

Charity Registration No. 1125949
OSCR Registration No. SC040750

Royal Society for Public Health
Report and financial statements
for the year ended 31 December 2017

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The Trustees' Annual Report

Reference and administrative details

Charity No: 1125949 England & Wales
SC040750 Scotland

Principal and registered office: John Snow House
59 Mansell Street
London E1 8AN

Trustees: Members of the Council at 31 December 2017

Mr Phillip Woodward	- Chair
Dr Nigel Carter	- Treasurer
Dr Lisa Ackerley	- from 1 December 2017
Professor Kate Ardern	
Professor Sian Griffiths	
Ms Anne Heughan	- from 1 March 2017
Mr Vij Randeniya	
Ms Wilma Reid	- from 14 September 2017
Dr Fiona Sim	- left 14 September 2017
Mr Joe Stringer	
Miss Jill Turner	
Mr Tony Vickers-Byrne	
Professor Carol Wallace	
Professor Derek Ward	- from 14 September 2017
Mr Malcolm Wright	

Bankers: HSBC Bank
Wimbledon Branch
5 Wimbledon Hill Road
London SW 19 7NF

NatWest Bank
Commercial Banking
Mid- Town CBC
2 Waterhouse Square
138-142 Holborn
London EC1N 2TH

Auditors: haysmacintyre
10 Queen St. Place
London
EC4R 1AG

Legal Advisors: Hempsons
40 Villiers Street
London WC2N 6NJ

Pension Advisors: Foster Denovo
Ruxley House
2 Hamm Moor Lane
Addlestone
Surrey KT15 2SA

Investment Advisors: Rathbones Investment Management Ltd
1 Curzon Street
London
W1J 5FB

Report of the Trustees for the year ended 31 December 2017

The Trustees are pleased to present their report together with the financial statements of the Charity for the year ended 31 December 2017. The financial statements have been prepared in accordance with the accounting policies set out in note 1 to the accounts and comply with the charity's Royal Charter, applicable law and the requirements of the Statement of Recommended Practice (SORP) applicable to charities preparing their accounts in accordance with the Financial Reporting Standard in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015).

Structure, Governance and Management

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

New trustees are appointed through a recruitment campaign and occasionally on the basis of recommendation depending on the experiences and skills needed. RSPH members are always notified of Council vacancies and encouraged to apply. New trustees complete an application form and letter and short listed candidates are interviewed by 2 or 3 members of the Nominations and Governance Committee. New trustees are given a formal induction process with senior staff and provided with all the appropriate governance materials including key guidance for trustees from the Charity Commission.

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

The RSPH reviews its long term strategy regularly with trustees and the executive management team. It operates three standing sub-committees, 'Audit and Risk', 'Nominations and Governance' and 'Qualifications Governance' to provide support to the Council on issues defined by terms of reference. It also creates task and finish groups to explore specific and timely issues when necessary. The trustees meet four times per year as a full trustee group as well as at the AGM.

The RSPH is managed on a day-to-day basis by an Executive Management Team led by the Chief Executive. To facilitate effective operations, the Chief Executive has delegated authority, within terms of delegation approved by the trustees, for all operational matters including finance and employment. *The current trustees are listed on page 2 of this report.*

Key Management Personnel

The Council of trustees and members of the Executive Management Team comprise the key management personnel of the Charity in charge of directing and controlling, running and operating the RSPH on a day to day basis. All trustees give of their time freely and no trustee received remuneration in the year for their responsibilities as part of the Council. One trustee received remuneration as Editor of Public Health journal, the details of which have been declared under the related party disclosures. The Executive Management Team members are the Chief Executive, Director of Membership & Educational Services, Director of External Affairs and Marketing, Director of Finance & Corporate Resources, Director of National and Regional Programmes, Director of Qualifications, and Director of Development and Innovation.

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

Risk Management

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

The following framework is central to ensuring adequate risk assurance:

- regular identification and monitoring of major risks and development of action plans
 - a clear structure of delegated authority and control
 - regular review of internal control systems
 - regular summary reports on risk management to the Council
 - regular reports on risk management to the Audit & Risk Committee.
1. As an Awarding Organisation, the RSPH is regulated by the OfQual. It is important for RSPH to satisfy the regulatory requirements to maintain the accredited status of its qualifications. The Compliance Manager and other senior staff keep up to date with OfQual guidance on the Regulatory Conditions
 2. As any organisation across the world, the RSPH is also exposed to threats caused by cyber-attack. To mitigate this risk, the RSPH updates regularly the 'anti-virus' software which is on every device on our network. In addition to this, RSPH maintains a 'SPAM filter' system which is hosted externally by our IT advisors. We also regularly review the access controls of the RSPH computer files by staff members. We have in place a disaster recovery system in which our files are backed up at a remote location as well as on tapes. In an event of data loss, our data can be re-stored within a short period of time.
 3. Over the last few years, the Charity has achieved unprecedented media coverage for its campaigns on key public health issues. This has exposed the RSPH to reputational risk. The RSPH has established good media relationships and engages in robust research on topics by our dedicated and trained staff. The RSPH also engages Trustees and other experts in special campaigns.

Reserves Policy

The Executive Management Team has considered the RSPH's requirements and established a policy whereby the unrestricted general fund held by the RSPH should be approximately two thirds of the expenditure. The budgeted expenditure for the year is £3.5 million and therefore, the target reserve level is approximately £2.3 million and the management is confident that at this level they would be able to continue the current activities of the RSPH in the event of a significant drop in income. At the end of the year, the level of unrestricted general funds stood at over £2.5 million.

The Designated Funds of the Charity comprises the Building Fund, Bookshop Development Fund, Peter Gardener Fund and the Awards Funds. The Building fund was set aside for the repairs and maintenance for both of the Charity's properties and at the end of the year the balance of this fund was £135,258. There were no movements in the other designated funds during the year and at the end of the year total designated funds balance was £176,272. Please refer note 12 of the accounts.

The Charity has a few restricted funds and at the end of the year total balance of the funds was £178,751. Please refer note 12 of the accounts.

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Fundraising

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

Objects

The Trustees confirm that they have complied with the duty in section 4 of the Charities Act 2011 to have due regard to public benefit guidance published by the Charities Commission in determining the activities undertaken by the RSPH.

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

Financial Review

Funding for RSPH's work is generated by its core activities in education and training and also through the support of specific projects from charitable sources. It is also supported by income from the investment portfolio. The total income from all sources has increased modestly by 0.2% to £3,365,207. (2016- £3,357,203).

Total expenditure for the year has decreased by 3.5% to £3,542,334 (2016- £3,670,973) which includes an expenditure of £70,890 in relation to the following restricted funds;

Youth Health Champion project	£58,124
Awards Fund	£10,000
Philipp Family Foundation	£ 2,766

Total net expenditure before gains/(loss) on investments amounted to £177,127. (2016-expenditure £313,770). As per the requirements of the SORP, the RSPH depreciates its leasehold property from this year and an amount of £55,555 is included in the net results.

Providing qualifications is one of the main activities of the Charity which has generated an income of nearly £1.3 million for the year which is 27% more than the previous year. The other main activities; membership and publishing have generated an income of £625,750 for the year which is 1.7% higher than the previous year. In addition to this, the Charity has also provided other activities such as courses & conferences, accreditations services, training, regional and national projects and sold resources which have generated a combined income of £965,348 for the year.

Overall the Charity's net expenditure after investment gains and depreciation is £97,094 compared to a net expenditure of £182,126 in the previous year.

Investment policy and performance

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

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

The Investment Manager is required to report all transactions within fourteen days and submit a comprehensive performance report quarterly. The Manager is frequently invited to present his report to the Audit & Risk Committee. RSPH reviews the delegated arrangement with the Manager annually.

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RSPH also undertakes an annual review of its investment objectives which meet the requirements of the Financial Services Authority (FSA).

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

During the year, the RSPH acquired stocks with a value of £309,839 and disposed stocks with the market value of £404,805. The market value of the RSPH investment portfolio at the end of the year stood at £1,063,365. (2016- £1,078,298).

At the end of the year the unrealised loss on opening market value stood at £63,124.

Review of Activities 2017

The Royal Society for Public Health is a multidisciplinary organisation dedicated to the promotion and protection of collective human health and wellbeing and has a long history of providing information, education, advocacy, training, qualifications and innovation to improve the public's health and wellbeing

2017 represented the fourth year of our strategic plan (2014-19) and significant progress was made in all our activities which support our vision that '*Everyone has the opportunity to optimize their health and wellbeing*'. RSPH was particularly successful in building its qualifications portfolio, reaching out internationally through our webinars and journals and educating the public and influencing policy on a range of challenging issues for the public's health. Our work in 2017 contributed to our 3 strategic goals:

- Enabling communities to make the most of their health and wellbeing
- Developing and supporting networks of individuals and organisations concerned with improving and protecting the public's health
- Being the trusted, independent voice for the public's health and wellbeing

All the activities of the RSPH support at least one of the strategic goals and are reported on regularly both through the management of the annual operational plan by the Executive Management Team and reports to the Council.

The external environment for 2017 has been challenging for public health overall, not least due to the funding reduction to the public health grant for local authorities in England and austerity policies across the UK. There has also been a national focus on the financial predicament of the NHS and we believe too little investment and discussion on the benefits of prevention. Despite the difficult external environment, including our planning for leaving the European Union, we were able to make inroads in a number of areas effecting the public's health and wellbeing during 2017.

Key Achievements 2017

- The launch of our #StatusofMind report on Social Media and Young People's Mental Health which started an international discussion on this emerging issue for the public's health
- The downloads for our growing international, peer -reviewed journal, *Public Health* passed the half a million mark.
- We rolled out the preventive mental health programme, Connect 5 with support from Health Education England
- We developed new qualifications to support the protection and improvement of the public's health and increased our outreach adding new centres.
- We held our second successful National Health and Wellbeing Awards with increased participation in all categories.
- We created the first ever Healthy Living Pharmacy Register supported by Public Health England
- Building on our championing of the wider public health workforce, we launched a report on the role of the Accredited Registers Workforce with the Professional Standards Authority

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- The publication of 'Everyday Interactions', a tool for evaluating the impact of the wider workforce and the development of Alcohol Health Champions in Greater Manchester
- We developed a number of significant new partnerships across a range of sectors.

RSPH Qualifications

The RSPH qualifications in health protection and health improvement continue to be standard for many local authorities and communities and we are known to be the awarding body for a large part of the sector. 2017 has once again seen an overall reduction in the certification of regulated qualifications which according to Ofqual is a drop of 10%. However, against this backdrop of declining certification the RSPH Awarding Organisation has seen an increase in candidate numbers to just over 57,000 for 2017. This has been most marked for our health improvement qualifications particularly for the Level 2 Award in Understanding Health Improvement which is due to the requirement for the qualification for the designation of a Healthy Living Pharmacy. We have also seen an increase in our food safety qualifications to over 30,000 students, despite the reduction in the category nationally. This has resulted in an increase in income to £1,289,767 for the year.

We introduced 12 new qualifications into our portfolio during the year with three being in the area of 'Nutrition for Health' and three in Food Safety and Hygiene. We also replaced several older qualifications for a newer version. We approved 38 new Centres to deliver our qualifications during the year and developed new style 'Centre Agreements' which have been signed by 490 centres.

As part of Ofqual's programme of '*systems planning and internal control for preventing, investigating and dealing with centre-based malpractice and maladministration*' Ofqual carried out an audit of RSPH between March and July 2017. No areas of concern requiring action were raised.

We have continued our focus on developing our learner management system, Quartz, to optimise its functionality to improve our customer service and enable more efficient use of staff time. We are rolling out e- certificates and direct candidate registration to all centres, as well as online payments. We have also increased our effectiveness by securing a new scanning provider, with improved turnaround times and data.

We have had regular meetings of our Sector Advisory Panels which include Asbestos, Food Safety, Health and Safety, Health Improvement, Nutrition and Pest Management. We have also collaborated in joint awarding body meetings to share best practice.

In a challenging climate for qualifications the RSPH has increased its market share and developed new offerings to improve and protect the public's health.

Championing the Public's Health

External Affairs: Policy and Campaigns

Our media success continued again this year with some exceptional campaigns championing the public's health and wellbeing. We continued our principle of including the views of the general public in all our policy papers and campaigns as we believe that alongside the evidence base for specific issues we need to reflect the voice of the public to develop increased public engagement and dialogue which in turn will support people to make healthier, evidence- based choices for their own lives.

We also increased our partnership working and collaborations in the development of our policy papers and campaigns and also carried forward some campaigns from previous years such as alcohol labelling and drugs testing at festivals.

We had positive engagement with many members of Parliament, Government Ministers, members of the Shadow Cabinet and senior civil servants across the year, including the Prime Minister's special advisor for civil society on our activity and on specific issues. We also had a meeting with the Scottish

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Public Health Minister as the Government there is setting its public health priorities and planning for a new public health agency.

In April we released our policy paper, *'Targeting the supply and sale of e-cigarettes to smokers'* bringing our position on vaping as a harm reduction pathway up to date with the current evidence. Our research for this investigation included an undercover investigation into the retail practice of UK vape stores which found that 87% of stores either knowingly or unknowingly were prepared to sell e-cigarettes to individuals who had never smoked or vaped. The paper received excellent media coverage, featuring in all the national newspapers and on BBC and Sky news.

In May, in preparation for the June general election, we set out our public health manifesto, a set of key policy recommendations to improve the public's health and wellbeing. Our call for more outdoor smoke free spaces received much press coverage, including our Director of External Affairs appearing on 'Good Morning Britain'.

In May we launched our most successful report so far, *#Statusofmind*, which examined both the positive and negative effects of social media on young people's health and wellbeing. We published the report with our Young Health Movement as the results of the report were based on a survey of 1500, 14 to 24 year olds who rated social media platforms for their effects on health and wellbeing. We produced a league table of social media platforms with Instagram as the most negative for young people's health and wellbeing and YouTube as the most positive. The report outlined that for many young people social media increased issues of depression, anxiety, sleeplessness, poor body image and cyberbullying. On the positive side it helped develop communities, friendships and increase health knowledge and self-expression. RSPH's report started an international dialogue on this emerging public health issue and we received over 1300 pieces of press coverage in the first week and 620 on the broadcast media. We were surprised at the international media interest in the report and it appeared on outlets across the globe in Russia, the US, Canada, Australia, China, India Columbia, Brazil, and all over Europe. The report has continued to spark media interest and we were regularly asked for interviews months later. We gave evidence at the Youth Select Committee's inquiry, 'A body confident future' with the recommendations from *#Statusofmind*

In June, we launched a policy paper in support of *'drug safety testing at festivals and nightclubs'* across the UK. This built on our 2016 report, *'taking a new line on drugs'* This also received some good publicity and helps us to continue to advocate for a health harms approach to drugs policy and practice. The media coverage included 470 press articles and 536 broadcast pieces including the Victoria Derbyshire show on BBC 2, BBC Breakfast, ITV Good Morning Britain, Channel 5 and Sky news.

We also worked with the British Medical Journal (BMJ) and the Faculty of Public Health (FPH) in engaging the Royal Colleges to support a health harms approach to drugs policy as we believe that this will help to change the mind of Government on this issue. We jointly held a dinner at the House of Lords to help engage the leadership of the Royal Medical Colleges.

At the end of June, we released, *'Size Matters, the impact of upselling on weight gain'* with our partner, Slimming World. The report looked at the extent to which upselling in fast food outlets, pubs and restaurants contributes to obesity. Our polling indicated that an individual is upsold 106 times a year and these practices can add 17k calories a year. This report too had excellent media coverage topping the BBC online news for several hours with interviews on the Radio 4 Today programme, ITV news and most national print and broadcast outlets. This report was discussed in the Scottish parliament the day after publication.

We are leading champions of the wider workforce for the public's health and we delivered a joint report with Public Health England called *'Everyday Interactions'*. This is a tool kit to enable members of the healthcare workforce to measure their impact in public health issues. Although the tool kit was aimed at health care workers, it can be tailored for other wider workforce groups. We also produced a report in partnership with the Professional Standards Authority, *'Untapped Resources'* highlighting the role of the Accredited Registers Workforce in supporting the public's health which was launched by Philip Dunne, Minister of State for Health.

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We continued our partnership with the Health Foundation and produced a dystopian short story competition which is aimed at reframing the dialogue around health and healthcare from treating illness to one which supports the promotion of wellbeing. The short listed stories were judged by a number of authors and the winning story, '*What you want*' was published in October and was also available on a dedicated website and with an audio recording by actor, Michael Sheen. The story will be translated into lesson plans and made available via the PHSE Association aimed at supporting teachers and young people to discuss the social determinants of health.

During 2017 we continued our partnerships with Unilever to report on their global education campaign on handwashing and launched a photography competition with the Royal Photographic Society to highlight public health across the lifecourse. The winning photograph appeared on the BBC and Guardian Websites.

Our reports have undoubtedly increased the voice of the public in health and wellbeing and increased the influence of RSPH across government and opinion formers.

RSPH Membership and Education Services

RSPH has a diverse membership from many professional groups who are involved in protecting and improving the public's health. In 2017 we increased our membership to over 6,000 and promoted our new Associate membership offer to students and members of the wider workforce. We developed a relationship with the University of Wolverhampton which has supported 80 student members. We conducted a member's survey which showed that our members are very satisfied with their RSPH membership and 86% of respondents said that we reflected their voice through our communications, policy and campaigns.

We now have four active special interest groups (SIG) for our members, Food Safety, Water, Arts and Health and Behaviour Change and they all have their own series of webinars which reach thousands of interested individuals world- wide. We regularly have between 300 and 600 people on the webinars. This is a way of providing up- to- date information and dialogue to members and others about public health issues. The SIG's also ran conferences in 2017 including Arts, Health and Dementia Conference in November. RSPH has supported the recommendations of the APPG Arts Health and Wellbeing Inquiry as one of the national champions for Arts and Health.

2017 was a difficult year for our Education Department due to the fall in demand for training as a result of the shortage of local authority funding. This affected all areas of our training work and in October we made the decision to restructure, bringing our Education team, including Accreditation into the Membership, publishing and conferences department. For the final two months of the year we created 'Membership and Education Services' under one Director.

During the year we developed e- learning courses in food safety and health improvement and created several train the trainer programmes for our new qualifications as well as creating new learning resources. We will focus on developing these aspects of training which suit the current market as well as developing integrated offers to institutions which include membership and CPD offers.

In 2017, we ran two full Diploma in Occupational Medicine Courses which are highly rated by the students and continue to have an international reputation.

RSPH Journals: Public Health, Perspectives in Public Health

During 2017 we saw continued growth in both our peer reviewed journals, *Public Health* published monthly by Elsevier and *Perspectives in Public Health* published bi- monthly by Sage. Downloads for *Public Health* are now over half a million with an increase in submissions to 1429 in 2017 (1245 in 2016) and up from just 120 in 2000. Over 90% of the submissions are international and our readership is 21% from the UK, 23% from the USA and 57% from all parts of the world, Due to the increase in activity we now have 8 associate editors of the journal to complement our 2 Editors. The impact factor for *Public Health* is now 1.538. For the journal we spoke at the World Federation of Public Health Associations conference in Melbourne and also ran a water webinar there for Australian colleagues. We also

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presented at the American Public Health Association meeting in Atlanta with the former US Surgeon General on behalf of *Public Health*.

Perspectives in Public Health is our member's journal and has many more articles on public health interventions and research into practice. In 2017 we had 204 submissions, a 13% increase from 2016 and almost 131k downloads. We had three special issues during the year including, the Built Environment, Food Safety and Tackling Obesity and Arts and Health.

Development of a Social Investment Fund

In 2016 we spent time and effort in developing a proposal to the Access Foundation to create a social investment fund for the public's health as we believe that there are many small charities and social enterprises who need alternative funding vehicles and potential bridging finance. We passed through many stages of the assessment process but were turned down at the final meeting. This was a disappointment as we believe that RSPH has the appropriate knowledge of the marketplace due to our Health and Wellbeing Awards as well as our other initiatives.

We then took advice from a number of experts in social investment and we approached the Esmée Fairbairn Foundation with a proposal to explore the need for a social investment blended fund in the West Midlands. We believed that taking a regional focus would provide more detailed information. The Foundation funded our feasibility study for the West Midlands Fund and we conducted this work during the last three months of 2017. We intend to build on this work and the regional approach during 2018.

End High Cost Credit Alliance

During 2017 RSPH became involved in the development of the 'End High Cost Credit Alliance' founded by actor, Michael Sheen. This builds on our work from Health on the High Street in 2015 which highlighted pay day lenders as the most unhealthy retail outlet on the high street and our work on tackling health inequalities and the social determinants of health. The CEO of RSPH chairs the UK Alliance which includes around 30 prominent organisations and individuals who are concerned to develop alternatives to high cost credit offers. There were 2 main meetings of the Alliance during 2017 and we were commissioned to produce a report on the impact of debt on health and wellbeing for 2018.

Young Health Movement

RSPH has a focus on young people to increase their understanding of health and wellbeing. In 2017 we expanded our young health champions training and qualifications and held surveys and focus groups to understand more about the needs of young people in relation to health. This led to the successful #Statusofmind report jointly branded RSPH/ YHM. In July we held a well- attended youth health conference at Google's headquarters with a focus on mental health and the workforce. The Young Health Movement initiative is also part of a collaborative research project in Europe with Streetgames funded by Erasmus. The research looked at the characteristics and effectiveness of peer programmes. RSPH staff conducted the research and presented at a conference in Malta.

We increased our training of young health champions with a special focus on young people in disadvantaged areas, young carers and those in young offender institutions through support from Public Health England. We have been working towards the integration of our YHC training into PHSE programmes in schools. We refreshed the YHC qualification during the year so that it is closely aligned with the education curriculum and we have developed partnerships with various technical colleges to support YHC as a careers pathway for those considering a career in health and social care.

Health Living Pharmacy Register

RSPH was commissioned by PHE to develop the first Health Living Pharmacy Register and by the end of 2017 we had registered 8,250 pharmacies in England, 85% of community pharmacies. This was a massive undertaking for staff as we registered almost 6,000 pharmacies in just a few weeks. An HLP can only be on the register if they have met a certain standard and we organised visits to a percentage of pharmacies each year to check on standards and to advise on improvement. This is a good

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opportunity to ensure standards are maintained and to communicate issues related to the public's health to community pharmacy. We were pleased that PHE agreed to support the development of the Register during 2018.

Preventing Mental Health Problems: Connect 5

Mental health has long been a priority for RSPH and resilience and improving mental wellbeing is built into our training and qualifications. In 2017, we worked with Health Education England to roll out Connect 5 (the mental wellbeing programme). We implemented a train the trainer programme for Connect 5 which was rolled out across the North West of England. There was also demand for us to deliver this programme in other areas. The programme was well evaluated which has led to its adoption in more areas. We would like to create a Connect 5 Network with regional hubs during 2018.

RSPH National Health and Wellbeing Awards

We introduced a new process for our Health and Wellbeing Awards this year which resulted in a 17% increase in the number of applicants. We have expert panels of assessors in 6 categories and the finalists of all categories are presented to the Department of Health for the Public Health Ministers Award. This was the second year of our evening awards and we had over 300 people attending a gala celebration in Canary Wharf. Our Vice President, Lord Patel of Bradford was master of Ceremonies alongside TV presenter, Natasha Kaplinsky. We had excellent feedback from the evening which included two special commendation awards from Public Health England (PHE). This event celebrates the excellent work being done at grass roots level across the country and is a way of sharing excellent practice.

Enabling change and development at RSPH

In the Autumn we made the decision to consolidate our marketing into a central marketing function under the leadership of the Director of External Affairs, this should help us to better promote our services. We also updated our website which have been well received and is easier to navigate. From the summer of 2017 we began our planning for the new GDPR regulations which come into force in May 2018. This has involved a review by all departments and the development of an action plan under the IT Manager. We have created a cross organisation digital group which ensures that our work is more integrated across all platforms. We are upgrading the Customer Relationship Management system and extending it across the organisation which involve

In April we held facilitated focus groups with staff to help us develop our People Strategy for RSPH and to highlight where we need to improve. Overall we found that staff were positive about working for RSPH but we learned that we can improve our internal communications, collaboration across teams and develop more standardised recruitment processes. We made the decision to recruit an HR advisor for 2018 to take forward a proactive approach to staff development.

Rental Income and Room Hire

The RSPH is hugely privileged to own the long leasehold interest of the premises at 28 Portland Place. The building is mainly used in pursuance of RSPH charitable activities. Most of our courses and conferences and Trustees meetings are held here. RSPH also sub-lets the excess office space in the building to other Charities who are working in the public health sector. Conference rooms on the ground and first floors are hired out to other organisations to utilise the spare capacity and managed for this purpose by an external professional venue management company with whom we have a commercial contract.

The RSPH also uses its offices at John Snow House to accommodate training and meeting rooms for its own use. Spare capacity of the rooms is hired out to other organisations.

Plan for the future

We are coming to the end of our current strategic plan and during 2018 the trustees and senior staff will develop a three-year plan, (2019-2021) for the organisation. We recognised that with leaving the EU in 2019, there are many areas that are uncertain, including the funding of public health post 2020, so a 3-year plan will be more feasible.

As part of our post Brexit activity and in a bid to promote health and wellbeing more broadly, the CEO of RSPH is one of 14 Commissioners on the 2 year, Food, Farming and Countryside Commission, funded by the Esmée Fairbairn Foundation and run by the RSA. The commission is bringing together evidence, talking to stakeholders and the public to recommend positive solutions to the uncertainties of food, farming and the environment when we leave the EU and we want to propose solutions that have a positive effect on health and wellbeing. We will also work with a range of organisations to advocate that the public's health is not harmed by our leaving the EU.

During 2017, we won a grant of just under half a million dollars from the Robert Wood Johnson Foundation (RWJF) based in Princeton, New Jersey, USA to repeat our Health on the High Street survey again in 2018 and adapt this for the USA. The Robert Wood Johnson Foundation is the largest, independent health funder in the USA and in 2018 we will work with them and our partners the University of California in Los Angeles (UCLA) and a UK and USA Advisory Boards to implement this programme

We will also continue to develop our special interest groups and increase our associate membership through our championing, training and supporting the wider workforce for the public's health. We will extend our webinar programme across the organisation. We aim to develop at least 3 new Corporate Partnerships and recruit sponsors for our Awards evening. We will expand our Accreditation services and our e-learning resources to better support all sectors in improving and protecting the public's health.

In 2018 we will produce a report on the potential of exercise professionals to improve health and wellbeing with UKactive and develop a report with the Gulbenkian Foundation on Active Ageing. In developing the wider workforce we will explore the importance of faith on health and wellbeing.

We will build on our 2017 #Statusofmind report on social media and young people's mental health by setting up the first All Party Parliamentary Group on the subject and work with Facebook on health issues. We will build on our 'taking a new line on drugs' report by encouraging the medical royal colleges to publicly back the health harms approach to drugs.

We will launch our report on alcohol labelling looking at the public's preferred labelling options for alcohol and we will also launch a report on the impact of debt on health as part of our commitment to the End High Cost Credit Alliance. We will also work with the Alliance on finding new financial alternatives for those most vulnerable to high cost credit.

During 2018, we will pursue our ambition of developing a social investment blended fund for the public's health in the West Midlands and increase our footprint of activity in this part of the country. We have many strong relationships in this region which we hope will be developed into programmes across the coming year. We will extend our work with the West Midlands Fire service as an exemplar of the wider workforce.

We aim to develop a version of Connect 5 for a younger audience and align this with the youth health champion qualification and programmes delivered in schools. We know there is a major need to support the prevention of mental health problems with children and young people.

RSPH will continue to expand our work in supporting mental wellbeing by rolling out 'Connect 5', the nationally recognised training programme across England and developing a hub system to support trainers across the country. We will also extend our visits to healthy living pharmacies across England as part of our development of the HLP register and to ensure quality control across those on the register.

To implement our People Strategy, we will recruit an HR advisor to ensure that we can continue to recruit and retain the best possible staff for RSPH and that we invest in their development.

Statement of Trustees' responsibilities

The Trustees are responsible for preparing the Annual Report and the financial statements in accordance with applicable law and regulations. Charity law in England and Wales and the Royal Charter require the Trustees to prepare financial statements for each financial year. Under the law the Trustees have elected to prepare the financial statements in accordance with United Kingdom Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). The financial statements are required by law to give a true and fair view of the state of affairs of the Charity and of the surplus or deficit for that period. In preparing those financial statements the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles of the Charities SORP;
- make judgments and estimates that are reasonable and prudent;
- follow applicable accounting standards, and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the company will continue in operation.

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

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



Professor Carol Wallace
Trustee

INDEPENDENT AUDITORS' REPORT TO THE TRUSTEES OF THE ROYAL SOCIETY FOR PUBLIC HEALTH

Opinion

We have audited the financial statements of Royal Society for Public Health for the year ended 31 December 2017 which comprise the Statement of Financial Activities, the Balance Sheet, the Cash Flow Statement and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

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, and section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the 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's trustees as a body for our audit work, for this report, or for the opinions we have formed.

In our opinion, the financial statements:

- give a true and fair view of the state of the charity's affairs as at 31 December 2017 and of the charity's net movement in funds for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Charities Act 2011 and the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006.

Basis for opinion

We have been appointed as auditor under section 144 of the Charities Act 2011, and section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and report in accordance with the Acts and relevant regulations made or having effect thereunder. 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.

Responsibilities of trustees for the financial statements

As explained more fully in the trustees' responsibilities statement set out on page 13, 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

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

**Royal Society for Public Health
Report and financial statements for the year ended 31 December 2017
The Trustees' Annual Report**

aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

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

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 trustees are responsible for the other information. The other information comprises the information included in the Trustees' Annual Report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

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 and the Charities Accounts (Scotland) Regulations 2006 require us to report to you if, in our opinion:

- adequate accounting records have not been kept by the charity, or returns adequate for our audit have not been received from branches not visited by us; or
- sufficient and proper accounting records have not been kept; or
- the charity 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.



haysmacintyre

10 Queen Street Place
Statutory Auditors
London
EC4R 1AG

Date: 15 June 2018

haysmacintyre is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006

Royal Society for Public Health
Statement of Financial Activities
for the year ended 31 December 2017

		Unrestricted Funds	Restricted Funds	2017 Total	2016
		£	£	£	£
Income from:					
Donations and sponsorship		22,684	-	22,684	25,900
Charitable activities	3(a)	2,880,865	-	2,880,865	2,857,321
<i>Other trading activities:</i>					
Rental, room hire and other income		429,943	-	429,943	442,633
Investments		29,073	2,642	31,715	31,349
Total		3,362,565	2,642	3,365,207	3,357,203
Expenditure on:					
Raising funds					
Trading operations		376,881	-	376,881	397,000
Charitable activities		3,094,563	70,890	3,165,453	3,273,973
Total	3(b)	3,471,444	70,890	3,542,334	3,670,973
Net expenditure before gains/(loss) on investments		(108,879)	(68,248)	(177,127)	(313,770)
Investment gains and losses:					
Realised investment gain		143,157	-	143,157	94,324
Unrealised investment gain/(loss)		(63,124)	-	(63,124)	37,320
Net expenditure		(28,846)	(68,248)	(97,094)	(182,126)
(Decrease)/Increase in revaluation reserve		(300,000)	-	(300,000)	550,000
Net movement in funds		(328,846)	(68,248)	(397,094)	367,874
Reconciliation of funds					
Funds brought forward		11,023,754	246,999	11,270,753	10,902,879
Funds carried forward	12	10,694,908	178,751	10,873,659	11,270,753

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

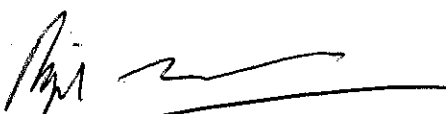
Royal Society for Public Health

Balance Sheet as at 31 December 2017

		2017	2016
	Note	£	£
Fixed Assets			
Tangible Assets	6	13,727,784	14,126,105
Investments	7	1,063,365	1,078,298
		<u>14,791,149</u>	<u>15,204,403</u>
Current Assets			
Stock		3,739	4,378
Debtors	8	554,707	474,059
Cash at bank and in hand		102,014	40,754
		<u>660,460</u>	<u>519,191</u>
Creditors: amounts falling due within one year	9	(1,201,744)	(859,972)
Net current liabilities		<u>(541,284)</u>	<u>(340,781)</u>
Total assets less current liabilities		14,249,865	14,863,622
Creditors: amounts falling due after more than one year	10	(3,376,206)	(3,592,869)
Net assets		<u>10,873,659</u>	<u>11,270,753</u>
Funds			
Restricted funds	12	178,751	246,999
Unrestricted funds			
General		2,465,200	2,394,838
Designated and revaluation reserve		8,229,708	8,628,916
		<u>10,873,659</u>	<u>11,270,753</u>

These financial statements were approved and authorised for issue by the Council on 16 June 2016 and were signed below on its behalf by;


Professor Carol Wallace
Trustee


Dr Nigel Carter
Trustee

Royal Society for Public Health
Statement of Cash Flows
for the year ended 31 December 2017

	2017	2016
	£	£
Cash flows from operating activities (see note below)	155,939	(242,289)
<i>Cash flows from investing activities</i>		
Dividends received	31,715	31,349
Proceeds from sale of investments	404,805	441,942
Purchase of investments	(309,839)	(215,005)
Purchase of fixed assets	(11,505)	(75,136)
Net cash provided/(used) by investing activities	<u>115,176</u>	<u>183,150</u>
<i>Cash flows from financing activities</i>		
Repayments of borrowing	(209,855)	(155,710)
Net cash used in financing activities	<u>(209,855)</u>	<u>(155,710)</u>
Cash and cash equivalents at the beginning of the year	40,754	255,603
Cash and cash equivalents at the end of the year	<u>102,014</u>	<u>40,754</u>

Notes to the Cash Flow Statement	2017	2016
Reconciliation of Net Movement in Funds to Net cashflow from operating activities	£	£
Net (expenditure) for the year	(97,094)	(182,126)
Depreciation	109,826	112,256
Dividends and interest	(31,715)	(31,349)
Net gain on investments	(80,033)	(131,644)
(Increase)/decrease in Debtors	(80,648)	1,230
Decrease in stock	639	-
(Decrease)/increase in Creditors	334,964	(10,656)
	<u>155,939</u>	<u>(242,289)</u>

Analysis of Cash and Cash Equivalents	2017	2016
	£	£
Cash at Bank and in hand	<u>102,014</u>	<u>40,754</u>

**Royal Society for Public Health
Report and financial statements
for the year ended 31 December 2017
Notes to the accounts**

1 Accounting policies

Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015) - (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102). The Charity meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

Going concern

Given the charity's level of free reserves available at the year end, the Trustees consider that the charitable company has adequate resources to continue in operational existence for the foreseeable future. Accordingly the financial statements have been prepared on a going concern basis.

Fund accounting

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

Income

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

The accounting treatment of membership income have changed from 'accruals' basis to 'receipts' basis from this year .

Expenditure

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

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

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

Charitable activities

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

Judgements and estimates

Judgements made by the Trustee, in the application of these accounting policies that have significant effect on the financial statements and estimates with a significant risk of material adjustment in the next year are deemed to be in relation to the valuation of investments and are discussed below.

**Royal Society for Public Health
Report and financial statements
for the year ended 31 December 2017
Notes to the accounts – cont'd....**

1 Accounting policies cont'd...

Operating leases

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

Pensions

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

Governance costs

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

Fixed assets

Tangible fixed assets, except freehold and long leasehold property, are stated at costs less accumulated depreciation. Depreciation is provided so as to write off the cost of tangible fixed assets over their estimated useful lives of:

- Leasehold building -117 years
- Computer hardware and software - 3 years
- Office equipment - 3 years
- Office furniture - 3 years

The lease on the property at 28 Portland Place expires in the year 2131. Historic cost of the property is £2,619,065 and this was revalued at £6.5 million in December 2014. Charity decided to adopt the policy to freeze the value of this building at £6.5 million and to depreciate it over the remainder of its lease term. The value of this property at 31 December 2016 was £9.75 million.

The freehold property at 59 Mansell Street, London E1 was acquired by Charity on 27 January 2011 for £3.35million. The Charity decided to adapt the policy of revaluation and the premises was valued at £7.35 million at 31 December 2017 and the Trustees believe that the current valuation reflects the realisable value of the premises under current market conditions. The trustees have agreed not to depreciate the freehold property as the residual value is deemed to be equivalent to its current value and is expected to be maintained in the state that it is currently in for the remainder of its life, depreciation would therefore be nil.

Investments

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

Goodwill

Goodwill is the difference between amounts paid on the acquisition of a business and the fair value of the identifiable assets and liabilities. It is amortised to the Income and expenditure account over its estimated economic life.

Debtors

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

Cash at bank and in hand

Cash at bank and cash in hand includes cash only.

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.

**Royal Society for Public Health
Report and financial statements
for the year ended 31 December 2017**

Notes to the accounts – cont'd....

1 Accounting policies cont'd...

Employee benefits

▪ **Short term benefits**

Short term benefits including holiday pay are recognised as an expense in the period in which the service is received.

▪ **Employee termination benefits**

Termination benefits are accounted for on an accruals basis and in line with FRS 102

2 Taxation

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

3 (a) Income - Charitable activities	Un-restricted General funds	Restricted funds	2017 Total	2016 Total
	£	£	£	£
Qualifications	1,289,767	-	1,289,767	1,015,066
Membership and publishing	625,750	-	625,750	615,066
Courses & conferences	330,815	-	330,815	266,677
Accreditation	111,000	-	111,000	171,300
Projects - Designated	41,673	-	41,673	-
Projects - Other	376,456	-	376,456	277,228
Training	78,859	-	78,859	191,886
Institute of Healthcare Management	-	-	-	303,126
Bookshop	26,545	-	26,545	16,972
	2,880,865	-	2,880,865	2,857,321

3 (b) Total Expenditure	Un-restricted costs	Restricted costs	2017 Total	2016 Total
	£	£	£	£
<i>Costs of generating funds</i>				
Rental and room hire costs	369,079	-	369,079	390,976
Investment managers fees	7,802	-	7,802	6,024
	376,881	-	376,881	397,000
<i>Charitable activities</i>				
Qualifications	1,136,522	-	1,136,522	1,010,847
Membership and publishing	591,396	2,766	594,162	550,003
Courses & conferences	369,199	10,000	379,199	306,126
Accreditation	96,952	-	96,952	139,027
Projects	305,163	58,124	363,287	196,900
Training	213,032	-	213,032	296,104
Institute of Healthcare Management	-	-	-	447,059
Bookshop	23,589	-	23,589	19,606
Policy and communications	358,710	-	358,710	308,301
Awards	-	-	-	-
	3,094,563	70,890	3,165,453	3,273,973
	3,471,444	70,890	3,542,334	3,670,973

**Royal Society for Public Health
Report and financial statements
for the year ended 31 December 2017**

Notes to the accounts – cont’d....

3 (e) Staff costs

	2017	2016
	£	£
Salaries	1,431,470	1,451,809
Social security costs	140,437	147,313
Pension and other benefits	108,388	107,307
Redundancy pay - fully paid	8,000	-
	<u>1,688,295</u>	<u>1,706,429</u>

The average number of employees during the year was:

	2017	2016
	Number	Number
Royal Society for Public Health	46	47
	<u>46</u>	<u>47</u>

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

	2017	2016
	Number	Number
£100,001 - £110,000	1	1
£60,000 - £70,000	2	2
	<u>2</u>	<u>2</u>

Key management personnel

Key Management Personnel are the Trustees and members of the Executive Management Team. Trustees are not paid any remuneration for their role as members of the Council(Board). As Editor of our journals, one trustee received remuneration and this is shown in the Related Party notes . The Executive management team members are the Chief Executive, Director of Development, Director of Membership & Events, Director of External Affairs & Marketing, Director of Finance & Corporate Resources and Director of Qualifications. The total employee benefits paid to the Executive Management Team were £469,523 . (2016 - £ 465,685)

3 (f) Related parties

Dr F Sim received £ 6,705 (2016: £7,269) for her work on the journal Public Health, in accordance with Article 4.3 of the Charter. Dr Sim's term of office as a trustee ended on 14 September 2017.

Travelling expenses totalling £5,004 (2016: £2,628) were reimbursed to 7 (2016: 5) trustees during the year to 31 December 2017.

Trustees liability insurance premium of £6,930 (2016-£ 6,898) was paid in the period.

Royal Society for Public Health
Report and financial statements
for the year ended 31 December 2017
Notes to the accounts – cont'd....

4 Operating costs

	2017	2016
	£	£
The deficit is stated after charging:		
- Depreciation charge:	109,826	112,256
- Auditors' remuneration	12,275	12,920
- Finance costs	90,530	99,939
	<u>109,826</u>	<u>112,256</u>

5 Commitments under operating leases

At 31 December 2017 the charity had annual commitments under non-cancellable operating leases as follows:

	2017	2016
	£	£
Operating leases - Equipment		
- Due within one year	17,731	5,449
- Due within 2 to 5 years	17,731	-
	<u>35,462</u>	<u>5,449</u>

6 Tangible fixed assets

	Freehold property £	Long leasehold property £	Computers & software £	Furniture and Office equipment £	Total £
Cost					
At 1 January 2017	7,650,000	6,500,000	209,341	234,125	14,593,466
Additions in the period	-	-	8,969	2,536	11,505
Revaluations	(300,000)	-	-	-	(300,000)
Disposal	-	-	(7,613)	(321)	(7,934)
At 31 December 2017	<u>7,350,000</u>	<u>6,500,000</u>	<u>210,697</u>	<u>236,340</u>	<u>14,297,037</u>
Depreciation					
At 1 January 2017	-	111,110	135,504	220,747	467,361
Charge for the period	-	55,555	47,290	6,981	109,826
Disposal	-	-	(7,613)	(321)	(7,934)
At 31 December 2017	<u>-</u>	<u>166,665</u>	<u>175,181</u>	<u>227,407</u>	<u>569,253</u>
Net book value					
At 31 December 2017	<u>7,350,000</u>	<u>6,333,335</u>	<u>35,516</u>	<u>8,933</u>	<u>13,727,784</u>
At 31 December 2016	<u>7,650,000</u>	<u>6,388,890</u>	<u>73,837</u>	<u>13,378</u>	<u>14,126,105</u>

At 31 December 2017 there were authorised capital commitments of £Nil (2016: £Nil).

Historic cost and the revaluation of freehold property

Historic cost of the freehold property, 59 Mansell Street, was £3.35million. At 31 December 2017, this property was valued at £7.35 million by Richard Moss of Cluttons, a registered RICS valuer.

Historic cost and the revaluation of long leasehold property

Historic cost of the leasehold property, 28 Portland Place, was £2,619,065. At 31 December 2014, this property was valued at £6.5 million by Anthony Martin of Cluttons, a registered RICS valuer. The charity decided to keep this building at this value for depreciation purposes. At 31 December 2016, the value of the building was £9.75 million.

Royal Society for Public Health
Report and financial statements
for the year ended 31 December 2017
Notes to the accounts – cont'd....

7 Investments

	2017	2016
	£	£
RSPH investment portfolio		
Market Value of Investments on 1 January 2017	1,078,298	1,088,389
Additions	309,839	215,005
Disposal proceeds	(404,805)	(353,049)
Net Investment Gains	80,033	127,953
Balance at 31 December 2017	<u>1,063,365</u>	<u>1,078,298</u>
Historic Cost of Investments	<u>832,637</u>	<u>801,624</u>

All investments are quoted on a registered UK stock exchange.

8 Debtors

	2017	2016
	£	£
Trade debtors	465,359	388,156
Other debtors	21,975	10,472
Prepayments	67,373	75,431
	<u>554,707</u>	<u>474,059</u>

9 Creditors: amounts falling due within one year

	2017	2016
	£	£
Other taxes and social security costs	65,873	57,776
Trade and other creditors	309,954	314,379
Bank loan	207,205	200,397
Accruals	44,717	58,343
Deferred Income	573,995	229,077
	<u>1,201,744</u>	<u>859,972</u>

Included within other creditors is an amount of £10,096 (2016: £10,096) of pension contributions to be paid across to scheme.

Deferred income-movements during the year:

	2017	2016
	£	£
Balance at 1 January	229,077	183,046
Amounts released to income in the year	<u>(229,077)</u>	<u>(183,046)</u>
New deferred income in the year	<u>573,995</u>	<u>229,077</u>
Balance at 31 December	<u><u>573,995</u></u>	<u><u>229,077</u></u>

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Notes to the accounts – cont'd....

10 Creditors: amounts falling due after more than one year

	2017	2016
	£	£
Bank loans	3,376,206	3,592,869
	<u>3,376,206</u>	<u>3,592,869</u>

On 27 January 2011, the RSPH obtained a loan of £4.4 million, mainly to facilitate the freehold acquisition of John Snow House and to repay the RSPH's existing loan of £500,000. This loan is secured by charges over the freehold and long leasehold properties. Term of the loan is 22 years from 27 January 2011 and the capital repayments have commenced from January 2013. The RSPH is paying interest at variable rate of base rate plus bank's margin of 2.15%. The RSPH obtained another loan of £40,000 on 5 April 2016 to fund the replacement costs of our computer servers and its peripherals. This is a short term loan for three years and interest is paid at a fixed rate of 4.19%.

<i>The loan is repayable</i>	£
- in two to five years	781,460
- in more than five years	2,594,746
	<u>3,376,206</u>
- in one year	207,205
	<u>3,583,411</u>

11 Analysis of net assets

	General Fund £	Designated Fund £	Revaluation Reserve £	Restricted Fund £	Total £
Tangible fixed assets	5,946,749	-	7,781,035	-	13,727,784
Investments	832,637	-	230,728	-	1,063,365
Current assets	263,764	217,945	-	178,751	660,460
Liabilities	(4,577,950)	-	-	-	(4,577,950)
	<u>2,465,200</u>	<u>217,945</u>	<u>8,011,763</u>	<u>178,751</u>	<u>10,873,659</u>

12 Post Balance Sheet Events

In December 2017 the Trustees took the decision to sell the property at 28 Portland Place and subsequently put it at the valuation received by an independent third party. Refer to Note 6 for information on cost and valuation for this property.

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13 Funds	1 Jan 17	Income	Expenditure	Gains, Losses & Transfers	31 Dec 17
	£	£	£	£	£
General fund	2,394,838	3,320,892	(3,393,687)	143,157	2,465,200
Designated funds and revaluation reserve					
Building Fund	179,849	-	(44,591)	-	135,258
Book shop Development Fund	14,953	-	-	-	14,953
Projects designated	-	41,673	-	-	41,673
Peter Gardner fund	2,916	-	-	-	2,916
Awards Fund - Unrestricted	23,145	-	-	-	23,145
Revaluation reserve	8,408,053	-	-	(396,290)	8,011,763
	<u>8,628,916</u>	<u>41,673</u>	<u>(44,591)</u>	<u>(396,290)</u>	<u>8,229,708</u>
Restricted funds					
Nigel Symonds	1,075	16	-	-	1,091
Harben Trust	78,050	1,171	-	-	79,221
Heggie fund	56,989	855	-	-	57,844
Thomas Latimer Cleave Memorial Trust	7,645	115	-	-	7,760
Awards fund	41,497	472	(10,000)	-	31,969
EMC Wilson Bequest Fund	853	13	-	-	866
Youth Health Champion (PHE) project	58,124	-	(58,124)	-	-
Phillipp Family Foundation	2,766	-	(2,766)	-	-
	<u>246,999</u>	<u>2,642</u>	<u>(70,890)</u>	<u>-</u>	<u>178,751</u>
Total funds	<u>11,270,753</u>	<u>3,365,207</u>	<u>(3,509,168)</u>	<u>(253,133)</u>	<u>10,873,659</u>

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13 Funds continued

The RSPH has designated certain funds as follows:

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

Projects designated - represents amounts set aside to support miscellaneous projects. .

Peter Gardner fund - represents amounts designated to recognise the work of Peter Gardner.

Major restricted funds of the RSPH as follows:

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

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

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

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

Philipp Family Foundation -to support the publication of a special issue of the journal Public Health in relation to the proceedings of the Health & Wellbeing conference.

Youth Health Champion scheme -to cover the qualification fees for the training of Youth Health Champions

Royal Society for Public Health
Statement of Financial Activities
for the year ended 31 December 2017

14 Comparative SoFA Under FRS102(SORP2015)

	Unrestricted Funds	Restricted Funds	2016 Total
	£	£	£
Income from:			
Donations and sponsorship	25,900	-	25,900
Charitable activities	2,795,746	61,575	2,857,321
<i>Other trading activities:</i>			
Rental, room hire and management fee income	442,633	-	442,633
Investment income	28,300	3,049	31,349
Total	3,292,579	64,624	3,357,203
Expenditure on:			
Raising funds			
Trading operations	396,011	989	397,000
Charitable activities	3,108,307	165,666	3,273,973
Total	3,504,318	166,655	3,670,973
Net income/(expenditure) before gains/(loss) on investments	(211,739)	(102,031)	(313,770)
Investment gains and losses:			
Realised investment gain	90,633	3,691	94,324
Unrealised investment (loss)	37,320	-	37,320
Net expenditure	(83,786)	(98,340)	(182,126)
Increase in revaluation reserve	550,000		550,000
Net movement in funds	466,214	(98,340)	367,874
Reconciliation of funds			
Funds brought forward	10,557,540	345,339	10,902,879
Funds carried forward	11,023,754	246,999	11,270,753

The results for the year were derived from continuing activities.

There were no recognised gains and losses, other than those passing through the statement of Financial Activities .

The above figures have been represented in FRS102 (SORP2015) format for the comparative period as required.