FPH

FACULTY OF  
PUBLIC HEALTH



Prof John Middleton, President of the Faculty of Public Health, at our annual awards ceremony, 2018



# Independent Auditor's Report to the Trustees of the Faculty of Public Health of the Royal Colleges of Physicians of the United Kingdom

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## Opinion

We have audited the financial statements of Faculty of Public Health (the 'charity') for the year ended 31 December 2018 which comprise the statement of financial activities, balance sheet, 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 charity's affairs as at 31 December 2018 and of its incoming resources and application of resources, for the year then ended
- Have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice
- Have been prepared in accordance with the requirements of the Charities Act 2011

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## 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

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- The trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- The trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the charity's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue

## Other information

The other information comprises the information included in the trustees' annual report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

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

We have nothing to report in respect of the following matters in relation to which the Charities (Accounts and Reports) Regulations 2008 requires us to report to you if, in our opinion:

- The information given in the trustees' annual report is inconsistent in any material respect with the financial statements;
- Sufficient accounting records have not been kept; or
- The financial statements are not in agreement with the accounting records and returns; or
- We have not received all the information and explanations we require for our audit

## Responsibilities of trustees

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

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

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

We have been appointed as auditor under section 144 of the Charities Act 2011 and report in accordance with regulations made under section 154 of that Act.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

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

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances,

but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control.

- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the trustees
- Conclude on the appropriateness of the trustees' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the entity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the entity to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation

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

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## Use of our report

This report is made solely to the charity's trustees as a body, in accordance with section 144 of the Charities Act 2011 and regulations made under section 154 of that Act. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Date: 22 May 2019

Joanna Pittman, Partner, Sayer Vincent LLP,  
Statutory Auditor

Invicta House, 108-114 Golden Lane,  
LONDON, EC1Y 0TL

Sayer Vincent LLP is eligible to act as auditor  
in terms of section 1212 of the Companies  
Act 2006

## Statement of financial activities

For the year ended 31st December 2018

	Note	Unrestricted £	Designated £	Restricted £	Endowment £	2018 Total £	Restated 2017 Total £
<b>Income from:</b>							
Donations and legacies		1,387	3,000	100	–	<b>4,487</b>	38,720
Charitable activities							
Membership fees and subscriptions		1,225,765	–	–	–	<b>1,225,765</b>	1,153,309
Maintaining professional standards		149,357	–	–	–	<b>149,357</b>	130,537
Examination and training fees		255,249	–	–	–	<b>255,249</b>	237,622
Public health policy and advocacy		5,705	72,230	22,000	–	<b>99,935</b>	223,615
International		14,820	–	–	–	<b>14,820</b>	32,430
Journal of Public Health		164,449	–	–	–	<b>164,449</b>	135,406
Other trading activities		4,077	–	–	–	<b>4,077</b>	5,605
Investments		32,941	536	–	837	<b>34,314</b>	41,948
<b>Total income</b>		<b>1,853,750</b>	<b>75,766</b>	<b>22,100</b>	<b>837</b>	<b>1,952,453</b>	<b>1,999,192</b>
<b>Expenditure on:</b>							
Investment management fees		9,745	250	–	482	<b>10,477</b>	13,148
Charitable activities							
Grants and prizes		–	350	2,347	–	<b>2,697</b>	6,998
Professional standards and membership		818,620	–	6,575	–	<b>825,196</b>	846,476
Examinations and training		496,319	–	31,301	–	<b>527,620</b>	565,292
Public health policy and advocacy		505,772	87,340	16,865	4,137	<b>614,114</b>	756,735
International		41,819	–	21,312	–	<b>63,131</b>	62,348
Journal of Public Health		63,730	–	–	–	<b>63,730</b>	101,368
<b>Total expenditure</b>	3	<b>1,936,005</b>	<b>87,940</b>	<b>78,400</b>	<b>4,619</b>	<b>2,106,964</b>	<b>2,352,365</b>
<b>Net (expenditure) before net gains / (losses) on investments</b>		(82,255)	(12,174)	(56,300)	(3,782)	<b>(154,511)</b>	(353,173)
Net gains / (losses) on investments	11	<b>(71,975)</b>	<b>(2,024)</b>	–	<b>(1,719)</b>	<b>(75,718)</b>	140,640
<b>Net (expenditure) for the year</b>	4	<b>(154,230)</b>	<b>(14,198)</b>	<b>(56,300)</b>	<b>(5,501)</b>	<b>(230,229)</b>	(212,533)
Transfers between funds	15	–	2,654	(2,654)	–	–	–
<b>Net movement in funds</b>		<b>(154,230)</b>	<b>(11,544)</b>	<b>(58,954)</b>	<b>(5,501)</b>	<b>(230,229)</b>	(212,533)
<b>Reconciliation of funds:</b>							
Total funds brought forward		1,073,650	180,468	239,095	35,170	<b>1,528,383</b>	1,704,128
Prior period adjustment	18	–	–	–	–	–	36,778
Total funds brought forward (as restated)		<b>1,073,650</b>	<b>180,468</b>	<b>239,095</b>	<b>35,170</b>	<b>1,528,383</b>	1,740,906
<b>Total funds carried forward</b>		<b>919,420</b>	<b>168,924</b>	<b>180,141</b>	<b>29,669</b>	<b>1,298,154</b>	<b>1,528,383</b>

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 15 to the financial statements.

## Balance sheet

As at 31st December 2018

	Note	£	2018 £	Restated 2017 £
<b>Fixed assets:</b>				
Tangible assets	9		7,252	7,252
Intangible assets	10		89,026	60,883
Investments	11		1,188,872	1,256,828
			<u>1,285,150</u>	<u>1,324,963</u>
<b>Current assets:</b>				
Debtors	12	228,590	213,031	
Cash at bank and in hand		<u>201,250</u>	<u>413,865</u>	
		<u>429,840</u>	<u>626,896</u>	
<b>Liabilities:</b>				
Creditors: amounts falling due within one year	13	(416,836)	(423,476)	
<b>Net current assets</b>			<u>13,004</u>	<u>203,420</u>
<b>Total net assets</b>			<u>1,298,154</u>	<u>1,528,383</u>
<b>The funds of the charity:</b>	15			
Restricted income funds		180,141	239,095	
Endowment funds		29,669	35,170	
Unrestricted income funds:				
Designated funds		168,924	180,468	
General funds		<u>919,420</u>	<u>1,073,650</u>	
Total unrestricted funds		<u>1,088,344</u>	<u>1,254,118</u>	
<b>Total charity funds</b>		<u>1,298,154</u>	<u>1,528,383</u>	

Approved by the trustees on 14 May 2019 and signed on their behalf by

Dr Ellis Friedman  
Treasurer

Professor John Middleton  
President

## Statement of cash flows

For the year ended 31st December 2018

	Note	2018 £	Restated 2017 £
<b>Cash flows from operating activities</b>	16		
<b>Net cash provided by / (used in) operating activities</b>		(165,935)	(338,753)
<b>Cash flows from investing activities:</b>			
Dividends, interest and rents from investments		34,314	41,948
Cash held for reinvestment in investment portfolio		(32,671)	–
Purchase of fixed assets		(73,232)	–
Proceeds from sale of investments		201,230	460,732
Purchase of investments		(176,321)	(152,609)
<b>Net cash provided by / (used in) investing activities</b>		<u>(46,680)</u>	<u>350,071</u>
<b>Change in cash and cash equivalents in the year</b>		(212,615)	11,318
Cash and cash equivalents at the beginning of the year		413,865	402,547
<b>Cash and cash equivalents at the end of the year</b>		<u>201,250</u>	<u>413,865</u>

# Notes to the financial statements

For the year ended 31st December 2018

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## 1 Accounting policies

### a) Statutory information

The Faculty of Public Health is an unincorporated charity registered with the Charity Commission in England & Wales. The registered office address is 4 St. Andrews Place, London, NW1 4LB.

### b) Basis of preparation

The accounts (financial statements) have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015) – (Charities SORP FRS 102) and the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) (September 2015) and the Charities Act 2011.

The accounts (financial statements) have been prepared to give a 'true and fair' view and have departed from the Charities (Accounts and Reports) Regulations 2008 only to the extent required to provide a 'true and fair view'. This departure has involved following Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued on 16 July 2014 rather than the Accounting and Reporting by Charities: Statement of Recommended Practice effective from 1 April 2005 which has since been withdrawn.

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

In applying the financial reporting framework, the trustees have made a number of subjective judgements, for example in respect of significant accounting estimates. Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances. The nature of the estimation means the actual outcomes could differ from those estimates. Any significant estimates and judgements affecting these financial statements are detailed within the relevant accounting policy below.

### c) Public benefit entity

The charity 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 charity's ability to continue as a going concern.

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.

### e) Income

Incoming resources are included in the Statement of Financial Activities (SoFA) on the following basis:

- Membership subscriptions – amounts received in the current year and relating to the current year's subscriptions.
- Examination and training fees – amounts received in the current year and relating to examinations and courses held in the current year.
- Revalidation fees, donations and legacies, gift aid and investment income – amounts received in the current year.
- Journal of Public Health and other income – amounts receivable where the Faculty is legally entitled to the income and the amounts can be reasonably quantified and the transfer of funds is probable.

### f) Interest receivable

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.

# Notes to the financial statements

For the year ended 31st December 2018

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## 1 Accounting policies (continued)

### 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.

Endowment funds are perpetual funds where only the income generated from them is used for operational purposes. Capital growth / loss is adjusted to the value of the funds. Authority to change their nature and status lies with the donors.

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

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

### h) Expenditure 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:

- Expenditure on charitable activities includes the costs of delivering services, exhibitions and other educational activities undertaken to further the purposes of the charity and their associated support costs
- Other expenditure represents those items not falling into any other heading

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

### i) Allocation of support costs

Resources expended are 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.

Where information about the aims, objectives and projects of the charity is provided to potential beneficiaries, the costs associated with this publicity are allocated to charitable expenditure.

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

● Professional standards and membership	45%
● Examination and training fees	23%
● Public health policy and advocacy	26%
● International	5%
● Journal of Public Health	1%

Governance costs are the costs associated with the governance arrangements of the charity. These costs are associated with 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.

### k) Tangible fixed assets

Items of equipment are capitalised where the purchase price exceeds £5,000. 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.

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 straight line depreciation rates in use are as follows:

● Computer software	5 years
● Office and IT furniture and equipment	3 years

No depreciation has been provided on donated items as their NBV is considered a fair estimate of their value.

# Notes to the financial statements

For the year ended 31st December 2018

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## 1 Accounting policies (continued)

### 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. 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) 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.

### o) Financial instruments

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.

### p) Pensions

The charity contributes 12.5% of employees basic salaries to an auto-enrolment pension scheme. Alternatively staff may opt to have contributions made to authorised pension schemes of their choice.

## Notes to the financial statements

For the year ended 31st December 2018

### 2 Detailed comparatives for the statements of financial activities

	Unrestricted £	Designated £	Restricted £	Endowment £	2017 Total £
<b>Income from:</b>					
Donations and legacies	38,720	–	–	–	<b>38,720</b>
Charitable activities					
Membership fees and subscriptions	1,153,309	–	–	–	<b>1,153,309</b>
Examination and training fees	235,982	–	1,640	–	<b>237,622</b>
Maintaining professional standards	128,787	104,322	1,750	–	<b>234,859</b>
Public health policy and advocacy	119,293	–	–	–	<b>119,293</b>
International	–	–	32,430	–	<b>32,430</b>
Journal of Public Health	135,406	–	–	–	<b>135,406</b>
Other trading activities	5,605	–	–	–	<b>5,605</b>
Investments	40,886	353	–	709	<b>41,948</b>
Other	–	–	–	–	–
<b>Total income</b>	<b>1,857,988</b>	<b>104,675</b>	<b>35,820</b>	<b>709</b>	<b>1,999,192</b>
<b>Expenditure on:</b>					
Investment management fees	13,148	–	–	–	<b>13,148</b>
Charitable activities					
Grants and prizes	2,704	2,594	1,700	–	<b>6,998</b>
Examinations and training	528,980	–	36,312	–	<b>565,292</b>
Maintaining professional standards	837,269	–	9,207	–	<b>846,476</b>
Public health policy and advocacy	645,027	106,306	2,500	2,902	<b>756,735</b>
International	18,654	–	43,694	–	<b>62,348</b>
Journal of Public Health	101,368	–	–	–	<b>101,368</b>
<b>Total expenditure</b>	<b>2,147,150</b>	<b>108,900</b>	<b>93,413</b>	<b>2,902</b>	<b>2,352,365</b>
<b>Net income / expenditure before gains /</b>	<b>(289,162)</b>	<b>(4,225)</b>	<b>(57,593)</b>	<b>(2,193)</b>	<b>(353,173)</b>
<b>Net gains / (losses) on investments</b>	<b>132,805</b>	<b>2,495</b>	<b>–</b>	<b>5,340</b>	<b>140,640</b>
<b>Net movement in funds</b>	<b>(156,357)</b>	<b>(1,730)</b>	<b>(57,593)</b>	<b>3,147</b>	<b>(212,533)</b>
<b>Reconciliation of funds:</b>					
Total funds brought forward	1,230,007	145,410	296,688	32,023	<b>1,704,128</b>
Prior period adjustment	–	36,778	–	–	<b>36,778</b>
Total funds brought forward (as restated)	1,230,007	182,188	296,688	32,023	<b>1,740,906</b>
<b>Total funds carried forward</b>	<b>1,073,650</b>	<b>180,468</b>	<b>239,095</b>	<b>35,170</b>	<b>1,528,383</b>

## Notes to the financial statements

For the year ended 31st December 2018

### 3a Analysis of expenditure (current year)

	Charitable activities								
	Professional standards	Examination and training fees	Public health policy and advocacy	International	Journal of Public Health	Governance costs	Support costs	2018 Total £	2017 Total as restated £
Costs of raising funds	Grants and prizes	£	£	£	£	£	£	£	£
-	-	2,697	307,049	198,309	255,258	18,470	54,797	499,315	1,114,813
Direct staff costs (Note 5)	Direct costs	116,190	123,867	126,615	-	-	-	-	736,349
Other staff costs	-	-	-	-	-	-	-	44,906	77,108
Premise expenses	-	-	-	-	-	-	-	39,389	35,675
Communication and IT costs	-	-	-	-	-	-	-	131,898	127,745
Subscriptions and partnerships	-	-	-	-	-	-	-	22,275	17,778
Bank charges and other	-	-	-	-	-	-	-	34,888	34,888
Depreciation	-	-	-	-	-	-	-	45,089	69,545
Trustees meetings and expenses	-	-	-	-	-	-	-	50,036	30,442
Governance review	-	-	-	-	-	-	-	-	50,036
Investment management fees	10,477	-	-	-	-	-	-	-	62,729
Audit fees	-	-	-	-	-	-	-	-	53,033
	10,477	2,697	423,240	322,176	381,873	18,470	54,797	75,475	2,106,965
Support costs	-	-	367,992	188,085	212,618	40,888	8,178	(817,760)	-
Governance costs	-	-	33,964	17,359	19,624	3,774	755	(75,475)	-
<b>Total expenditure 2018</b>	<b>10,477</b>	<b>2,697</b>	<b>825,196</b>	<b>527,620</b>	<b>614,114</b>	<b>63,131</b>	<b>63,730</b>	<b>-</b>	<b>2,352,365</b>
Total expenditure 2017	<b>13,148</b>	<b>6,997</b>	<b>846,476</b>	<b>565,292</b>	<b>756,736</b>	<b>62,348</b>	<b>101,368</b>	<b>-</b>	<b>2,352,365</b>

Of the total expenditure, £2,023,945 was unrestricted (2017: £2,256,050) and £83,019 was restricted (2017: £96,315).

## Notes to the financial statements

For the year ended 31st December 2018

### 3b Analysis of expenditure (prior year) – as restated

	Charitable activities									
	Costs of raising funds £	Grants and prizes £	Professional standards and membership £	Examination and training fees £	Public health policy and advocacy £	International £	Journal of Public Health £	Governance costs £	Support costs £	2017 Total as restated £
Direct staff costs	–	–	277,986	175,578	226,554	–	93,256	–	434,695	1,114,813
Direct costs	–	4,293	135,870	119,326	332,072	51,532	–	–	–	736,349
Other staff costs	–	–	–	–	–	–	–	–	77,108	77,108
Premise expenses	–	–	–	–	–	–	–	–	35,675	35,675
Communication and IT costs	–	–	–	–	–	–	–	–	127,745	127,745
Subscriptions and partnerships	–	–	–	–	–	–	–	–	17,778	17,778
Bank charges and other	–	–	–	–	–	–	–	–	69,545	69,545
Depreciation	–	–	–	–	–	–	–	–	30,442	30,442
Trustees meetings and expenses	–	–	–	–	–	–	–	–	62,729	62,729
Governance review	–	–	–	–	–	–	–	–	53,033	53,033
Investment management fees	13,148	–	–	–	–	–	–	–	–	13,148
Audit fees	–	–	–	–	–	–	–	14,000	–	14,000
	13,148	4,293	413,856	294,904	558,626	51,532	93,256	129,762	792,988	2,352,365
Support costs	2,325	372,053	232,534	170,375	9,302	6,399	–	(792,988)	–	–
Governance costs	379	60,567	37,854	27,735	1,514	1,713	(129,762)	–	–	–
<b>Total expenditure 2017</b>	<b>13,148</b>	<b>6,997</b>	<b>846,476</b>	<b>565,292</b>	<b>756,736</b>	<b>62,348</b>	<b>101,368</b>	<b>–</b>	<b>–</b>	<b>2,352,365</b>

## Notes to the financial statements

For the year ended 31st December 2018

### 4 Net (expenditure) for the year

This is stated after charging / (crediting):

	2018 £	2017 £
Depreciation	45,089	30,442
Auditors' remuneration (excluding VAT):		
Audit	<u>10,000</u>	<u>10,600</u>

### 5 Analysis of staff costs, trustee remuneration and expenses, and the cost of key management personnel

Staff costs were as follows:

	2018 £	2017 £
Salaries and wages	983,141	909,690
Redundancy and termination costs	55,196	-
Social security costs	109,419	96,800
Employer's contribution to defined contribution pension schemes	112,176	108,323
	<u>1,259,932</u>	<u>1,114,813</u>

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

	2018 No.	2017 No.
£60,000 – £69,999	-	1
£70,000 – £79,999	1	-
£100,000 – £109,999	-	1
£170,000 – £179,999	1	-

The total employee benefits (including pension contributions and employer's national insurance) of the key management personnel were £446,357 (2017: £319,772).

The charity trustees were neither paid nor received any other benefits from employment with the charity in the year (2017: £nil). No charity trustee received payment for professional or other services supplied to the charity (2017: £nil).

Trustees' expenses represents the payment or reimbursement of travel and subsistence costs totalling £18,053 (2017: £41,268 incurred by 24 (2017: 32) members relating to attendance at meetings of the trustees.

### 6 Staff numbers

The average number of employees (head count based on number of staff employed) during the year was 23 (2017: 22).

### 7 Related party transactions

There are no related party transactions to disclose for 2018 (2017: none).

### 8 Taxation

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

## Notes to the financial statements

For the year ended 31st December 2018

### 9 Tangible fixed assets

	IT Equipment and software £	Office Furniture and equipment £	Donated items £	Total £
<b>Cost</b>				
At the start of the year	58,816	25,871	4,912	<b>89,599</b>
Additions in year	-	-	-	-
At the end of the year	58,816	25,871	4,912	<b>89,599</b>
<b>Depreciation</b>				
At the start of the year	58,816	23,531	-	<b>82,347</b>
Charge for the year	-	-	-	-
At the end of the year	58,816	23,531	-	<b>82,347</b>
<b>Net book value</b>				
<b>At the end of the year</b>	-	2,340	4,912	<b>7,252</b>
At the start of the year	-	2,340	4,912	7,252

All of the above assets are used for charitable purposes.

### 10 Intangible assets

	E-Portfolio software £	CRM Software £	Website development £	Total £
<b>Cost</b>				
At the start of the year	51,389	100,820	-	<b>152,209</b>
Additions in year	-	-	73,232	<b>73,232</b>
At the end of the year	51,389	100,820	73,232	<b>225,441</b>
<b>Depreciation</b>				
At the start of the year	30,834	60,492	-	<b>91,326</b>
Charge for the year	10,279	20,164	14,646	<b>45,089</b>
At the end of the year	41,113	80,656	14,646	<b>136,415</b>
<b>Net book value</b>				
<b>At the end of the year</b>	10,276	20,164	58,586	<b>89,026</b>
At the start of the year	20,555	40,328	-	60,883

### 11 Listed investments

	2018 £	2017 £
Fair value at the start of the year	1,256,828	1,424,311
Additions at cost	176,321	152,609
Disposal proceeds	(201,230)	(460,732)
Net gain / (loss) on change in fair value	(75,718)	140,640
	1,156,201	1,256,828
Cash held by investment broker pending reinvestment	32,671	-
Fair value at the end of the year	1,188,872	1,256,828
Historic cost at the end of the year	997,643	975,228

## Notes to the financial statements

For the year ended 31st December 2018

### 12 Debtors

	2018 £	2017 £
Trade debtors	–	3,555
Other debtors	<b>186,306</b>	152,564
VAT debtor	<b>4,458</b>	9,613
Prepayments	<b>37,826</b>	47,299
	<b>228,590</b>	<b>213,031</b>

With the exception of listed investments, all of the charity's financial instruments, both assets and liabilities, are measured at amortised cost. The carrying values of these are shown above and also in note 13 below.

### 13 Creditors: amounts falling due within one year

	2018 £	2017 £
Trade creditors	<b>90,489</b>	75,183
Taxation and social security	<b>25,382</b>	29,334
Subscriptions paid in advance	<b>44,412</b>	28,324
Examinations and other fees paid in advance	<b>115,562</b>	80,810
Pension reserve	<b>48,041</b>	57,151
Accruals	<b>92,950</b>	147,429
Grant creditors and deferred income	–	5,245
	<b>416,836</b>	<b>423,476</b>

### 14a Analysis of net assets between funds (current year)

	General unrestricted £	Designated £	Restricted £	Endowment £	Total funds £
Tangible fixed assets	7,252	–	–	–	7,252
Intangible assets	89,026	–	–	–	89,026
Investments	1,133,678	25,525	–	29,669	1,188,872
Current assets	106,300	143,399	180,141	–	429,840
Current liabilities	(416,836)	–	–	–	(416,836)
<b>Net assets at 31 December 2018</b>	<b>919,420</b>	<b>168,924</b>	<b>180,141</b>	<b>29,669</b>	<b>1,298,154</b>

### 14b Analysis of net assets between funds (prior year restated)

	General unrestricted £	Designated £	Restricted £	Endowment £	Total funds £
Tangible fixed assets	7,252	–	–	–	7,252
Intangible assets	60,883	–	–	–	60,883
Investments	1,193,277	28,381	–	35,170	1,256,828
Current assets	235,714	152,087	239,095	–	626,896
Current liabilities	(423,476)	–	–	–	(423,476)
<b>Net assets at 31 December 2017</b>	<b>1,073,650</b>	<b>180,468</b>	<b>239,095</b>	<b>35,170</b>	<b>1,528,383</b>

## Notes to the financial statements

For the year ended 31st December 2018

### 15b Movements in funds (prior year)

	At 1 January 2017 as restated £	Income & gains £	Expenditure & losses £	Transfers £	At 31 December 2017 as restated £
<b>Restricted funds:</b>					
Prize Funds (current element)	2,654	–	–	–	2,654
Sian Griffith Prize Fund	1,360	1,640	(500)	–	2,500
Trainer of the Year Award	125	–	–	–	125
Sam Ramaiah Prize Fund	9,000	–	(250)	–	8,750
Elizabeth Russell Prize Fund	32,489	–	(200)	–	32,289
Lindsey Davies Synergy Fund	4,800	1,750	(250)	–	6,300
Dr Stewart-Brown Prize fund	5,000	–	(500)	–	4,500
<b>Health, policy and advocacy</b>					
Mental Health – Thinking Ahead (Natural	2,257	–	–	–	2,257
Mental Health	17,565	–	(2,500)	–	15,065
<b>Education and training</b>					
Grant to support College Training	1,811	–	(58)	–	1,753
Public Health Training in Clinical	101,500	–	(19,908)	–	81,592
Public Health Education & Training	–	–	–	–	–
Metacompetencies	5,131	–	–	–	5,131
Speciality Training	3,408	–	–	–	3,408
WWPH – practitioner training	26,473	–	(16,346)	–	10,127
<b>Professional standards</b>					
CPD Fund	2,580	–	–	–	2,580
Revalidation Communication Activities	176	–	–	–	176
Revalidation Programme –	44,255	–	(9,207)	–	35,048
<b>Corporate</b>					
Royal College Fund	3,529	–	–	–	3,529
<b>International</b>					
Odisha	32,575	32,430	(43,694)	–	21,311
<b>Total restricted funds</b>	<b>296,688</b>	<b>35,820</b>	<b>(93,413)</b>	<b>–</b>	<b>239,095</b>
<b>Endowment funds:</b>					
DARE Lecture Fund	32,023	6,049	(2,902)	–	35,170
<b>Total endowment funds</b>	<b>32,023</b>	<b>6,049</b>	<b>(2,902)</b>	<b>–</b>	<b>35,170</b>
<b>Unrestricted funds:</b>					
Designated funds:					
Welsh Affairs Committee Fund	882	1	–	–	883
Scottish Affairs Committee Fund	88,092	103,322	(102,513)	–	88,901
UK Public Health Association	5,724	–	–	–	5,724
Littlejohn Gardner Prize Fund	5,876	–	(100)	–	5,776
Alwyn Smith Prize Fund	944	–	–	–	944
Wilfrid Harding Faculty Prize Fund	2,552	–	(150)	–	2,402
Cochrane Prize Fund	16,734	–	–	–	16,734
BACP Travelling Fellowship	3,624	–	(1,500)	–	2,124
O'Brien Prize Fund	–	–	(300)	300	–
Sir John Brotherton Prize	–	–	(100)	100	–
June & Sidney Crown Award	9,114	–	–	–	9,114
Ann Thomas Prize Fund	1,372	–	(100)	–	1,272
The McEwen Award	2,822	–	(100)	–	2,722
Prize Funds Trading Account	5,529	2,847	(243)	(400)	7,733
Business Development Fund	28,933	–	–	–	28,933
Clifford Hamer Shaw Memorial Fund	10,000	–	(3,794)	–	6,206
Total designated funds	182,198	106,170	(108,900)	–	179,468
<b>General funds</b>	<b>1,230,007</b>	<b>1,990,793</b>	<b>(2,147,150)</b>	<b>–</b>	<b>1,073,650</b>
<b>Total unrestricted funds</b>	<b>1,412,205</b>	<b>2,096,963</b>	<b>(2,256,050)</b>	<b>–</b>	<b>1,253,118</b>
<b>Total funds</b>	<b>1,740,916</b>	<b>2,138,832</b>	<b>(2,352,365)</b>	<b>–</b>	<b>1,527,383</b>

# Notes to the financial statements

For the year ended 31st December 2018

## 15a Movements in funds (current year)

	Note	At 1 January 2018 as restated £	Income & gains £	Expenditure & losses £	Transfers £	At 31 December 2018 £
<b>Restricted funds:</b>						
Prize Funds (current element)		2,654		–	(2,654)	–
PH Faculties Registrar Prize	1		100	(100)	–	–
Sian Griffith Prize Fund	2	2,500	–	(700)	–	1,800
Trainer of the Year Award	3	125	–	(27)	–	98
Sam Ramaiah Prize Fund	4	8,750	–	–	–	8,750
Elizabeth Russell Prize Fund	5	32,289	–	–	–	32,289
Lindsey Davies Synergy Fund	6	6,300	–	(1,520)	–	4,780
Dr Stewart-Brown Prize fund	7	4,500	–	–	–	4,500
<b>Health, policy and advocacy</b>						
Mental Health – Thinking Ahead (Natural	8	2,257	–	–	–	2,257
Mental Health – PHE collaboration	9	15,065	–	–	–	15,065
Health Foundation	10		22,000	(16,865)	–	5,135
<b>Education and training</b>						
Grant to support College Training	11	1,753	–	(1,753)	–	–
Public Health Training in Clinical	12	81,592	–	(21,295)	–	60,297
Metacompetencies	13	5,131	–	–	–	5,131
Speciality Training	14	3,408	–	–	–	3,408
WWPH – practitioner training	15	10,127	–	(8,253)	–	1,874
<b>Professional standards</b>						
CPD Fund	16	2,580	–	–	–	2,580
Revalidation Communication Activities	17	176	–	–	–	176
Revalidation Prog. – multidisciplinary	18	35,048	–	(6,575)	–	28,473
<b>Corporate</b>						
Royal College Fund	19	3,529	–	–	–	3,529
<b>International</b>						
Odisha	20	21,311	–	(21,311)	–	–
<b>Total restricted funds</b>		<u>239,095</u>	<u>22,100</u>	<u>(78,400)</u>	<u>(2,654)</u>	<u>180,141</u>
<b>Endowment funds:</b>						
DARE Lecture Fund	21	35,170	837	(6,338)	–	29,669
<b>Total endowment funds</b>		<u>35,170</u>	<u>837</u>	<u>(6,338)</u>	<u>–</u>	<u>29,669</u>
<b>Unrestricted funds:</b>						
Designated funds:						
Welsh Affairs Committee Fund	22	883	2	–	–	885
Scottish Affairs Committee Fund	23	89,901	72,309	(74,137)	–	88,073
UK Public Health Association	24	5,724	–	–	–	5,724
Littlejohn Gardner Prize Fund	25	5,776	–	–	–	5,776
Alwyn Smith Prize Fund	26	944	–	–	–	944
Wilfrid Harding Faculty Prize Fund	27	2,402	–	–	–	2,402
Cochrane Prize Fund	28	16,734	–	(250)	–	16,484
BACP Travelling Fellowship	29	2,124	–	–	–	2,124
June & Sidney Crown Award	30	9,114	–	–	–	9,114
Ann Thomas Prize Fund	31	1,272	–	–	–	1,272
The McEwen Award	32	2,722	–	(100)	–	2,622
Prize Funds Trading Account	33	7,733	455	(2,274)	2,654	8,568
Business Development Fund	34	28,933	–	(9,703)	–	19,230
Clifford Hamer Shaw Memorial Fund	35	6,206	–	(3,500)	–	2,706
Tijou Charitable Trust	36		3,000			3,000
<b>Total designated funds</b>		<u>180,468</u>	<u>75,766</u>	<u>(89,964)</u>	<u>2,654</u>	<u>168,924</u>
<b>General funds</b>						
<b>Total unrestricted funds</b>		<u>1,073,650</u>	<u>1,853,750</u>	<u>(2,007,979)</u>	<u>–</u>	<u>919,421</u>
<b>Total funds including pension fund</b>		<u>1,254,118</u>	<u>1,929,516</u>	<u>(2,097,943)</u>	<u>2,654</u>	<u>1,088,345</u>
		<u>1,528,383</u>	<u>1,952,453</u>	<u>(2,182,681)</u>	<u>–</u>	<u>1,298,155</u>

# Notes to the financial statements

For the year ended 31st December 2018

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## Purposes of restricted funds

- 1 Registrars prize awarded at 5 Nations conference
- 2 Award to assist FPH members gain international experience, particularly in low and middle income countries
- 3 Award to the trainer adjudged to have contributed most to the training programme
- 4 Award for excellence in FPH examinations
- 5 Award created by the Scottish committee
- 6 Award recognising success in or commitment to developing synergistic relationship with other organisations
- 7 Award recognising contributions towards mental health research
- 8 Grant provided by Natural England
- 9 Collaborative agreement with PHE sharing good practice in a public mental health project
- 10 Project funded by the Health Foundation to investigate NHS preventative approaches to health and care
- 11 Grant provided by the Academy of Royal Colleges
- 12 DoH grant to set up a programme of work around public health training in clinical specialities
- 13 Grant provided by Health Education England
- 14 Agreement with DoH to provide e-learning tool for public health speciality training
- 15 Agreement with Health Education Board to scope and develop public health courses for practitioners
- 16 Funding to assess the effectiveness of CPD following the advent of revalidation
- 17 Old balance on completed project
- 18 Grant to cover work on developing FPH revalidation systems to ensure applicability to all PH specialists
- 19 Grant provided by NIDOF to assist FPH achieve Royal College status
- 20 DFID funded project to build specialist public health capacity in Odisha, India

## Purposes of endowment fund

- 21 Set up to fund annual lectures

## Purposes of designated funds

- 22 Funds held on behalf of the Welsh affairs committee
- 23 Funds held on behalf of the Scottish affairs committee
- 24 Funds held on behalf of the UK Public Health Association
- 25 Award for excellence in examinations held by FPH
- 26 Award for outstanding contributions to research or practice in community medicine
- 27 Awarded biennially to a member judged to have made an outstanding contribution to FPH
- 28 Awarded to undergraduate students to support educational activities in public health medicine
- 29 Awarded biennially to assist FPH trainees undertake educational travel, normally outside the UK
- 30 Awarded biennially to assist FPH trainees gain experience of training outside the UK
- 31 Award for excellence in examinations held by FPH
- 32 Award for excellence in examinations held by FPH
- 33 General fund comprising investment income
- 34 Moneys released from past funding agreements to be used for future projects at the discretion of the Trustees
- 35 Part of a legacy received to be used for the production of public health films
- 36 Grant towards FPH's Public Health funding campaign

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

	2018 £	2017 £
<b>Net income / (expenditure) for the reporting period (as per the statement of financial activities)</b>	<b>(230,229)</b>	<b>(175,745)</b>
Depreciation charges	45,089	30,442
(Gains)/losses on investments	75,718	(140,640)
Dividends, interest and rent from investments	(34,314)	(41,948)
(Profit)/loss on the disposal of fixed assets	-	-
(Increase)/decrease in debtors	(15,559)	(12,918)
Increase/(decrease) in creditors	(6,640)	2,056
<b>Net cash provided by / (used in) operating activities</b>	<b>(165,935)</b>	<b>(338,753)</b>

## Notes to the financial statements

For the year ended 31st December 2018

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### 17 Operating lease

FPH has a lease on 4 St Andrews Place, on a peppercorn rate, expiring on 25 August 2084. The trustees of this lease are:

- a) Dr Keith Williams
- b) Dr Elizabeth Aline Scott
- c) Professor Selena Felicity Gray

### 18 Prior period adjustment

					31-Dec-17	
	Unrestricted	Designated	Restricted	Endowment		Total
Funds previously reported	£ 1,073,650	£ 174,146	£ 239,095	£ 35,170		£ 1,522,061

#### Adjustments on restatement:

1. To recognise 2017 Scottish conference receipts
2. To recognise 2017 Scottish conference costs

	–	104,322	–	–		104,322
	–	(98,000)	–	–		(98,000)
Funds restated	<u>1,073,650</u>	<u>180,468</u>	<u>239,095</u>	<u>35,170</u>		<u>1,528,383</u>

					01-Jan-17	
	Unrestricted	Designated	Restricted	Endowment		Total
Funds previously reported	£ 1,230,007	£ 145,410	£ 296,688	£ 32,023		£ 1,704,128

#### Adjustments on restatement:

1. To recognise Scottish conference surplus related to 2016 and prior years

	–	36,778	–	–		36,778
Funds restated	<u>1,230,007</u>	<u>182,188</u>	<u>296,688</u>	<u>32,023</u>		<u>1,740,906</u>



# A big thank you to...

## The following funders and donors who supported our work in 2018

- The Health Foundation
- John Raymond Tijou Charitable Trust
- European Public Health Association (EUPHA)
- Kunio Aoki
- Gordon Stott
- Ann Marie Connolly

## All FPH members involved in the following Committees and Advisory Boards:

- Executive Committee
- Board
- Risk Management, Audit and Finance Committee
- Remuneration & Appointments Committee
- Equality & Diversity Committee
- Governance Committee
- Education Standing Committee
- Workforce Standing Committee
- Health Policy Standing Committee
- Global Health Standing Committee
- Scotland, Wales and Northern Ireland Standing Committees
- English FLACs
- Ethics Committee
- Membership Task & Finish Group

- CPD Audit Committee
- Fellowship Committee
- Faculty Advisers Committee
- Health Protection Committee
- Health Services Committee
- Health Improvement Committee
- Academic and Research Committee

## Specialty Registrars involved in FPH's Registrar Project Scheme in 2018:

- Mary Dallat
- Jonny Currie
- Grace Norman
- Rachel Chapman
- Robert Verrecchia
- Rachel Bath
- Danielle Solomon
- Rhosyn Harris
- Emily Dobell
- Rachel Thomson
- Andy Turner
- Ahmed Razavi
- Wikum Jayatunga
- Lex Gainsbury

## All FPH members involved in the successful delivery of our exams

## All FPH members involved in the successful delivery of our events, workshops and courses

All FPH members acting for FPH as external assessors on senior appointment interview panels

All members of our Public Health Funding Advisory Board

All members of our Public Health Funding Sounding Board

All members of our Brexit Advisory Board

**Organisations, charities, Government departments and Committees we worked with in 2018:**

- Royal College of Surgeons of Ireland
- Faculty of Forensic & Legal Medicine
- Faculty of Sport & Exercise Medicine
- Alcohol Health Alliance
- UK Health Forum
- Academy of Medical Royal Colleges
- National Voices
- Institute For Alcohol Studies
- Action on Smoking and Health
- Centre For Mental Health
- College of Podiatry
- National Pharmacy Association
- Medact
- Cycling UK
- People's Health Movement
- Scottish Group of Directors of Public Health
- Health Foundation
- Royal College of Midwives
- Chartered Institute of Environmental Health
- British Dental Association
- Sustain
- Alzheimer's Society
- The European Public Health Association
- European Public Health Alliance
- Society for Social Medicine
- Health Poverty Action
- Diabetes UK
- Academy of Medical Research Charities
- British Medical Association
- Brexit Health Alliance
- Family Planning Association
- Cancer Research UK
- Macmillan
- Faculty for Homeless & Inclusion Health
- British Liver Trust
- Association of Directors of Public Health
- British Chambers of Commerce
- Institute of Directors
- Royal College of Nursing
- Mind
- UK Public Health Register

# Appendix 1

## Board Members

Between 1 January and 31 December 2018

### Officers

		Trustee attendance at Board meetings
President	MIDDLETON, John	5 out of 5
Vice President for Policy	WATKINS, Stephen (June to Nov 2018)	1 out of 2
Registrar	RAE, Maggie	5 out of 5
Academic Registrar	MASON, Brendan	5 out of 5
Assistant Academic Registrar	MATHEW, Suzanna (to Sept 2018) LATIF, Samia (from Sept 2018)	1 out of 3 1 out of 1
Treasurer	FRIEDMAN, Ellis	5 out of 5
International Registrar	SQUIRES, Neil	5 out of 5

### Elected Members

General Board Member	ATKINSON, Sue	4 out of 5
General Board Member	PACKHAM, Chris	2 out of 5
General Board Member	RUTTER, Harry	2 out of 5
Local Board Member, London	LLOYD, Susan	4 out of 5
Local Board Member, North West	EDWARDS, Dympna	5 out of 5
Local Board Member, South Central	TOFF, Penelope	5 out of 5
Local Board Member, West Midlands	SAUNDERS, Patrick	5 out of 5
Local Board Member, SE Coast	TAHZIB, Farhang	4 out of 5
Local Board Member, East Midlands	CHALLENGER, Alison	5 out of 5
Local Board Member, East of England	BROADBENT, Joanne	4 out of 5
Local Board Member, North East	SANGOWAWA, Toks	4 out of 5
Local Board Member, Yorkshire & the Humber	HOOPER, Judith	2 out of 5
Local Board Member, South West	GRAY, Selena	3 out of 5
Local Board Member, Scotland	CAVANAGH, Julie	4 out of 5
Local Board Member, Wales	JONES, Angela	3 out of 5
Local Board Member, Northern Ireland	MAIRS, Andrew(to June 2018) FARRELL, Brid (from June 2018)	1 out of 2 3 out of 3

### Representatives of RCPs

RCP London	Vacant	
RCP&S Glasgow	CRIGHTON, Emilia	4 out of 5
RCP Edinburgh	KROESE, Mark	4 out of 5

### Co-opted Members

Chair, Specialty Registrars Committee	BLOOMER, Ellen (to March 2018) WALMSLEY, Emily (from April 2018)	1 out of 1 3 out of 3
Chair, Academic & Research Cttee	BRAYNE, Carol	2 out of 4

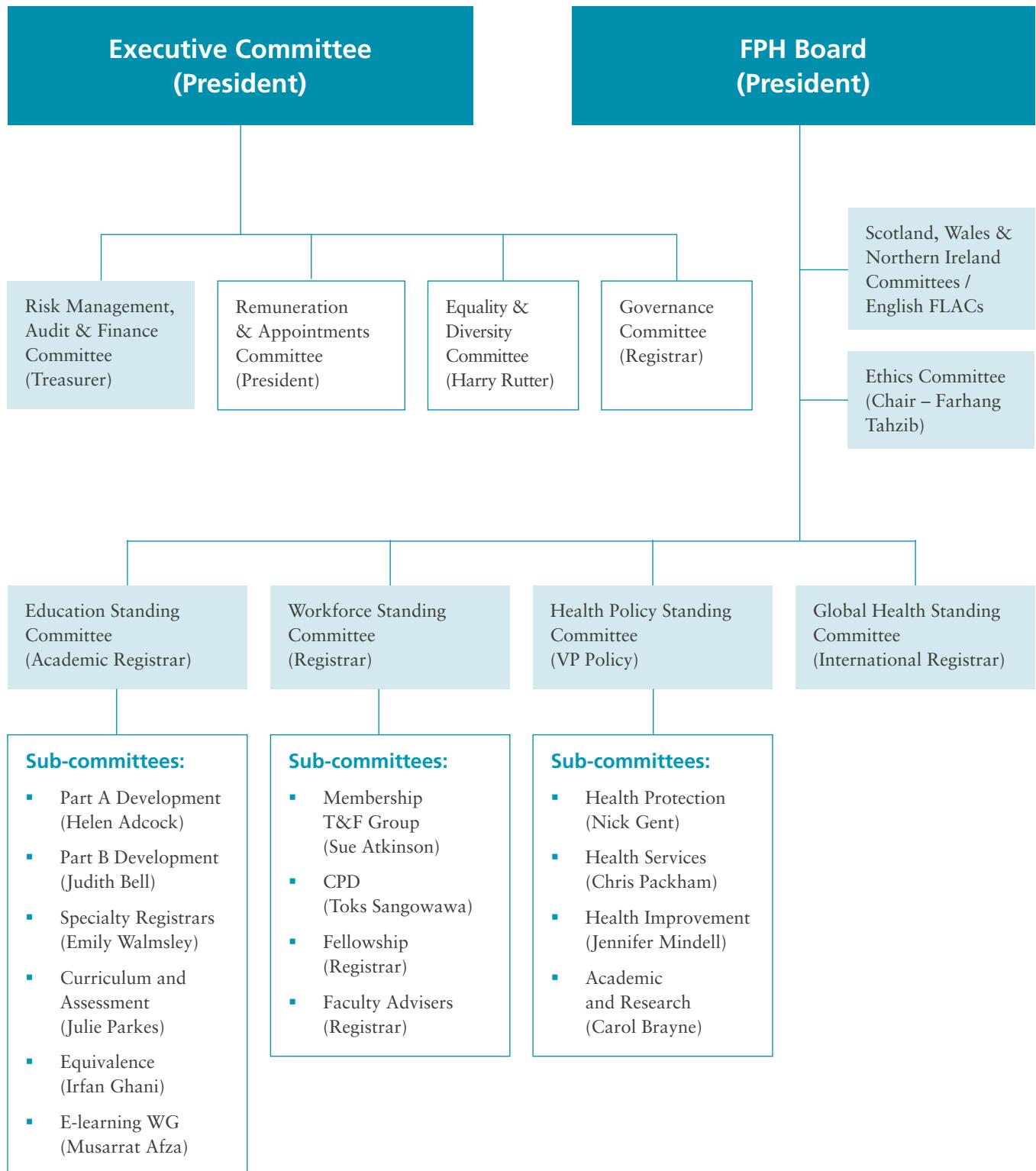
### Observers and Lay Members\*

Risk Management Adviser	WILLIAMS, David
Responsible Officer	WOODHOUSE, John
Representative, Association of Directors of Public Health	FENTON, Kevin
Representative, Public Health England	FENTON, Kevin
Lay Member	CARRIER, John
Lay Member	HORMOZI, Neda

\* Observers and lay members are not FPH trustees.

# Appendix 2

## FPH committee structure – December 2018



### Key:

- Standing Committees – chair shown in brackets
- Sub-committees and groups

### Special interest groups

Details of all FPH special interest groups, which report to a number of the standing committees and sub-committees, can be found under the policy section on the website.



**FACULTY OF  
PUBLIC HEALTH**

**For further information please contact:**

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