



**THE BRITISH  
PAIN SOCIETY**

EXPERTISE WHERE IT MATTERS

ANNUAL REPORT & ACCOUNTS 2018





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## INTRODUCTION

┌ The British Pain Society is the largest multidisciplinary professional organisation in the field of pain within the UK.

Membership comprises medical pain specialists, nurses, physiotherapists, scientists, psychologists, occupational therapists and other healthcare professionals actively engaged in the diagnosis and treatment of pain and in pain research for the benefit of patients. The membership comprised 1,114 members at the end of 2018.

The Society promotes education, training, research and development in all fields of pain. It endeavours to increase both professional and public awareness of the prevalence of pain and the facilities that are available for its management. The Society is involved in all aspects of pain and its management through the work of the Council, Committees, Working Parties, Special Interest Groups and via its Annual Scientific Meeting, publications and guidelines.

The British Pain Society is the British Chapter of the International Association for the Study of Pain (IASP) and is part of the European Federation of IASP Chapters (EFIC).

# OFFICERS, ELECTED COUNCIL MEMBERS, CO-OPTED COUNCIL MEMBERS & STAFF

Year end 2018

## Officers

Dr Andrew Baranowski, *President, Consultant in Pain Medicine*

Dr Arun Bhaskar, *President Elect, Consultant in Anaesthesia & Pain Management*

Dr Heather Cameron, *Honorary Treasurer, Physiotherapy Professional Lead*

Dr David Glyn Williams, *Honorary Treasurer Elect, Consultant Anaesthetist*

Prof. Roger Knaggs, *Honorary Secretary, Associate Professor in Clinical Pharmacy Practice and Advanced Pharmacy Practitioner - Anaesthesia & Pain Management*

Dr Ayman Eissa, *Honorary Secretary Elect, Consultant in Paediatric Anaesthesia & Pain Management*

## Elected Members of Council

Prof. Sam Ahmedzai  
*Emeritus Professor and Consultant in Palliative Medicine*

Dr Peter Brook  
*Consultant in Anaesthesia and Pain Management*

Dr Neil Collighan  
*Consultant in Pain Medicine*

Dr Ashish Gulve  
*Consultant in Pain Management*

Dr Tim Johnson  
*Consultant in Pain Management*

Dr Ramanarayanan Krishnamoorthy  
*Consultant in Anaesthesia and Chronic Pain Management*

Dr Sarah Love-Jones  
*Consultant in Pain Medicine & Anaesthesia*

Dr Zoey Malpus  
*Consultant Clinical Psychologist in Pain Management*

Dr David Pang  
*Consultant in Pain Management*

## Officers and Elected Members of Council



From left to right

Back row: Dr Ashish Gulve, Dr Peter Brook, Dr Tim Johnson, Dr Ramanarayanan Krishnamoorthy, Dr Sarah Love-Jones, Dr David Pang, Prof. Roger Knaggs, Dr Neil Collighan, Prof. Sam Ahmedzai

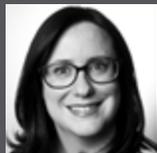
Front row: Dr David Glyn Williams, Dr Arun Bhaskar, Dr Andrew Baranowski, Dr Heather Cameron, Dr Ayman Eissa, Ms Jenny Nicholas (CEO)

Absent from photograph: Dr Zoey Malpus

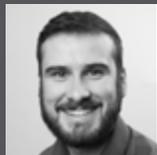
## Staff



Dina Almuli,  
Secretariat Manager



Jenny Nicholas,  
Chief Executive Officer



Dylan Taylor  
Membership & Events Officer

## Co-Opted Members of Council

Mr Neil Betteridge *Representative; Chronic Pain Policy Coalition (CPPC)*

Mr Kevin Bowers *Co-Chair, Patient Liaison Committee*

Ms Felicia Cox *Editor, British Journal of Pain & Representative; Royal College of Nursing*

Prof. Sam Eldabe *Chair, Science & Research Committee*

Mr Martin Hey *Representative; Physiotherapy Pain Association*

Dr Martin Johnson *Representative; Chronic Pain Policy Coalition (CPPC)*

Dr Barry Miller *Representative; Faculty of Pain Medicine of the Royal College of Anaesthetists*

Dr Rajesh Munglani *Editor, Pain News*

Prof. Andrew Rice *Representative; International Association for the Study of Pain (IASP)*

Prof. David Walsh *Chair, Scientific Programme Committee*

Ms Margaret Whitehead *Co-Chair, Patient Liaison Committee*

Dr Amanda C de C Williams *Representative; Science*

## Staff

Ms Dina Almuli *Secretariat Manager*

Ms Jenny Nicholas *Chief Executive Officer*

Mr Dylan Taylor *Membership & Events Officer*

## Officers, Elected Council Members and Co-opted Council Members



From left to right

Back row: Mr Martin Hey, Ms Margaret Dunham (Guest: Pain In Older People SIG Chair), Ms Felicia Cox, Dr Martin Johnson, Dr Amanda C De C Williams

Middle row: Dr Ashish Gulve, Dr Peter Brook, Dr Tim Johnson, Dr Ramanarayanan Krishnamoorthy, Dr Sarah Love-Jones, Dr David Pang, Prof. Roger Knaggs, Dr Neil Collighan, Prof. Sam Ahmedzai

Front row: Dr David Glyn Williams, Dr Arun Bhaskar, Dr Andrew Baranowski, Dr Heather Cameron, Dr Ayman Eissa, Ms Jenny Nicholas (CEO)

Absent from photograph: Mr Neil Betteridge, Mr Kevin Bowers, Prof. Sam Eldabe, Dr Zoey Malpus, Dr Barry Miller, Dr Rajesh Munglani, Prof. Andrew Rice, Prof. David Walsh, Mrs Margaret Whitehead



**THE BRITISH  
PAIN SOCIETY**

EXPERTISE WHERE IT MATTERS

## OFFICERS AND COMMITTEES' REPORTS





Dr Andrew Baranowski

## PRESIDENT'S REPORT

**As I demit from office this year, I shall depart from presenting purely the facts in this report but to also include some personal opinion.**

**Our mission statement is:  
to enable best pain management  
for all**

**And our vision:  
stop suffering from pain**

These are tall orders, but certainly the mission is achievable if we work together with the British Pain Society (BPS) as well as for our local services.

There have been many activities undertaken by the BPS over the past years aimed at working towards our Mission and Vision. However, for the Society to maintain its activities, that are proven to be effective, change National Policy and provide support and hope for those living with

chronic pain, we need investment for the future. Both money and commitment.

Approximately seven years ago, we identified that the biggest threat to our charitable activities and to our Society were financial. Over the years we restructured the way the Society works and the relationship with the Committees; the aim of the Society being prioritised as goal orientated with an ultimate goal of financial stability to achieve our Mission and to support our Vision.

During 2013 to 2015 we saw significant cost savings and a move towards a National Awareness Campaign and fundraising. Over the past three years we have tried to bring that to fruition, but have also worked on reviewing our membership benefits and membership rates, as well as the role of the BPS in supporting research and encouraging those early in their careers. Over the years we have maintained active links with trade and industry, inviting them to BPS / industry focus days and developing packages that offer greater benefit for greater investment at the Annual Scientific Meeting. Other models of support have also been looked at. The Annual Scientific Meeting

was modernised and we continued to support our publications, social media, media and our website.

Despite those actions, the 2018 Honorary Treasurer's Report and the Honorary Secretary's Report make gloomy reading. The ability of the BPS to continue to undertake activities that we consider important requires finances greater than our member registration fees cover.

Key and central to our activities is the Annual Scientific Meeting.

### **The Annual Scientific Meeting 2018**

The 2018 Annual Scientific Meeting (ASM) was held in Brighton. This was the 51st Anniversary of our ASM meetings. This year we decided, after taking soundings from our members and advice, to run a '2 plus 1 day' meeting. In retrospect this may have been the wrong decision as the two excellent meetings on the stand alone day were poorly supported. This resulted in a significant financial deficit. It has to be accepted that a new model had to be tried, but ultimately the advice we took did not stand up to how events turned out.

From the feedback from those that attended, both the stand alone one day meetings, and the more traditional two day meeting, the quality of the meetings and in particular the speakers, was praised and as always the skill and effort of the Scientific Programme Committee and

the Secretariat was acknowledged. The one day meetings were: 'Pain: Where are we and where are we going?' centred around Neuromodulation and led by Dr Arun Bhaskar and Dr Ashish Gulve; and 'Introduction to pain work for psychologists' led by Dr Nicholas Ambler and Dr Patrick Hill.

Our plenary speakers and topics for the main ASM were:

- Pat Wall Lecture; Pain in Mice and Man: Ironic Adventures in Translation, Prof. Jeffrey Mogil.
- Dr David Armstrong; What can sociologists contribute towards the understanding of pain?
- Prof. Kate Seers; Chronic pain - what's it like? Patient and professional perspectives.
- Prof. Eloise Carr; Leaning on the wind: reducing patient, professional and organisational barriers to pain management through education.
- Dr Amanda Williams; Pain after torture: progress, setbacks and prospects.
- Prof. John Cryan; A gut feeling about brain function: Microbiom as a key regulator of visceral pain.
- BPS Lecture: Chronic pain epidemiology: from population health to health policy; Prof. Blair Smith.



Key to the Society's work are the people that work with the Society and it is a pleasure to acknowledge old friends and new.

#### **Annual General Meeting 2018**

The AGM was held on 1st of May 2018 at the ASM in Brighton and results of the 2018 Council Elections were announced. Following a request for nominations, Dr Arun Bhaskar was elected unopposed as President Elect. Dr Ayman Eissa was elected as Honorary Secretary Elect and Dr Glyn Williams as Honorary Treasurer Elect in a vote by Council in February 2018. All three took up their Executive positions at the AGM.

Initially, there were four vacancies for Elected Council members this year. Since three members of the Elected Council vacated their seats for Executive positions, seven vacancies for Elected Council members became vacant. With eight nominations from members of the Society, an election was held.

It was a pleasure to welcome Dr Peter Brook, Dr Neil Collighan, Dr Ashish Gulve, Dr Ramanarayanan Krishnamoorthy and Dr David Pang as elected Council members for a first term, and Prof. Sam Ahmedzai and Dr

Sarah Love-Jones for a second term.

The British Pain Society has a commitment to supporting the multidisciplinary team and during 2018 our Executive Officers represented a range of interests that include physiotherapy, pharmacy, pain management programmes and specialised services. It has been noted that medical doctors this year have tended to predominate in the Elected Council members. There were many that expressed concerns that non-medics did not stand for Council. This is not an issue about there not being a system of proportional representation, but rather that for some reason non-medics did not feel that they could stand for election. This may reflect personal reasons or professional reasons (as more and more pressure is placed on us at work). We have had several reviews of our membership over the past few years and there is no simple answer. My suggestion remains that members need to work together and support and promote the various disciplines to stand for election. Where there are gaps in the skill base, disciplines or relevant specialities, Council will continue to co-opt members to ensure that we maintain a mandate to represent all of you involved in supporting those living with chronic pain.

#### **Honours and Awards**

Two BPS members were awarded Honorary membership at the 2018 AGM:

Prof. Kate Seers, for her outstanding influence on the careers of nurses in pain management and research; and

Ms Vidyamala Burch, the founder of Breathworks, for championing the practice of mindfulness for chronic pain.

It is always a pleasure to be able to acknowledge the significant contributions made by individuals in the field of pain medicine and research.

### **Committees**

I wish to express my thanks to all of those that Chair and work with our Committees;

Mr Kevin Bowers and Mrs Margaret Whitehead, Co-Chairs of the Patient Liaison Committee;

Dr Arun Bhaskar, Chair of the Communications Committee  
Professor David Walsh, Chair of the Scientific Programme Committee;

Professor Sam Eldabe, Chair of the Science and Research Committee;

Dr David Pang, Chair of the Charitable Aims sub-Committee;

Dr William Campbell, Chair of the Awards sub-Committee;

Ms Felicia Cox and Prof Roger Knaggs, Co-Editors of the British Journal of Pain;

Dr Rajesh Munglani, Editor of Pain News;

... as well as their respective Committee members and teams. Their work is greatly appreciated by all of us within the BPS and without their input the Society would not exist.

### **Special Interest Groups (SIGs)**

Our SIGs continue to be the cornerstone of our Society. 2018 saw the introduction of inviting SIG Chairs to Council meetings so as to widen Council's perspective and to solidify links between core activities and SIGs.

### **BPS efficiency savings and income generation**

A key value of the Society is:

#### **Invest for the future:**

so we have sustainable financial growth to invest in our mission.

Financial savings are key, but more importantly, we are having to look at new approaches to efficiency and income generation. The support of our members through their membership subscriptions is not enough for the Society to undertake all its activities that are key to its other values, which are:

#### **Support effective partnerships:**

So health and social care professionals work together to provide comprehensive support.

#### **Make pain visible:**

So pain and its consequences are on the national health agenda.

**Inform professional excellence:**

So professional standards are elevated through research, audit and education.

**Enable best patient care:**

So people in pain live their lives to the fullest.

Our Finance Committee continues to monitor the financial situation of the Society. It has been a particularly difficult year for them as their main efforts have had to be around financial savings. I am very grateful to Heather Cameron, Honorary Treasurer, for attention to detail and the control that she shows in difficult times and to Glyn Williams, Honorary Treasurer Elect, for his support as he prepares to take over this difficult area for the future.

Efficiency savings are never going to be enough. I am therefore very pleased that David Pang has taken over the Charitable Aims sub-Committee which is charged with the National Awareness Campaign and income generation through that source and other charitable sources. Also, Ayman Eissa, Honorary Secretary Elect who is working with industry, looking at collaboration and other financial possibilities and models.

Our business arm is well established and meets regulations around trading. This group was recently supported by Mark Martin who has been involved in investment and working with health care professional investments. He has, and

continues to, provide sound advice. He has met up with both those demitting and the new Executives to develop a business plan for 2019-20. Doug Justins, after years of service to the BPS, has stood down. Into 2019, the Directors of the BPS business will be: Dr Arun Bhaskar, Dr Joan Hester, Dr William Campbell, Dr Mark Martin and Prof. Richard Langford.

We continue to develop our plans around new Trustees and Ambassadors, but so far have not appointed any. Such appointments will need a change in our Memorandum and Articles, which will be presented at the 2019 AGM. In the meantime we continue to look for expertise to co-opt to Council and as always, please contact us if you are aware of individuals with skills who are happy to help.

The policy of preferential rates to attend meetings for BPS members continues. It needs to be noted that by being a BPS member, if a member attends the ASM and at least one Study Day, they immediately recover their membership fee in savings. As well as this financial benefit with the opportunity of world class education, membership also provides free copies of the British Journal of Pain and Pain News.

As always, much of our activities depend upon a few highly dedicated members. When Paul Wilkinson demitted as Vice President, his role was not taken up quickly and the National Awareness Campaign slipped behind its planned time line. David Pang has recently taken over as Chair



and we are back online but delayed. As always, the BPS hopes that the National Pain Awareness Campaign will not only raise the profile of those living with pain and the distress, disability and morbidity associated with pain, but also eventually bring in money as a secondary benefit that will enable the BPS to continue to act as a Multidisciplinary Team advocate.

Unfortunately, as I have indicated despite all this effort, the Society struggles to remain financially stable.

#### **Secretariat**

The Secretariat undertakes an amazing amount of work and provides a tremendous amount of support for the Society. We would like to thank Jenny Nicholas and her team, especially Dina Almulu and Dylan Taylor for all their work over the past year.

#### **The British Pain Society Website and the Media**

The past year has seen an expansion to our Media Team both in terms of members and activity.

Sam Ahmedzai and Stephen Humble continue to be extremely active as our Social Media leads. Both Facebook and Twitter activity have increased with a significant expansion in followers. If you have such accounts, please follow the BPS accounts.

The BPS has generally been reactive to media requests for

many years. Roger Knaggs, Alan Fayaz, Sam Ahmedzai and Stephen Humble, as the media team lead on reviewing all such requests, but we need to acknowledge the significant amount of effort and time invested by others. In particular Raj Munglani, who put in a huge amount of time and effort with the national media representing the BPS in the Cannabinoid debate.

#### **The Pain Consortium**

This is an alliance whose membership includes: the President of The British Pain Society, the Dean of The Faculty of Pain Medicine, Royal College of Anaesthetists, the Pain Lead for the Royal College of General Practice and the Chairs of The Chronic Pain Policy Coalition (CPPC). The meetings of the Consortium aim to ensure collaboration between these agencies, reducing overlapping work and ensuring we work on shared goals and outcomes. The BPS continues to represent the MDT and by its Patient Liaison Committee and Patient Reference Group, patients. As well as the President of the British Pain Society, a Chair of the Patient Liaison Committee will join them as a representative of the BPS, for the first time bringing a patient voice to those discussions.

#### **Commissioning for Specialised Pain Services, NICE (National Institute for health and Care Excellence) Guidelines and National activities**

The BPS, along with many other healthcare and patient representatives, have regular meetings and email contact



with the NHS England Clinical Reference Group (CRG), on Specialised Adult Pain Services (CRG – SPS). Dr Sarah Love-Jones is our representative on the Committee which is currently led by Dr John Hughes. Recently, NHS England consulted on the proposal to merge the Adult Pain CRG with Neurology. The BPS strongly opposed this and submitted a response to NHS England. I am pleased to advise that at the time of going to press with this report, the decision to merge the two was denied and the Adult Pain CRG continues as a separate CRG.

The BPS will continue to work with the CRG group to ensure that evidenced based treatments are available within the NHS but we will also be looking at how we can influence the implementation of best practice at all levels of care. Our joint working with the Pain Consortium will be key. The BPS strongly supports the levels of care approach of the CRG and supports self-management, primary care and community care pain services as well as speciality and highly specialised pain services.

Dr Paul Wilkinson, (Immediate Past Vice President of the BPS) continues to be Chair of the Professional Standards Committee of the Faculty of Pain Medicine, and Royal College guidance and support is key to the furtherment of pain medicine. We continue to work closely with the Faculty.

It has been agreed that the BPS will work with the CPPC and they shall lead on activity within Parliament.

We continue to be stakeholders for many of NICE's activities.

### **European Pain Federation EFIC**

The BPS is the UK chapter of the International Association for the Study of Pain and the European Federation of IASP Chapters (EFIC). The BPS President or representative sits on the EFIC Council, this year our President Elect Dr Arun Bhaskar has represented us. BPS membership gives automatic membership of EFIC and provides certain advantages. For instance, members of the British Pain Society are entitled to receive a complimentary electronic copy of EFIC's European Journal of Pain.

### **The Patient Liaison Committee (PLC)**

Margaret Whitehead and Kevin Bowers were appointed as Co-Chairs, and under their guidance we have seen the PLC Committee has expanded and strengthened. Together they brought a range of new skills that were highly valuable to the Committee and the Society. It is with sadness that both Kevin and Margaret have recently stood down for personal reasons. Their work over the past year was extremely well appreciated and it was an honour to work with them and see their professionalism.

### **The Annual Patient Seminar**

The Patient Liaison Committee held the Sir Michael Bond Lecture in 2018. The Sir Michael Bond Lecture may in future form part of the Annual Patient Seminar, which is already in preparation for 2019.

### **The Patient Reference Group**

Another major project for the PLC was to strengthen the Society's links and relationship with the Patient Reference Group. Margaret Whitehead took a lead on developing that relationship and with the introduction of GDPR regulations, restructured our interaction and commitment to this group.

### **The Annual Scientific Meeting 2019**

As I have mentioned, the ASM for 2018 was a 2 plus 1 day format. The first day, booked separately was aimed at providing specific education around two topics; Psychology Training and Neuromodulation. Unfortunately, these pre-meetings were not well supported and resulted in a financial deficit. As a consequence, we have returned to a three day meeting. Themes have continued as we work towards providing something for everyone over every day.

The venue was moved from Belfast to London because of financial concerns. I was disappointed that we could not visit Ireland, but the arguments for changing the size of venue and around access were compelling. Dr Arun Bhaskar took the lead on this venture.

The conference app was successful in both 2017 and 2018 and returns for 2019.

Bursaries continue to be available for 2019 for those on a salary lower than £36,000 per annum (providing certain criteria are met).

The social events were re-introduced a few years back and continue to see a large proportion of those attending the ASM attending the party. There continue to be discussions around whether the Society should support such activities. However, due to their success and the positive feedback that we receive about the importance of bonding and networking through social events, the Society will support a drinks reception at the 2019 ASM.

The President's dinner is held on a tight budget. It is often the only return that a plenary speaker has, and the only offer we have to thank our Honorary members and the members of Council for their work. As a consequence, this year we have held such an event again.

I would like to thank David Walsh and his excellent team for organising the scientific content of the meeting, as well as Arun Bhaskar and Ciaran Wazir for their work behind the scenes around logistics of moving the venue and trade.

### The National Awareness Campaign (NAC)

As I have indicated, NAC is now led by David Pang. The BPS Prospectus is now available should you wish to have a copy. It is designed to provide information to help support the giving of donations and to support the development of working relations between the BPS and others, such as industry.

**If you meet up with individuals keen to support pain management activities, then please use the prospectus to open up discussions on how they may work with the BPS.**

The NAC posters were launched at the beginning of 2017, again after a tremendous amount of work. There was a hiatus in publication during 2018 as leadership of the NAC changed. These posters are designed to be visually of high impact but to contain key messages. We hope that members and their friends will continue to circulate them and even use old fashioned technology printing them for public places. Let's spread the word.

During 2017-18 we have seen our posters reach further in Social Media.

**Position Statements:** have become an important part of the clinical and political environment. There are several members that take the brunt of this work, supported by Council. These statements help all our members to manage what can be difficult clinical and management / commissioning situations.

Our web site has been upgraded on several occasions to showcase what the Society and its members do. Position Statements are easy to find on the front page.

**There are BPS position statements on:**

- The medicinal use of cannabinoids in pain management
- Lidocaine plasters
- Press Statement on suspension of mesh surgery in NHS Hospitals.

By standing together with our colleagues, a more sensible view of cannabinoids was taken by NHS England. We look forward to constructive research in the future.

By highlighting the issue of pain when there are mesh complications, pain is now on the agenda for those bodies looking at mesh complications and what needs to be done in the future.

Lidocaine plaster prescription is still an issue, but at least members have clear support for their use from the BPS.

### **Publications**

During my time as President there have been several key publications. These always require a significant amount of time input and money over the years has been limited to support the process. During 2018 we published:

**Information for Adult Patients Prescribed Non-Steroidal Anti-Inflammatory Drugs (NSAIDs) for the Treatment of Pain (2018):** This patient information leaflet has been prepared by a working party led by the Faculty of Pain Medicine of the RCoA with representation from Pain UK, the Royal College of Nursing and The British Pain Society.

**The Assessment of Pain in Older People: UK National Guidelines (2018):** The British Pain Society along with the British Geriatrics Society and the Royal College of Nursing have produced new guidelines for assessing pain in older adults. You can read this in the March issue of Age and Ageing.

**Pre-registration Pain Education, a Practical guide to incorporating Pain Education into Pre-Registration Curricula for Healthcare Professionals in the UK:** is freely available on our website. Not only is it impressive to look at, but it is a seminal piece of work and will influence education for years to come.

**Outcome Measures:** This is a topic that has been discussed on many occasions over the years. The joint piece of work with the Faculty has produced a definitive guide on health service outcomes which can be used to benchmark services against one another and against targets, and to improve patient care. A must read for all our members.

**Pain News and the British Journal of Pain:** These are thriving. They are free to our members and again we are informed highly valued by our members. From 2018 BJP moved behind a pay wall for non-members. Felicia Cox and Roger Knaggs are the highly acclaimed Editors of the BJP and Raj Munglani took over as Editor of Pain News.

**UK Pain Messages:** First published a few years ago and updated in September 2017 are key facts and figures around Pain that are agreed by the BPS, the Faculty, the Chronic Pain Coalition and Pain UK. I mention them again as they are evidenced based and are still being used to inform national bodies, local commissioning and the press.

## To conclude

┌ The British Pain Society remains the only agency with a mandate to represent the Multidisciplinary team

through its membership which is drawn from medical doctors, nurses, psychologists, physiotherapists and scientists, as well as smaller representation from other disciplines. It has members in training and at the highly experienced side. The Society is grounded in the patient voice through the Patient Liaison Committee and the Patient Reference Group.

**From May 2019 we will have a new Executive team.** I know that they are passionate about the British Pain Society. However, the Society faces difficult times and the Executives need not only your support, but also time commitment so that we will work together to maintain a Society that provides great inspiration for our members and others who support Pain Management Patient Care.

┌ Finally, I now step down after 3 years of being President of the oldest Pain Society in the World and after the 50th celebration of the Annual Scientific Meetings.

I would like to extend a special THANK YOU to the Secretariat led by Jenny that has had to manage not only a full-time clinician, but my idiosyncrasies. Also thank you to my past Vice Presidents, Martin Johnson and Paul Wilkinson who demitted in 2018, and Honorary Treasurer Heather Cameron and Honorary Secretary Roger Knaggs who demit with me this year. Without their dedication, much would not have happened within the Society. There remain far too many others to say thank you to, past and present, both Elected and Co-opted Council members, members of the Patient Liaison Committee and many volunteers.



I wish our new President Arun Bhaskar, Honorary Treasurer Glyn Williams and Honorary Secretary Ayman Eissa all the best as I know they face difficult times as they move to the next stage of the British Pain Society's life. I have no words of advice for them, but

I do have a request of all involved in the management and support of those living with pain; it is all too easy to ask why something has not been done, but so much more helpful and supportive to do something. The Society, working on your behalf, relies on far too few volunteers and as health services cut back and we see the potential of further cuts in your services, please put yourself forward to support what the Society does on your behalf before it is too late.



Prof. Roger Knaggs

## HONORARY SECRETARY'S REPORT

The real strength of the BPS continues to be in its multidisciplinary membership and interest in improving pain management in the United Kingdom.

We are all members of professional bodies and groups within our own discipline but it is our interest and expertise in pain management that brings us together.

The British Pain Society continues to promote the needs of patients and views of healthcare professionals to numerous key organisations and stakeholders including: the Department of Health, Royal Colleges, the National Institute for Health and Clinical Excellence (NICE), the Medicines and Healthcare products Regulatory Agency (MHRA), the Faculty of Pain Medicine, the Chronic Pain Policy Coalition and the Association of Medical Research Charities.

### Membership

At the end of December 2018, the membership of the Society was 1,114; the major professional groups were 512 anaesthetists, 148 nurses, 101 physiotherapists, 125 psychologists, and 228 from other disciplines and specialties.

As has been reported in each of my annual reports, and in those of my predecessors over recent years, there continues to be a gradual reduction in membership numbers. Previous advice was that was largely due to people not renewing their membership as they were retiring or moving to a different speciality. However, since changing to twice yearly renewals by direct debit, membership numbers fluctuate more after each renewal. A sizeable number of people have not renewed their membership in November 2018. Work continues to consider how we can attract new members and retain loyal supporters.

### New Officers and Council Elections

Dr Ayman Eissa was elected as Honorary Secretary Elect and Dr Glyn Williams as Honorary Treasurer Elect in a vote by Council in February 2018. Following a request for

nominations, Dr Arun Bhaskar was elected unopposed as President Elect. All three took up their Executive positions at the AGM in Brighton in April 2018.

There were four vacancies for elected Council members this year. However, there were three current elected Council members vacating their seats for Executive positions, there were seven vacancies. With eight nominations from members of the Society, an Election was held.

In alphabetical order, the number of votes cast for each candidate: -

Sam Hjelmeland Ahmedzai	90 votes
Peter Nigel Brook	88 votes
Neil Collighan	82 votes
Ashish Gulve	62 votes
Ramanarayanan Krishnamoorthy	66 votes
Kiran Kumar Koneti	41 votes
Sarah Love-Jones	100 votes
David Pang	52 Votes

It was a pleasure to introduce Peter, Neil, Ashish, Ramanarayanan, and David as Elected Council members for a first term, and Sarah and Sam for a second term.

### Council

Every attempt is made to ensure that the Council reflects the multidisciplinary nature of the Society and pain management. Since the AGM in May 2018 there have been nine Elected

members and six Executive officers. In addition, there are a further twelve members who have been co-opted including Chairs of key BPS Committees and representatives from professional organisations that the Society regularly interacts with, including the Faculty of Pain Medicine, Chronic Pain Policy Coalition and RCN.

There were four full Council meetings during the year during which there was discussion of numerous topics that affect the Society including; media, clinical issues, educational issues, policy matters and many more. Outside of these meetings, there is further discussion addressing other matters and issues that arise unexpectedly.

The BPS also has a number of committees, to work in particular areas such as Education, Science & Research and the Scientific Programme Committee for the Annual Scientific Meeting. On an annual basis the terms of reference, agenda and plans for activity for each of these Committees is reviewed.

### Publications

After many years work, a seminal publication on pain education for pre-registration healthcare students was launched at the Annual Scientific Meeting in Brighton. From a truly multidisciplinary team of authors, this interprofessional guide contains core curriculum outcomes for pain education with advice and examples of how to implement this in practice.



In addition, several members of the Society contributed to several publications with other organisations, including an update of guidance for pain assessment in older people (British Geriatrics Society) and use of particulate steroids in interventional procedures (Faculty of Pain Medicine).

### **Pain News**

In May 2018, Dr Rajesh Munglani was appointed the new Editor of Pain News. The Society is very grateful to Dr Arusu Rayen for his long association with Pain News and particularly for the recent time during which he was Editor. Members will have noted that issues since Raj have been slightly thicker and contain articles of quite some depth and some even spread over several issues.

### **Study Days**

Three Study Days were held in 2018 and covered the controversial and topical issues of; pain in military veterans and pain in torture survivors; hypnosis in pain management and pelvic pain associated with implanted mesh. All were well received by delegates.

### **Special Interest Groups**

Special Interest Groups (SIGs) allow members with a specific interest to discuss and debate their interest in more depth. The SIGs demonstrate the multidisciplinary nature of the Society and it is important that they see themselves as being part of the Society. To this end, SIG Chairs have been invited to attend Council meetings on a rotational basis so that they can contribute to discussion with Council and help shape the future direction of the Society.

There continue to be 14 SIGs within the Society covering a wide variety of topics from Interventional Pain Medicine, Acute Pain, Headache, ICT and Pain Education. Summaries of SIG activities in 2018 can be found later in this Annual Report. I thoroughly recommend reading about their activities and consider how you may contribute.

### **And finally.....**

I would like to conclude my last Annual Report as Honorary Secretary by expressing my sincere thanks and appreciation to the many people who have supported me and provided very sound advice during my term as Honorary Secretary. In particular, I would like to thank all members of the Secretariat, especially our current Secretariat, Jenny, Dina and Dylan, who have ensured that we busy clinicians meet deadlines for providing information or responding. In addition, I would like to thank all members of Council during this time and Executives including my predecessor, Dr Martin Johnson, Presidents Dr William Campbell and Dr Andrew Baranowski, and Treasurer Dr Heather Cameron. It has been a pleasure to work with you all.

I wish my successor, Dr Ayman Eissa, well as he takes over the role at the Annual General Meeting in May 2019 and I am sure that over the coming months he will swiftly gain an understanding and working knowledge of Society procedures and running.

Finally, I would like to thank all members for their contribution and ongoing support of the British Pain Society over the last three years.



Dr Heather Cameron

## HONORARY TREASURER'S REPORT

As in previous reports, the Society continues to face challenging times from a financial perspective.

Although we continue to have healthy reserves, these have depleted and it is essential we see initiatives implemented in recent years come to fruition financially.

The Society's year end position shows a deficit of £153,997. Although this position is a considerable improvement from the midyear predicted deficit of £194,999, the deficit is significant and such deficits are not sustainable.

The most material single activity variance to budget remains attributable to the ASM delegate fees and trade income.

Significant effort has been made to reduce our costs with some success. However despite initiatives and much effort to increase income, these have not as yet realised significant funds.

A small increase in membership fees was applied across the board in keeping with inflation.

The Society continues to maintain an educational programme of Study Days and to host the Annual Scientific Meeting (ASM). Historically, surplus from ASM has contributed significantly to the running costs of the Society, however this surplus has reduced year on year over the past 7 years.

Efforts will continue to run a successful ASM, not only in scientific and educational terms, but also financially. Council however, are fully aware that reliance on the ASM to underwrite the costs of running the Society is not a sustainable business model going forward, and new income streams are actively sought.

### **Society Assets**

Accumulated reserves held by the Society are £830,653 of which £182,617 is in restricted funds, £161,563 being the sum of the Clulow legacy and interest.

The net SIG funds of £69,316 are designated within the Society accounts to further the activities of the specific SIGs.

The Society continues to apply a formal reserves policy to determine the way in which accumulated funds are utilised. Reserves are designated as restricted or unrestricted. Restricted funds are bequests and donations, including interest, which are to be used specifically for research into the causes and treatment of pain.

Unrestricted reserves are further divided into designated reserves and general funds. Designated reserves (£77,090) include SIG funds (£69,316) and Map of Medicine Pathways (£7,774). We no longer have any reserves in a designated ASM fund, therefore any future ASM shortfall will require to be covered from our general reserves.

In line with guidance from the Charity Commission, the Directors continue to review the Society's need for reserves and have made the following provision from unrestricted, undesignated funds: a sum of £300,000 to cover continuing function of the Society in the event of failure to maintain income; the remaining £270,946 to be used to further the aims and objects of the Society.

### **Special Interest Groups**

SIGs remain as essential part of the Society and Council continue to seek opportunities to support them to be active and financially viable.

### **BPS Pain Business Ltd**

In 2014, BPS Pain Business Ltd was incorporated as a trading subsidiary of the Charity. This was to help mitigate any potential VAT liability due to recent changes to practice. The trading arm also offers us opportunities for further income generation.

2018 is the fourth full accounting year for BPS Pain Business Ltd and you will note that the accompanying accounts are the consolidated accounts of the two entities.

Under the provision of an operating license, BPS Pain Business Ltd has contributed £18,913 to the office costs of the Society, and has been able to make an additional year-end corporate donation of £341 to the charity. The trading arm retains only a small operating fund of about £1,000.

### **2019 Budgets**

Sustainable finances remain an ongoing priority for the Society. Income from membership subscription is insufficient to run the Society and carry out the activities that Council and our members wish to undertake.

Moving forward, we have taken a cautious approach for budget setting in 2019, and are once again predicting a year end deficit. Efforts through 2019 will focus on mitigating size of this deficit through an increased focus on ASM and regional events. However for 2020 and beyond, we will require alternative income sources to sustain the activities of the Society at its current level.



Following feedback from members, we are proposing a revised and simplified membership structure which will be presented at our Annual General meeting in May 2019.

Work to develop new income streams for the Society is also underway with the anticipated appointment of Lay Council Members and a Fundraiser.

### **Thanks and good luck**

Reflecting on my three years as Honorary Treasurer, I am confident that we have put in financial control measures to reduce costs, however disappointed that the Society hasn't yet managed to secure new income streams despite phenomenal efforts from Council and in particular your outgoing President, Dr Andrew Baranowski. I have greatly appreciated Andrew's support throughout my tenure and above all his integrity and professionalism through difficult times.

On your behalf I would also like to take the opportunity to thank the Secretariat, in particular Jenny Nicholas for her dedication and our bookkeepers, Independent Examiners Ltd, particularly Viv Trump, for their excellent operational management of the Society's finances. The Society's accounts, independently examined by Sandison Lang Limited, are included in this Annual Report and are available on the Society's website.

Finally I would like to wish my successor, Glyn Williams well in his new role as Honorary Treasurer; I am confident of Glyn's ability to support and guide the Society moving forward.



Dr Arun Bhaskar, Chair

## Members Year End 2018

Professor Sam Ahmedzai, *Web Master / Emeritus Professor*

Ms Dina Almuli, *BPS Secretariat*

Dr Andrew Baranowski, *Executive Officer Link / Anaesthesia & Pain Management*

Dr Arun Bhaskar, *Chair / Anaesthesia*

Mr Kevin Bowers, *PLC Co-Chair / Lay Rep*

Ms Felicia Cox, *Editor of the British Journal of Pain / Nursing*

Ms Meherzin Das, *ICT SIG Chair*

Dr Alan Fayaz, *Media Team / Anaesthesia*

Dr Stephen Humble, *Social Media Lead / Anaesthesia*

Dr Ramanarayanan Krishnamoorthy, *Pain Medicine*

Dr Zoey Malpus, *Psychology*

Mr Pete Moore, *Lay Rep*

Dr Raj Munglani, *Editor of Pain News / Pain Medicine*

Dr David Pang, *Charitable Aims Committee Chair / Pain Medicine*

Dr Damien Smith, *Pain Medicine*

Mrs Margaret Whitehead, *PLC Co-Chair / Lay Rep*

## COMMUNICATIONS COMMITTEE REPORT

### Membership of the Committee

The membership of the Committee has changed in 2018 with Dr Alan Fayaz and Dr Krishnamoorthy joining the Committee. The Patient Liaison Committee was represented by the Co-Chairs Mrs Margaret Whitehead and Mr Kevin Bowers. Mr Bowers has since stepped down from the PLC due to health reasons and Mrs Whitehead also would be relinquishing her position due to personal reasons. The Communications Committee will be inviting the newly appointed Chair(s) of the Patient Liaison Committee to be part of it. Dr Raj Munglani joined the Communications Committee as Editor of Pain News. Mrs Casey Freeman who was looking after the affairs of the Committee left for a new post in May 2018, and Ms Dina Almuli took over the role after she returned from maternity leave. I will be finishing my term in May 2019 and Dr Krishnamoorthy will be taking over as Chair of the Communications Committee.

### Media Strategy and Social Media Presence

The past year has seen several high profile discussions happening in the media and various social media platforms. Prof Sam Ahmedzai, Prof Roger Knaggs, Dr Stephen Humble and Dr Alan Fayaz have been taking calls from the media with the support of the Secretariat (Mr Dylan Taylor) and have a system that ensures that all media requests are attended to within 24 hours. The debate on medical cannabis hit the headlines and the British Pain Society was pro-active in getting involved and voicing the concerns of the pain specialists; thank you to Dr Raj Munglani for being the voice on our behalf. There has been a significant increase in our Twitter profile and Facebook postings and we are looking at increasing it further. It was decided that Prof Sam Ahmedzai would continue as webmaster with the assistance from Dr Humble and the Secretariat.

### **Pain News**

Dr Arasu Rayen stepped down as Editor of Pain News in early 2018. Pain News has made rapid strides since Dr Raj Munglani has taken over as Editor-in-Chief and supported by Mrs Margaret Dunham as Associate Editor. There has been an influx of high quality articles and it has been agreed by the Communications Committee that despite advances in social media, Pain News still is the best form of disseminating information as it reaches a wider audience. There has been a proposal to make Pain News a bi-monthly publication or expand the page numbers to accommodate the increase in articles that are being submitted depending on the advice of the publishers.

### **British Journal of Pain**

The British Journal of Pain has grown in strength under the editorial leadership of Ms Felicia Cox and Prof Roger Knaggs. The indexed quarterly publication is not only attracting high quality of articles which is of interest to the readership, but also advertisements from the industry. We are looking at increasing the frequency of the journal from a quarterly publication to bi-monthly publication from 2020 after discussing with SAGE publications.

### **National Awareness Campaign**

PAIN:LESS, the National Awareness Campaign was launched with an aim to raise awareness about people in pain. After launching posters in 2017-18, the aim is to identify specific pain issues for Study Days and poster campaigns. Dr David Pang has taken over as the Lead for

the project and will be liaising with the Communications Committee and the Council. Dr Pang is also co-opted to the Communications Committee.

### **Publications Update**

The British Pain Society have brought out the following publications: "Outcome Measures" is a joint publication with the Faculty of Pain Medicine is a set of recommendations designed to assess and drive up the quality of patient care; "The Assessment of Pain in Older People: UK National Guidelines" was published along with the British Geriatrics Society and the Royal College of Nursing. Another publication was an interprofessional guide containing the core curriculum outcomes for pain education titled the "Pre-registration Pain Education: A Practical Guide to Incorporating Pain Education into Pre-registration Curricula for Healthcare Professionals in the UK". The document "Understanding and Managing Pain: Information for patients and their carers" is now available for free as a pdf copy on the website for patients. The Guideline Development Groups for "Cancer Pain Management" and "Neuromodulation for Pain Management" are underway and the Pain Management Programme SIG and Acute Pain SIG are also updating the current publications. The PMP Directory will also be published on the website once GDPR compliance is verified.



### Thank you

I have been part of the Communications Committee for nearly five years, initially as a member and subsequently as Chair. I enjoyed excellent support from the Secretariat, particularly Jenny, Dina and Casey, as well as the various Committee members for which I am very grateful; I would like to whole-heartedly thank for their support. I would like to specifically thank Prof Sam Ahmedzai and Dr Stephen Humble for supporting my vision of raising the BPS profile on both mainstream and social media platforms and I am sure they would carry on their good work. Finally, I would like to wish the very best to Dr Krishnamoorthy who will be taking over as the Chair of this Committee from May 2019 and I would continue to support the Committee as best as I can.



Prof. Sam H. Ahmedzai Chair

## Membership 2018

Professor Sam H. Ahmedzai, *Chair / Emeritus Professor of Palliative Medicine*

Mr Kevin Bowers, *Lay Rep*

Dr Emma Briggs, *Nursing/ Education (Co-opted Pain Education SIG)*

Dr Athanasia Chatziperi, *Anaesthesia trainee*

Dr Ashish Gulve, *Anaesthesia*

Mrs Sue Jenkins, *Nursing*

Professor Roger Knaggs, *Executive Officer Link /Pharmacology*

Mr Dylan Taylor, *BSP Secretariat*

Mrs Margaret Whitehead, *Lay Rep*

## EDUCATION COMMITTEE REPORT

The Chair has been in email and phone contact with Committee trainee member Athanasia Chatziperi, who is currently in Toronto for a pain clinical fellowship. The Chair is a co-opted member of Pain Education SIG and has taken part in their teleconferences. He is liaising with SIG members about the online education programme (see below).

### Study Days

The last three BPS Study Days have been 'Pain in Military Veterans & Pain in Torture Survivors' (26 February 2018), 'Integrating Hypnosis in Pain Management' (1 October 2018), 'Implanted Pelvic Materials and Chronic Pain' (12 November 2018).

Two SIG Study Days since then have been cancelled because of poor registrations. At the last face to face meeting of the Education Committee on 23 November 2018, the Committee drew up a timetable for BPS Study Days throughout 2019. These will include, for the first time, regional Study Days – the first being in the north (York) and in southwest (Bristol), which are planned for the summer.

Two more regional Study Days (London, East of England) will follow in the autumn.

We are also pursuing options of joint Study Days with other organisations: RCGP (we held a joint Study Day with them on 12 July 2018); RSM, RCP, APM.

We would like BPS to be able to share more equitably in the proceeds of SIG Study Days in the future.

### Online Educational Programme

We are making progress with the online educational work. Pain Community website: following discussion with Douglas Natusch, who runs the FPM ePain programme, we decided not to pursue the option of running the full Pain Community website because of costs and staff time for maintenance. Rather, we are aiming to present the educational material on the website, updating wherever necessary, as a series of online modules. These will be at a more advanced specialist level than the current ePain modules. We will approach FPM/RCoA to grant CPD points for these. Pricing has not been decided, but we anticipate charging a lower fee for BPS members and



a higher fee for other users. Discussions are continuing between the Education Committee and the Pain Education SIG on updating modules.

We will submit a budget to Council for the first set of modules in due course.

### **Webinars**

IASP and other organisations run successful webinars for members and other professionals. We are exploring the option of running a series of BPS webinars, again with a tiered pricing structure for BPS members and others. The first one we are pursuing is a webinar on Medical Cannabis. We are planning to run this jointly with the Canadian Pain Society (links: Fiona Campbell and Eloise Carr), with Committee member Athanasia Chatziperi, who is currently on a fellowship in Canada, acting as liaison. We will present Council with a budget for this and subsequent webinars in due course.

### **Education Committee membership**

We are very dependent on a small active Committee. As the Study Days and online education work expands, we feel that it would be helpful to have a larger pool of colleagues to collaborate with, especially for the regional Study Days. Our current trainee member (Athanasia Chatziperi) is currently in Toronto on a pain fellowship (keeping in touch and contributing to the work), but when she returns in June she will go to new Consultant post in

Edinburgh. I propose that Athanasia is retained as an 'Early career' member, but we should recruit 1-2 new trainee members. We currently lack a member from Northern Ireland and it would be helpful to recruit one from there. We also need more diverse AHPs members to represent our multidisciplinary team approach and possibly another patient representative, as the workload increases.



Prof. Sam Eldabe, *Chair*

## Members Year End 2018

Professor Sam Ahmedzai, *Palliative Medicine*

Professor Julie Bruce, *Research*

Dr Heather Cameron, *Exec Officer Link / Physiotherapy*

Professor Sam Eldabe, *Chair / Anaesthesia*

Dr Andreas Goebel, *Anaesthesia*

Professor Roger Knaggs, *Pharmacology*

Professor Lance McCracken, *Psychology*

Mr Brian Rochford, *Lay Rep*

Mr Dylan Taylor, *BPS Secretariat*

Professor Pat Schofield, *Nursing*

Dr Amanda Williams, *Psychology*

## SCIENCE AND RESEARCH COMMITTEE REPORT

In 2018 the Science and Research Committee worked with a number of research agencies including Arthritis Research UK, The National Institute of Health Research, The Wellcome Trust, The Medical Research Council, The Neuromodulation Society of the UK and Ireland, and the Liverpool Pain Foundation to organise 'A Focus on UK Pain Research Study Day' at the RCA on the 7th March 2018.

The day was attended by 80 delegates from various UK universities. The day kicked off with an introduction by Drs Andreas Goebel and Martin Johnson, followed by a talk from Mr Colin Wilkinson, a patient speaker on 'Making Pain Research Matter to People in Pain'.

The morning session included talks from the funders outlining their vision and engagement with pain research. Prof. Lesley Colvin presented the 'Scottish experience of organising and sustaining a pain network'.

The afternoon session included presentations from researchers on varied areas of pain research including musculoskeletal pain, pain in rheumatoid arthritis, use of animal models and clinical trials to better understand pain research, genetics of pain, employment and chronic pain, digital epidemiology, primary care recruitment in pain trials, ionic transduction mechanisms and chronic pain, clinical and qualitative research on pain after joint replacement surgery, neuromodulation research, C nociception and a general discussion on the way forward for the creation of a UK pain research network.

Following on from this highly successful meeting, the attendees agreed the need for an annual pain research network meeting. The forthcoming meeting is planned for the 19th of September 2019.

2019 will see another round of the British Pain Society Clulow Award. Adverts are expected in March 2019, with a closing date in June 2019.



Mr Kevin Bowers, Co- Chair  
Mrs Margaret Whitehead, Co-Chair

## Members Year End 2018

Dr Andrew Baranowski, *President (ex-officio)*

Mr Jim Blake, *Lay member*

Ms Kevin Bowers, *Co-Chair / Lay member*

Dr Peter Brook, *Anaesthesia*

Mr Alan Brown, *Lay member*

Mr Mark Farmer, *Lay member*

Mr Martin Hey, *Physiotherapy*

Dr Tim Johnson, *Anaesthesia*

Mrs Ruth Murran, *Lay member*

Mr Ryan Prout, *Lay member*

Mr Brian Rochford, *Lay member*

Mr William Streek, *Lay member*

Mr Dylan Taylor, *BPS Secretariat*

Mrs Louise Trewern, *Lay member*

Mrs Margaret Whitehead, *Co-Chair / Lay Member*

## PATIENT LIAISON COMMITTEE REPORT

The Patient Liaison Committee (PLC) started the year with two newly appointed Co-Chairs and a clear remit to integrate the PLC into the work of the BPS.

Thanks go to the out-going Chair, Mr Antony Chuter, whose term of office came to an end; he continued to serve as a lay member until November. Many BPS members will remember Antony's contributions over the years, working to put the patient perspective at the heart of the Society. The BPS also acknowledges with thanks the contributions of outgoing members Rebecca Brierley, John Holyome, Dr Austin Leach, Anusha Nirmalanathan, Linda Reid, and Dr Fran Toye.

Six new lay-members were appointed in September. They bring a wealth of experience as well as unique perspectives on pain. It must be remembered that lay-members are volunteers with personal and work commitments, as well as being affected by pain. An active PLC relies on the continuing support of all BPS members, not only the committed professionals on the PLC.

PLC lay representatives attended the 2018 Annual Scientific Meeting (ASM), providing an information stand to engage in conversation and sell BPS publications. PLC members also organised the Annual Patient Seminar and Professor Sir Michael Bond Lecture with Pete Moore as guest speaker. Pete is the author and founder of the Pain Toolkit ([www.paintoolkit.org](http://www.paintoolkit.org)), which is a well-known support resource for patients. Pete gave an interactive talk to a small multi-professional audience. We were left pondering why everyone with long term/chronic pain does not embrace self-management.

Another priority for the PLC is to grow the Patient Reference Group for patients and carers to give feedback by email on our work, publications and consultations. This will be particularly important in the coming year. Not only will the PLC be involved in the production and updating of BPS documents, but we will be responding to the NICE draft guidance on chronic pain due out in 2019.



Every member of the Society is encouraged to help recruit patients and carers to the reference group. A poster advertising the group is available to download from the patient section of the BPS website and individuals can sign up to join at <https://www.britishpainsociety.org/people-with-pain/patient-liaison-committee/#patient-reference-group>.

Moving forward, the PLC has plans to deliver a workshop at the 2019 ASM on Patients as Research Partners and, in time, hopes to build a panel of patients available to support the design of research projects. The Committee also aims to produce a Study Day on patient involvement in the autumn.

With the recruitment of new members, the Patient Liaison Committee will continue to be a vital resource for the BPS, benefiting patients, carers and anyone affected by pain.



Prof. David Walsh, Chair

## Members Year End 2018

Professor Sam Ahmedzai, *Chair, Education Committee / Palliative Medicine*

Ms Dina Almulji, *BPS Secretariat*

Dr Andrew Baranowski, *Exec Officer Link / BPS President*

Mr Kevin Bowers, *Lay Rep*

Dr Heather Cameron, *Honorary Treasurer*

Dr Gillian Chumbley, *Nursing*

Ms Felicia Cox, *Editor, British Journal of Pain / Nursing*

Professor Sam Eldabe, *Chair, Science & Research Committee / Pain Medicine*

Dr Sandrine Geranton, *Basic Science*

Dr Edmund Keogh, *Psychology*

Professor Roger Knaggs, *Pharmacology*

Dr Vivek Mehta, *Pain Medicine*

Ms Gail Sowden, *Physiotherapy*

Professor David Walsh, *Chair / Rheumatology*

Dr Amanda Williams, *Psychology*

Mrs Margaret Whitehead, *Lay Rep*

## SCIENTIFIC PROGRAMME COMMITTEE REPORT

The Scientific Programme Committee (SPC) met in January and July 2018, with a meeting scheduled for January 2019. A teleconference was held in October 2018.

Prof David Walsh continued as Chair of the Scientific Programme Committee following appointment in May 2017. Feedback for the 2018 ASM was generally positive and helpful comments were raised at the wrap up meeting of Council on its closing day. The app did not work well in Brighton, and the SPC subsequently learned that the 2018 made a significant financial loss to the Society. Following intensive discussion, Council decided to hold the 2019 ASM in London. This late decision has compressed timelines for organisation of scientific and social content. The London venue is attractive and will hopefully aid access, but has limited capacity and will not provide facilities for face:face poster presentations. The SPC is making all possible efforts to ensure that networking and support of junior members is supported through the meeting, and we anticipate will be well received by members of the Society.

The SPC Terms of Reference and necessary changes in membership were agreed. The SPC has been expanded, as suggested by Council, to include Ms Felicia Cox, Editor of the British Journal of Pain, Prof Sam Ahmedzai, Chair of the Education Committee, and Prof Sam Eldabe, Chair of the Science and Research Committee. Gill Chumbley and Gail Sowden's terms of office have been extended. The SPC implemented in 2018 the Council's suggestion that a call for 'late-breaking' abstracts. This provided an opportunity for members to submit data that had not been available in time for the standard submission deadline, but did not permit abstract publication in the Society's journal. It is planned to open late breaking abstracts also in the 2019 ASM. The SPC will agree at its January meeting the allocation of roles within the 2019 ASM, including judging and award of prizes for the early careers oral presentation. Abstracts will be selected for oral presentation during plenary session 7.

### Planned Activities

May 2019: ASM; July post-ASM review of feedback and planning for the 2020 ASM.



**THE BRITISH  
PAIN SOCIETY**  
EXPERTISE WHERE IT MATTERS

## SPECIAL INTEREST GROUP REPORTS





Dr Sailesh Mishra, *Chair*

### Members Year End 2018

Mrs Harriett Barker, *Treasurer*

Dr Suchitra Kanagasundaram, *Secretary*

Dr Krishna Krishnamoorthy, *BPS Council Liaison*

Dr Sailesh Mishra, *Chair*

Dr Jane Quinlan, *IASP Liaison*

Dr Mark Rockett, *Officer*

Dr Devjit Srivastava, *Officer*

Mrs Jane Stone, *Officer*

Mrs Kathy Wall, *Webmaster*

## ACUTE PAIN SOCIETY SPECIAL INTEREST GROUP REPORT

I am excited to share a number of news items with you as I write my first annual SIG report as the Chair of the APSIG. Past Chair, Ruth Day, did an excellent job of working with the PCC SIG to offer a well-received parallel session at the 2018 ASM. Combining the knowledge from a GP, patient and acute pain specialists, the parallel session was delivered well and we were pleased with the outcome. After the ASM last summer, we followed the BPS constitution guidance and Ruth passed on the baton of the Chair of the SIG to me. Suchi kindly agreed to stay on as the Secretary. Dev handed over the Treasurer baton to Harriet, and Kathy brought in her experience and volunteered as the APSIG Webmaster. Jane continues to provide us with strong links with IASP, and Krishna continues to guide us representing our views to the BPS Council. We are immensely helped by Jenny, Dina, Dylan on day to day procedural matters and support.

After the last ASM, in July we represented APSIG at the RCGP meeting in London with presentations from Dev and Ruth, which were well received. We discussed 2019 ASM parallel workshop proposals and have a joint workshop; 'The First Cut is the Deepest'; with the

Neuropathic Pain SIG at the ASM in London. Dev and Prof Langford will be sharing their acute pain expertise along with Bernhard Frank from Neuropathic SIG. We have a number of projects running on behalf of the BPS. Mark and Suchi lead the CHIPS project on multicentre audit of inpatient pain work, with data from nearly half of the 80 participating NHS Trusts collected at the time of this report. Dev leads POPOS: Post-Operative Pain Management Outcome Study and will be reflecting on the work at the ASM workshop. Dev and Mark are liaising with the Royal College of Anaesthetists in contributing to the Guidelines for the Provision of Anaesthetic Services (GPAS) document. We continue to work closely with the National Acute Pain Symposium (NAPS), organising one of our SIG meetings there.

Our Knowledge Hub discussion forum is constantly growing, we have about 130 experienced clinicians and educators who engage in proactive discussions and share their experience in that forum. Take a look at <https://khub.net/group/acute-pain-hub-uk> and dive into the discussions!



Exciting times are ahead, we are strengthening our connections with IASP, Royal College of GPs, Royal College of Anaesthetists and Perioperative Medicine specialties. Our members are sharing their vast experience in presenting at many national and international meetings. We look forward to organising a Study Day in Autumn 2019.



## CLINICAL INFORMATION SOCIETY SPECIAL INTEREST GROUP REPORT

### CHAIR TO BE APPOINTED

Total membership: 72

During 2018 the SIG remained dormant. It is intended that the SIG will be reactivated in 2019.



Dr Vivek Mehta, *Chair*

### Members Year End 2018

Dr Anish Bahra, *Secretary*

Ms Karin Cannons, *Committee Member*

Dr Sarah Love-Jones, *Treasurer /  
Council Liaison Officer*

Dr Vivek Mehta, *Chair*

Dr Ajoy Pandit, *Webpage lead /  
Committee member*

Professor Joanna Zakrzewska,  
*Committee member*

Total membership: 93

## HEADACHE SOCIETY SPECIAL INTEREST GROUP REPORT

The Headache SIG group has been very active since its formation in 2015 and is now into its 4th year. There have been major advances in the headache field and the SIG serves as an important platform to engage and facilitate education, training and research. The SIG is keen to nurture and disseminate the current knowledge about understanding of the disease and to play a major role in improving headache management as part of multidisciplinary approach.

The SIG currently has balance £20,076 and is keen to promote education by subsidising workshops and further education programmes. The SIG is also planning training fellowships to attend meetings and small research grants.

The SIG would be nurturing collaboration with the UK National Society for Headache, BASH, for academic activities.

The next Headache SIG education day has been scheduled for 5th June 2019. We hope to provide an innovative programme with industry funding and workshops to provide an educational platform for our members.



## INFORMATION AND COMMUNICATION TECHNOLOGY SOCIETY SPECIAL INTEREST GROUP REPORT

### Chair to be appointed

Total membership: 154

During 2018 the SIG remained dormant. It is intended that the SIG will recruit a new Chair in 2019.



Dr Sumit Gulati, Chair

## INTERVENTIONAL PAIN MEDICINE (IPM) SOCIETY SPECIAL INTEREST GROUP REPORT

### Members Year End 2018

Dr Arif Ghazi, *Secretary*

Dr Neil Collighan, *Council Liaison Officer*

Dr Mohjir Baloch, *Officer*

Dr Ooi Thye Chong, *Officer*

Dr Sumit Gulati, *Chair*

Mr Ashish Khiloshiya, *Officer*

Dr Kiran Koneti, *Treasurer*

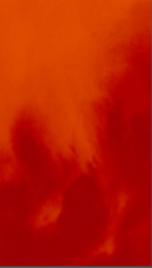
Total membership: 257

For the first time a BPS Pre-ASM meeting was held in Brighton from the Interventional Pain SIG entitled 'Pain: Where are we and where are we going? This was a pilot to assess if the annual educational event will be better attended if done as part of the ASM. Despite a low attendance it was a high quality programme, which catered to the educational needs of Pain specialists. The programme involved topics ranging from 'Recent advances in Interventional Pain Medicine'; 'High Intensity Focused Ultrasound in painful conditions'; 'Endoscopic facet interventions'; 'QST and Conditioned Pain Modulation. Do they help predicting outcomes from interventions?'; 'Educational Sessions: Neuromodulation'; 'Techniques and Mechanism of Action of Spinal Cord Stimulation'; 'How to select patients for Neuromodulation for Pain Management'; 'FBSS and Neuromodulation'; 'Advances in Neuromodulation'; 'Neuromodulation for Complex Regional Pain Syndrome (CRPS)'; 'Neuromodulation for Chronic Post-surgical Pain Syndrom'; 'Advances in the diagnosis of neuropathic pain'; 'MRI neurography. Does it help with the diagnosis of neuropathic pain?'; 'Practical application (Webinar)'; 'A novel way of doing Cervical Epidural without LOR technique (Webinar)'.

The IPM SIG business meeting at the ASM was attended by a multidisciplinary group. Cancer and non-cancer pain specialists gave their valuable input for future strategy of the SIG. Palliative care liaison with cancer pain specialists for specialist interventions was discussed. We acknowledged the regional variation and challenges in commissioning of interventions for chronic pain. The dwindling attendance of Pain specialists with Interventional Pain Management interest at the BPS ASM, IPM SIG educational day and the business meeting was discussed as a trend. It was agreed that while it is multifactorial, this could be addressed going forward in order to bring active participation within the auspices of multi-disciplinary British Pain Society.

A small group meeting discussed the NIHR call for Facet joint Denervation led by Prof. Eldabe.

A new team of Officers has been formed for the IPM SIG, and a handover taken from Dr Neil Collighan who has stepped down as Chair. Dr Sumit Gulati has taken over in this role. The team is multi-disciplinary including Pain specialists from secondary and tertiary care NHS hospitals,



a University, an Acupuncturist Nurse and a Physiotherapist on the panel.

The SIG has commented on the recent consultation by NHS England on Spinal Injections amongst 17 procedures that are planned to be de-commissioned.

The SIG will be recruiting for new members to participate in the BPS ASM and the Interventional Pain parallel session, which has been accepted for the 2019 ASM.

The SIG is also planning a new themed workshop for late 2019, on Medicolegal and Safety aspects of Interventional Pain.



Dr Rajesh Munglani, Co-Chair  
Dr Jonathan Valentine, Co-Chair

### Members Year End 2018

Dr Rajesh Munglani, Co-Chair  
Dr Jonathan Valentine, Co-Chair  
Dr Tim Johnson, Council Liaison Officer

Total membership: 115

## MEDICOLEGAL SOCIETY SPECIAL INTEREST GROUP REPORT

Noting the low profile of the Medicolegal SIG over the last few years despite the increasing interest amongst Pain Management specialists in medicolegal practice, Dr Valentine and Dr Munglani held a meeting at the BPS ASM 2018 in Brighton to discuss plans for the future of this group, which they had re-established in July 2011 after a number of years of inactivity.

Dr Jon Valentine and Dr Raj Munglani are the present members of the Medicolegal SIG Committee. We believe that there is no requirement for other Committee members at this time.

Under the new editorship of Dr Munglani, members of the Medicolegal SIG are taking an active role in preparing a series of articles for Pain News addressing a range of important chronic pain-related matters with which the UK courts require opinion from clinical specialists in a number of disciplines including pain medicine, psychiatry, and clinical psychology.

### Outstanding tasks

A survey of membership of the Medicolegal SIG has not been carried out for some time. We will establish an up-to-date list of SIG members ahead of the BPS ASM 2019 and encourage members to become actively involved in promoting the SIG and to contribute to future educational articles and meetings.

### Planned activities

We are committed to multidisciplinary membership and will actively encourage individuals from other medical specialities, such as psychiatry and rheumatology for example, to join the SIG together with non-medical clinicians such as psychologists, nurses and physiotherapists.

Dr Valentine and Dr Munglani will organise a meeting of the members of the SIG to discuss ideas for the future. This meeting will take place at the time of the BPS ASM 2019.

There will be further articles from members of the Medicolegal SIG published in Pain News. The Medicolegal SIG committee will propose a 90-minute parallel session for the BPS ASM 2020.



Dr Bernhard Frank, *Chair*

## Members Year End 2018

Dr Bernhard Frank, *Chair*  
Dr Jayne Gallagher, *Secretary*  
Dr Subhash Kandikattu, *Officer*  
Dr Abdul Nazal, *Officer*  
Dr David Pang, *Council Liaison Officer*  
Dr Kiran Sachane, *Treasurer*  
Dr Shravan Tirunagari, *Webmaster*  
Dr Katie Warnaby, *Officer*

Total membership: 252

## NEUROPATHIC PAIN SOCIETY SPECIAL INTEREST GROUP REPORT

An email to all Council members and SIG members was sent to encourage better participation and encourage new Committee members. Unfortunately, no feedback was received, and a further email might be necessary.

The SIG business meeting in Brighton was only attended by 4 members and kept very brief, hence no formal minutes were produced.

The Webmaster for the SIG, Shravan is planning to fill the website with content.

We have a joint workshop planned for the 2019 ASM in London together with the Acute Pain SIG about post-operative pain and I will present an update on peri-operative management of neuropathic pain.

I would like to hand over as Chair if anybody is interested. There is still a huge unmet need for better treatment and management of neuropathic pain and the SIG certainly worthwhile to exist.

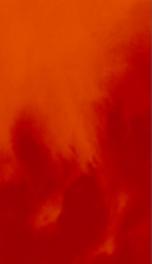
With the restructuring and move of pain services into primary care, leadership towards engagement with CCGs is needed and the SIG would be a good place to share developments and experience.

Currently, the SIG is still mainly a one man show. A proper council with regular meetings would be desirable. I will email all current SIG members and ask if they want to continue, or if new ones should be elected.

I would like to continue until the next AGM at the 2019 ASM in London and handover the Chair.

London seems to be quite costly to organise meetings. It might be worthwhile to preferentially look for venues outside London for future SIG meetings.

A statement from the SIG about current and future changes affecting the treatment of neuropathic pain conditions would be good and could foster engagement in the SIG via email and videoconferences.



Scheduling of gabapentin and pregabalin, clamping down on lidocaine patch use, high dose capsaicin use, neuromodulation advances and its role in a neuropathic pain treatment pathway. New developments (rTMS, virtual reality etc.)

A workshop at the next BPS meeting about practical aspects of setting up a specific neuropathic pain clinic would be desirable to discuss new pathways and more effective treatment of patients in cooperation with primary care.



Dr Alison Bliss, *Chair*

## Members Year End 2018

Dr Alison Bliss, *Chair*

Dr Paul Rolfe, *Officer*

Dr Alison Twycross, *Officer*

Dr Richard Walters, *Officer*

Dr Glyn Williams, *Council Liaison Officer*

Total membership: 84

## PAIN IN CHILDREN SOCIETY SPECIAL INTEREST GROUP REPORT

Our small SIG has had a quiet year this year.

Our business meeting was attended by only a small number at the ASM but generated some fresh interest. The SIG would be keen to host another paediatric themed Study Day and also participate in any potential “refresher” sessions at future ASMs.

The SIG continues to support the HCSA. HCSA is currently working with Ofsted and producing guidance in conjunction with the DfE, outlining how schools should support CYP with chronic health conditions.

The SIG also represented the BPS at the PaPaS review meeting, reviewing the published evidence base (or lack thereof) for paediatric pain (separate report already sent).

This is the final year of the current Executive’s term and we will be asking the assistance of the Secretariat to elect new members for the Executive Committee before/at the 2019 ASM.

### Planned for 2019

- Production of a follow-on article on Transition for Pain News.
- Completing write up of qualitative aspects of 2015 survey on chronic pain provision in children.
- Election of new Committee members.



Dr Amelia Swift, *Chair*

## PAIN EDUCATION SOCIETY SPECIAL INTEREST GROUP REPORT

### Members Year End 2018

Professor Sam Ahmedzai, *Council Liaison Officer*

Dr Emma Briggs, *Departing Co-Chair*

Mrs Sue Jenkins, *Treasurer*

Dr Ed Keogh, *Co-opted Member*

Dr Sailesh Mishra, *Officer*

Dr Chris Seenan, *Co-opted Member*

Dr Amelia Swift, *Chair*

Mrs Kate Thompson, *Officer*

Professor Alison Twycross, *Departing Co-Chair*

Total Membership: 269

The Pain Education SIG comprises more than 250 health professionals, academics and lay persons. We have seen some big changes in the past 12 months. Dr Emma Briggs and Prof Alison Twycross have completed their term as Co-Chairs, but thankfully we do not lose their experience as they will remain in an advisory capacity for a further year. The post of Chair has been taken up by Dr Amelia Swift from the University of Birmingham.

We say goodbye to Professor Michelle Briggs who we are thankful to for carrying out the role of Secretary. Other members who leave us this year are Dr Sunil Arora, Jo Etherton, Ethel Hili and Despoina Karagyri (co-opted). We extend a warm welcome to two new Patient Liaison Members, Louise Trewern and Ruth Murran, and to a new co-opted member, Dr Chris Seenan from Glasgow Caledonian University.

### Achievements

- In 2018, we launched the Pre-registration Core Pain Curriculum at the Annual Scientific Meeting in Brighton. We are grateful to Marjorie Collaco, an instructional designer from the University of Birmingham who created the online document that can be found via the British Pain Society website in the Professional Publications section or via this link: <https://indd.adobe.com/view/175981e8-79ec-421c-933e-03c0c0e2e74f>
- Launch of a Twitter feed @BSPainEduSIG with 291 followers to date.
- Joint workshop with the Pain Management Programmes SIG at the 2019 ASM “Assessing the evidence to practice gap in pain management”.
- Maintained our four key workstreams:
  - Health profession’s education
  - Patient education (by patients and for patients)
  - Education Research
  - Communication
- Presented a systematic review of practice based pain education as a poster at the World Pain Congress as part of the Global Year of Excellence in Pain Education.

- Publications in Pain News (Twitter chats as an educational tool; Essential Pain Management – to medical schools and beyond)

### **Meetings**

We meet bimonthly online and also at the ASM. We will be holding our biannual face to face meeting in June 2019 to discuss our strategy for the next two years.

We have a number of vacant positions that we expect to fill before our strategy meeting in June and are excited to build on the excellent work undertaken by our committee and the membership in 2019/20.



Ms Margaret Dunham, *Chair*

### Members Year End 2018

Ms Margaret Dunham, *Chair*

Dr Zoey Malpus, *Council Liaison Officer*

Total membership: 124

## PAIN IN OLDER PEOPLE SOCIETY SPECIAL INTEREST GROUP REPORT

This has been a quiet but industrious year for the Pain in Older People SIG. Members of the SIG have been busy working with a wider group of pain colleagues to update the current national guidelines on Managing Pain in Older People. This is nearing completion and it is anticipated that the guidelines will be in draft form by the time of the ASM.

### Outstanding Tasks

- It is anticipated that the guidance on Pain Management in Nursing Homes will be developed in the next few months following on from the findings of the Pain Management review.
- Organisation of a Pain in Older People workshop/Study Day.

### Planned Activities

- To increase SIG activity.
- To encourage new membership of the Society via engagement with the needs of older people in pain.
- To ensure Pain in Older People is part of the 2020 ASM.



Ms Gail Sowden, *Chair*

## PAIN MANAGEMENT PROGRAMMES SOCIETY SPECIAL INTEREST GROUP REPORT

### Members Year End 2018

Dr Melanie Frazer, *Co-Secretary / Psychology alternate*

Dr Iain Jones, *Treasurer / Medical representative*

Ms Sarah Kelly, *Occupational Therapy representative / Clinical Champion Lead*

Dr Zoey Malpus, *BPS Council Liaison Officer*

Mrs Jill Probert, *Nursing representative*

Mr Brian Roachford, *Patient Liaison Committee representative*

Ms Gail Sowden, *Chair*

Dr Hannah Twiddy, *Psychology representative*

Lisa Turner, *Occupational Therapy alternate*

Lyn Watston, *Co-Secretary / Nursing representative alternate*

Dr Lars Williams, *Alternate Medical representative*

Vacant, *Physiotherapy representative*

Total membership: 293

The PMP SIG has completed the update of the Pain Management Programme Directory, produced a newsletter for the membership and appointed a Clinical Champion for each region of the network.

Following 2017's successful Pain Management Programme (PMP) Special Interest Group's Conference in Glasgow, the Biennial National PMP Conference will be held at Bristol University on the 11th and 12th September 2019. The conference is placing the spotlight on the BiopsychoSOCIAL. It will explore a range of related topics, including: how to capture social outcomes; social prescribing; co-creating services and resources; perceptions of injustice; risk factors for chronic pain and disability; the impact of chronic pain on employment, follow on groups, and will try and answer questions such as 'What is the 'social' in biopsychosocial?' and 'What are the social influences on pain?'

Speakers will include Michael Sullivan, Prof Gary Macfarlane, Prof Alison Hammond and Dr Amanda C de C Williams. A social event is planned at the beautiful

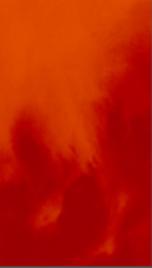
Bristol Museum next door and a tour of the famous Wills Tower will also be on offer. A number of teleconferences have been held between the organising committee, the Chair of the SIG (GS), Lars Williams and the BPS Secretariat, and plans are well under way for a successful conference.

The PMP Guidelines: the PMP SIG are currently in the process of updating the PMP guidelines; this project is being led by Iain Jones. The Committee have been convened and have had a number of teleconferences. A face to face meeting has been scheduled.

The PMP SIG will be delivering a joint workshop with the Education SIG at the BPS ASM in London in 2019 entitled 'Addressing the Evidence to Practice Gap'.

The PMP SIG will be holding their AGM at the PMP Conference in Bristol on the 11th and 12th September 2019.

The SIG, along with Amanda Williams, will be drafting a BPS position statement in response to Increasing Access



to Psychological Therapies (IAPT) Long Term Conditions pathway, particularly around the suggested framework and national developments relating to the management of chronic /persistent pain.

The SIG may be contributing to the cost of the PMP Guidelines meeting and a face to face SIG Committee Meeting, the funding arrangements will be confirmed with the BPS Secretariat.



Dr Maureen Tilford, Secretary

### Members Year End 2018

Mrs Betsan Corkhill, *Officer*

Dr Mike Platt, *Chair*

Mr Matthew Jay, *Webmaster*

Dr Tim Johnson, *Council Liaison Officer*

Dr David Laird, *Officer*

Dr Bernd Strathausen, *Officer*

Dr Maureen Tilford, *Secretary*

Dr Peter Wemyss-Gorman, *Transcript Editor*

Total membership: 116

## PHILOSOPHY AND ETHICS SOCIETY SPECIAL INTEREST GROUP REPORT

Our annual meeting this year took place on 3rd, 4th and 5th of July at Launde Abbey in rural Leicestershire. The weather and the venue were perfect.

We decided to go with two themes for 2018: ‘Burnout’ and ‘The Healing Power of Language’.

The days began with a short session of yoga before breakfast with psychotherapist, Gillian Bartlam, and we made time between 2pm and 4pm to walk in the gardens and glorious countryside around Launde.

Our first speaker was the distinguished philosopher, Dr Michael Bavidge, who is the President of the Philosophical Society of England. He spoke about how we communicate and the complexity of conversing about pain.

Continuing on the theme of the use of language, Betsan Corkhill, a Wellbeing Coach with an interest in pain management, spoke about the risks of the careless use of language, making suffering worse for the patient whereas carefully chosen words can encourage healing, movement and a return to everyday living as well as keep hope alive.

Dr Michael Farquhar is a specialist in sleep medicine and spoke about the importance of sleep for people working unsocial hours and shifts. We discussed the role of poor sleep in the development of ‘burnout’ in hospital doctors.

We were delighted to have Dr Clare Gerada speak about the problem of stigma for doctors who need help. Clare was previously chair of the RCGP and is now running the Health Practitioner Service, supporting doctors with mental illness. She gave an inspiring and impassioned talk about the amount of suffering within the profession and how this could be tackled.

Clare’s talk was followed by that of Dr Ian Williams, GP, artist and the writer of two graphic novels. The first one: ‘The Bad Doctor’ deals with the professional burnout of a GP, and is partly based on Ian’s own experiences. Ian was very open and honest about his own life as a GP and the stresses involved.



Dr Sangram Patil is a meditation teacher and works in a pain clinic in North Wales. He has given lectures to raise awareness about stress at work, and mindfulness meditation for stress. He led a very relaxing mindfulness session for the group.

Dr Mike Platt, Consultant in Pain Medicine and Anaesthesia spoke about problems he sees in the junior doctors with whom he works. He observed that the changes in the health system has meant that these doctors have no social support or even a safe place to relax when on duty, adding to the stresses of their already difficult job. Burnout is often a result of this poor care of our colleagues.

We are returning to Rydal Hall in Cumbria for our meeting in June this year and the theme is 'Exploring the Way Ahead for Pain Medicine: Caring for the Patient and the Clinician'. Several interesting speakers are already booked to come along.



Dr Dee Burrows, Chair

## PRIMARY AND COMMUNITY CARE SOCIETY SPECIAL INTEREST GROUP REPORT

### Members Year End 2018

Dr Peter Brook, *Council Liaison Officer*

Dr Dee Burrows, *Chair*

Dr Jim Huddy, *Officer*

Dr Martin Johnson, *Vice Chair and Treasurer*

Dr Sue Peacock, *Officer*

Mrs Gill Simon, *Secretary*

Vacant, *Officer*

Vacant, *Patient Committee Representative*

Total membership: 112

A Parallel Session 'Facing the challenges of pain and addiction - practical approaches' was offered jointly with the Acute Pain SIG at the 2018 Annual Scientific Meeting. The session was well received.

The Patient Expert Speaker, Louise Trewern, was subsequently successful in her application to the Patient Liaison Committee.

A meeting was held to share resources on opioids and opioid reduction. There will be a further meeting at the 2019 ASM. Please let us know if you have ideas to contribute to the SIG Objectives, which are listed below and / or would like to join the Committee.

### The SIGS Objectives are:

- To contribute to the objectives of the British Pain Society and the International Association for the Study of Pain on matters relating to pain management in primary and community care.
- To improve knowledge and understanding of pain management and its outcomes in primary and community care.
- Through sharing best practice, to enhance the skills of those involved in delivering pain services and pain management in primary and community care.
- To organise meetings, seminars and workshops on aspects of pain management in primary and community care.
- To establish and maintain links with other professional organisations and societies related to pain management in primary and community care.
- To maintain a register of resources relating to primary and community pain management for health care practitioners and people with pain.



Dr Victoria Tidman, *Chair*

## Membership Year End 2018

Professor Sam Eldabe, *Treasurer*  
Dr Tim Johnson, *Council Liaison Officer*  
Dr Mike O'Connor, *Officer*  
Dr Victoria Tidman, *Chair*  
Vacant, *Secretary*

Total membership: 100

## PAIN IN DEVELOPING COUNTRIES SOCIETY SPECIAL INTEREST GROUP REPORT

This year we collaborated on a workshop entitled "Opioids - Promoting appropriate use and preventing abuse in the developing world" with Dr Barbara Duncan FRCA MSc Palliative Care, Dr Clare Roques FRCA MSc Medical Anthropology, Dr Brigitta Brander FRCA and Jackie Walumbe, MSc Global Public Health & Policy. This has led to an article due to be published in Pain News.

We have continued to compile a list of resources for professionals going to low income countries to practice/teach pain medicine.

Overall this has been a quiet year for the SIG as we have been trying to find ways to engage more members to take an active role, such as Study Days or networking evenings.

### Outstanding tasks

- Mentor forum. Last year there was some interest in a mentorship scheme for overseas healthcare professionals interested in pain. Some reservations were expressed in the last SIG meeting about allocating mentors HCPs had never met, there must be a degree of trust. Maybe an intermediate solution would be Google group with 4-5 mentors or knowledge hub <https://khub.net>.
- Continue to expand the SIG webpage.
- Nominate a new Secretary.
- Continued liaison with AAGBI, EPM (Essential Pain Medicine) and Specialists in Pain Network (SPIN).

### Planned activities

- We are planning a joint evening/Study Day with Specialists in Pain Network where there can be short presentations on experiences of teaching/delivering a pain service in low income countries. This could be followed by a drinks reception and a chance to network.
- Our next SIG meeting is at the 2019 ASM in May. We hope to engage more members of the SIG to take more of a role within the SIG.
- Increase our profile on social media such as Twitter.



**THE BRITISH  
PAIN SOCIETY**

EXPERTISE WHERE IT MATTERS

AUDITED ACCOUNTS



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## LEGAL AND ADMINISTRATIVE INFORMATION

### Registered Office:

Third Floor  
Churchill House  
35 Red Lion Square  
London WC1R 4SG

### Bankers:

CAF Bank  
25 Kings Hill Avenue  
Kings Hill  
West Malling  
Kent ME19 4JQ

### Solicitor:

Hempsons Solicitors  
Hempsons House  
40 Villiers Street  
London WC2N 6NJ

### Auditor:

Sandison Lang Limited  
2 St. Mary's Road  
Tonbridge  
Kent TN9 2LB

# THE BRITISH PAIN SOCIETY DIRECTORS' REPORT

For the period 1st January – 31st December 2018

The British Pain Society is the largest multidisciplinary professional organisation in the field of Pain in the UK. It comprises: doctors, nurses, physiotherapists, scientists, psychologists, occupational therapists, and other healthcare professionals actively engaged in the diagnosis and management of pain and in pain research. As of 31st December 2018 there were 1,114 members. The Society is the British Chapter of the International Association for the Study of Pain (IASP) and is part of the European Federation of IASP Chapters (EFIC).

The Directors present their Annual Report and independently examined Financial Statements for year 1st January – 31st December 2018. The Report is prepared in accordance with the recommendations of "Charities SORP (FRS102)".

## 1. STRUCTURE, GOVERNANCE AND MANAGEMENT

The governing document of the British Pain Society is the Memorandum and Articles of Association, along with the Regulations. There are no restrictions in the governing documents on the activity of the Society. The British Pain Society is a company limited by guarantee.

The Directors are appointed by ballot of the members, except for the Vice President, Honorary Secretary and Honorary Treasurer who are appointed by the Directors. Any Ordinary or Honorary Member of the Society is entitled to stand for election to the post of Director/Trustee. Only Members who have previously served as Trustees of the Pain Society, the British Pain Society, or as Board members of either the International Association for the Study of Pain (IASP) or the European Federation of IASP Chapters (EFIC) are eligible to stand for the post of President, Vice President, Honorary Secretary or Honorary Treasurer, however, if no person who falls within the eligibility categories is willing to be considered for election, Council may consider a candidate or candidates from the Ordinary and Honorary Members. All new directors/trustees are required to undertake formal induction training. This is scheduled to take place prior to the first Council Meeting following their appointment.

The Council of the Society meets at least four times a year. All the decisions related to the management of the Society are made by the Council at these meetings. The President sets the Agenda for the Council meeting, and

takes overall responsibility for the day-to-day running of the Society along with the Executive Officers. There is support for the Council from the following Committees and subcommittees: Scientific Programme Committee, Communications Committee, Patient Liaison Committee, Science and Research Committee, Education Committee, Charitable Aims and Awards sub-committees.

The Council is supported by a Secretariat, including the appointment of a CEO who leads the Secretariat team in the delivery of the Society's objectives and projects and contributes to the strategic planning processes of the Society. The Secretariat deals with the day to day running of the Society, the organisation of the various meetings promoted by the Society and managing the membership of the Society. All executive decisions are made by the Council or the Officers, who are the President, the President-elect (if applicable), the Vice President(s) (if applicable) the Honorary Treasurer, the Honorary Treasurer-elect (if applicable), the Honorary Secretary and the Honorary Secretary-elect (if applicable) and the Immediate Past President (if applicable), with input from the CEO.

An Annual General Meeting of the members is held at the time of the Annual Scientific Meeting.

There are currently fourteen Society Special Interest Groups; Acute Pain, Clinical Information, Headache,

Information & Communication Technology, Interventional Pain Medicine, Medicolegal, Neuropathic Pain, Pain in Children, Pain Management Programmes, Pain Education, Pain in Older People, Philosophy & Ethics, Pain in Developing Countries and Primary and Community Care. The governance of these groups is established within the Articles and Regulations of the Society.

The Council has identified areas of risk within the Society and actions that have been taken by Council to minimise or eliminate these, although there is currently no formal written business continuity plan in place, work on this is underway and will be completed in 2019. The specific areas of risk identified are as follows:

- **Financial probity:** The Directors have established systems of internal control, comprising financial estimates and annual budgets, delegated authorities for operational management and segregation of duties, reviews of financial and investment performance and the identification and management of risks, in accordance with the publication CC8 "Internal Financial Controls for Charities". The internal controls have been formalised and are set out as Finance Procedures for the Society.

The internal controls are subject to ongoing assessment and evaluation by the directors. At least two meetings a year are held to consider financial management and performance in detail. The Honorary Treasurer reports on financial matters to each Council meeting of the

Society, comprising directors and co-opted members. These meetings record the formal review and approval of all aspects of finance, internal controls and accounts. In 2019 the Society will continue looking towards further prudent investment by spreading risk of funds across additional institutions.

In 2018 the Council agreed to explore how to appoint professional advisers in a Trustee capacity to the Council. Particular skill gaps identified were fundraising and marketing and PR. In 2019 a special resolution will go before the AGM to propose amending the Memorandum & Articles to enable such appointments.

- **Staff retention:** The Society wishes to retain its Secretariat staff. They became familiar with the Society's activities over a year or so and it is in our interests to avoid rapid turnover. To this end the Directors have attempted to provide a better and structured salary system and improve morale by allocating specific areas of responsibility on a regular basis. Appraisal is now a regular event for members of the Secretariat whereby career aspirations and training needs can be identified. The Society also makes a 5% salary contribution to the staff pension scheme, which increases to 10% after three years of service providing staff contributes a minimum of 5%.
- **Information Technology and Data Protection:** The Society has a website with a built in database in

operation. Data protection and antiviral systems are in place; the data is backed up daily. Compliance with GDPR is assessed regularly and procedures are in place to ensure that this compliance is maintained.

#### Health and Safety

- The board accepts formally and publicly its collective role in providing health and safety leadership in its organisation.
- Each member of the board accepts their individual role in providing health and safety leadership for their organisation.
- The board will ensure that all board decisions reflect its health and safety intentions, as articulated in the health and safety policy statement.
- The board recognises its role in engaging the active participation of workers in improving health and safety.
- The board will ensure that it is kept informed of and alert to, relevant health and safety risk management issues. In view of the Health and Safety Commission recommendations, the board will appoint one of its number to be the "health and safety director".

In line with statutory requirements, the Society has Employers Liability Insurance and Public Liability Insurance, the levels of which are reassessed on a regular basis.

**Declining membership numbers:** Further work continues in this area as numbers continue to slowly decline. A paper

discussed at Council in November 2018 outlined three new options 1. A profession based system (used by other MDT societies); 2. A simplified fee based structure based on income and 3. A hybrid model.

Council agreed to retain an income based structure but that it should be simplified. A proposal will go forward to the 2019 AGM approval to commence at the start of the new membership year in November 2019.

In September 2014, the Charity established a trading subsidiary 'BPS Pain Business Ltd'. BPS Pain Business Ltd was incorporated under the Companies Act 2006 as a private company that the company is limited by shares, and the situation of its registered office is in England and Wales. The sole subscribing shareholder of BPS Pain Business Limited is the charitable company The British Pain Society (company number 5021381). No other shares have been issued.

#### **Involvement with other bodies**

- Although the Chronic Pain Policy Coalition (CPPC) was temporarily inactive during 2018 whilst they consolidated, the Society continues to be involved in their work. The CPPC is an umbrella organisation uniting patients, professionals and parliamentarians which aims to develop and help to implement a strategy for improving the prevention and treatment of chronic pain in the UK.

- The Society is a generic stakeholder for NICE (National Institute for Health and Care Excellence) guidelines.
- The Society is a generic stakeholder for Interventional Procedures and Health Technology Assessments for NICE.
- The Society is a member of the Association of Medical Research Charities (AMRC).
- The Society is a generic stakeholder with NHS England Clinical Reference Groups (CRGs).
- The Society has representation on the NHS England Clinical Reference Group for Specialised Pain Services.
- A Society member chairs the Healthcare Resource Group working party, with links to the Royal College of Physicians 'Payment by Results' initiative.
- The Society has reciprocal representation on the Board of the Faculty of Pain Medicine.
- The Faculty of Pain Medicine of the Royal College of Anaesthetists, the Chronic Pain Policy Coalition, the Royal College of Nursing, the Physiotherapy Pain Association and the International Association for the Study of Pain (IASP) each have one representative who sits on the British Pain Society Council as a co-opted member.
- The following organisations are also represented at the British Pain Society Council via elected Council members who are elected as individuals, but who have links with the relevant organisations; The British Psychological Society and The Royal Pharmaceutical Society.

- The Society is a member of the Specialised Healthcare Alliance (SHCA), via its Council CRG liaison officer.
- The Society is a member of the Health Conditions in Schools Alliance, via a representative of the Pain in Children Special Interest Group.
- The Society is a member of the Pain Consortium, a group consisting of senior representatives from The British Pain Society, the Faculty of Pain Medicine, the Chronic Pain Policy Coalition, and the Clinical Lead for Pain of the Royal College of General Practitioners, with the Clinical Reference Group for Specialised Pain Services as an informal observer.

## 2. OBJECTIVES AND ACTIVITIES

The objects as set out in the Memorandum and Articles for which the Society is established (“the Objects”) are the advancement of health by raising the standard of the management of pain by promotion of education, research and training.

The main activities undertaken in relation to the objects are to:

- provide facilities for the exchange of information, opinions and experience about pain between active workers in the field;
- increase awareness of pain prevalence, disability and pain management among healthcare and other professionals and the public;
- promote education and training in pain management and research into the understanding and relief of pain;

- institute or assist in instituting and provide continuing support for pain research;
- cause to be written, published, produced and circulated, and to encourage contributions to and publication and production of, periodicals, journals, books, papers, abstracts, pamphlets, posters and other documents and films, videos, recorded tapes and communications in any medium;
- endow Chairs, Readerships, Scholarships, Fellowships and Lectureships at, and provide other support to, appropriate institutions to facilitate the conduct of study and research in furtherance of the Objects;
- to disseminate the useful results of research;
- to sponsor and hold meetings, symposia, conferences, lectures, classes, seminars, courses and exhibitions either alone or with others; and
- to encourage and promote the study and research into aspects of pain, the Society offers five bursaries/grants that are available to its members; the “Clulow Research Award”, the “Patrick Wall International Meetings Bursary”, the “British Pain Society Annual Scientific Meeting Bursary”, “The British Pain Society Study Day Bursary” and the “International Association for the Study of Pain World Congress Bursary”. Full details of the awards, including eligibility and application forms, are available on the Society website.

All of the above activities are for the public benefit. The Trustees have considered the Charity Commission’s guidance on public benefit.

### 3. ACHIEVEMENTS AND PERFORMANCE

The Society continued to provide an educational programme to increase the knowledge of pain management to both professionals and lay people within the remit of the Memoranda and Articles of Association. It has been successful in producing the following series of meetings and publications:

#### Society Meetings/Events

- The Science and Research Committee held a successful first meeting on 'Focus on Pain Research' on 7th March 2018. This was a pivotal meeting in terms of pain research in the UK and it is intended to hold a further meeting in 2019.
- The Society held its 51st Annual Scientific Meeting (ASM) in Brighton on 1- 2 May 2018 which was attended by 402 participants.
- The Education Committee continued with its series of one day Study Days. Three Study Days were held in 2018:
  - Pain in Military Veterans & Pain in Torture Survivors – 26th February 2018
  - Integrating Hypnosis into Pain Management – 1st October 2018
  - Implanted pelvic materials and chronic pain: the full story – 12th November 2018
- The Patient Liaison Committee held its annual meeting on 2nd October 2018.

#### SIG Meetings/Events

- On 2nd – 5th July, the Philosophy & Ethics Society SIG held a meeting on "Burnout and The Healing Power of Language".

#### Publications/Resources

- The Society continues to provide its quarterly Newsletter 'Pain News' free of charge to its members.
- The Society continues to provide its quarterly journal 'British Journal of Pain' free of charge to its members. In December 2017, the journal was moved behind a paywall for non-members.
- The Society published a new publication on 'Pre-registration Pain Education: A practical guide to incorporating pain education into pre-registration curricular for healthcare professionals in the UK'.
- The Society also jointly published with The British Geriatrics Society and the Royal College of Nursing, 'The Assessment of Pain in Older People: UK National Guidelines' as a supplement in Age and Ageing Journal.
- All the Society's publications and patient information leaflets are available to download free of charge from the website.
- The Society's social media presence on Twitter and Facebook continues to grow and develop.
- The online discussion forum for members has proven popular and continues on into 2019.
- In 2018, the Society received 35 requests from main stream media for comment.

### Bursaries & Grants

- The Society awarded 13 members of the Society bursaries to attend its ASM in Brighton.

### Information for people affected by pain

- The Society, although an organisation for healthcare professionals, provides a copy of the British Pain Society publication *Understanding and Managing Long Term Pain: Information for Patients and their Carers* and a list of self-help groups and other useful addresses to people affected by pain who contact the Society.
- In addition, the majority of the Society's professional publications, have a sister patient version.
- The Society has also contributed to joint patient information leaflets with other organisations.
- The Society launched a National Awareness Campaign for Pain, to raise the profile of pain and to generate income to the Society, which continues into 2019.

## 4. FINANCIAL REVIEW

As shown in the financial statements there are accumulated reserves of £830,653 of which £182,617 is in restricted funds, £161,563 being the sum of the Clulow legacy and interest.

The net SIG funds of £69,316 are designated within the Society accounts to further the activities of the specific SIGs.

The Society continues to support its educational activities, including Special Interest Group Conferences and a series of Study Days. These meetings may be supported by unconditional educational grants or sponsorship (transacted through the trading company) from various companies, and for transparency the SIG activities are accounted for separately. The Study Day reserve of £45,012 is to support the extra educational activity of the Society. The Council met on the 26th September 2018 and agreed that the Study Day reserves were to be used towards the 2018 ASM educational activities and therefore mitigated the shortfall. The previous accumulated ASM surpluses, which could only be used for educational purposes and to support future Annual Scientific Meetings, have now been depleted.

The Directors have reviewed the Society's needs for reserves in line with the guidance issued by the Charity Commission and have made the following provision:

- £300,000 in general funds is to be kept in reserve to cover the ongoing costs of the Society should there be a failure of income.
- The residue free reserves in the general fund of £270,946 to be used to further the aims and objects of the Society.

Sustainable finances remain an ongoing priority for the Society, and in 2018 we have seen a deficit. The

principal source of funding comes from the subscriptions of the members which were increased during 2018. The Directors recognised and had addressed where there have been significant changes in finances in 2018 and have therefore planned accordingly for 2019. Work to develop new income streams for the Society is underway with the anticipated appointment of Lay Council Members and a Fundraiser.

## 5. PLANS FOR FUTURE PERIODS

- The Society will continue to raise the profile of pain and generate income to the Society through a National Awareness Campaign for Pain.
- The British Pain Society's 52nd Annual Scientific Meeting will be held at the Hilton London Tower Bridge from 1-3 May 2019.
- The Society will review several of its existing publications; *Understanding and Managing Long Term Pain – information for patients, Cancer Pain and Spinal Cord Stimulation*.
- The Society will hold at least 4 Study Days during the course of the year; Torture & Suicide, Patients, Cancer Pain, and Philosophy & Ethics.
- The Society will for the first time hold two regional Study Days; Cardiff in June and York in July.
- The Headache SIG will be holding a one day event on 5th June 2019.
- A webinar on cannabis based medicines for pain is planned, with our Canadian colleagues.

- The Philosophy & Ethics Society SIG will hold their annual Conference from 24-26 June 2019 on 'Exploring the way ahead for pain medicine: caring for the patient and the clinician'.
- The Pain Management Programme SIG will hold their bi-ennial Conference from 11-12 September 2019 in Bristol on the theme of 'Placing the spotlight on the BiopsychoSOCIAL'.
- The Patient Liaison Committee will hold a Seminar in September 2019.

## 6. DIRECTORS FOR THE PERIOD

### 1ST JANUARY – 1ST MAY 2018

Dr A. P. Baranowski	President
Dr M. Johnson	Vice President
Dr P. Wilkinson	Vice President
Prof. R Knaggs	Honorary Secretary
Dr H. Cameron	Honorary Treasurer
Emeritus Prof. S. Ahmedzai	Council Member
Dr A. Bhaskar	Council Member
Mr P. Cameron	Council Member
D A. Eissa	Council Member
Dr T. Johnson	Council Member
Dr S. Love-Jones	Council Member
Dr Z. Malpus	Council Member
Dr D. G. Williams	Council Member

## DIRECTORS FOR THE PERIOD 2ND MAY – 31ST DECEMBER 2018

Dr A. P. Baranowski	President
Dr A. Bhaskar	President Elect
Prof. R Knaggs	Honorary Secretary
Dr A. Eissa	Hon. Sec Elect
Dr H. Cameron	Honorary Treasurer
Dr D. G. Williams	Hon. Treasurer Elect
Emeritus Prof. S. Ahmedzai	Council Member
Dr P. Brook	Council Member
Dr N. Collighan	Council Member
Dr A. Gulve	Council Member
Dr R. Krishnamoorthy	Council Member
Dr T. Johnson	Council Member
Dr S. Love-Jones	Council Member
Dr Z. Malpus	Council Member
Dr D. Pang	Council Member

## STAFF MEMBERS AS AT 31ST DECEMBER 2018

Ms Jenny Nicholas	Chief Executive Officer
Ms Dina Almuli	Secretariat Manager
Mr Dylan Taylor	Membership & Events Officer

## STATEMENT OF DIRECTORS' RESPONSIBILITIES

Company law requires the directors to prepare financial statements for each financial year which gives a true and fair view of the state of affairs of the company and of the profit or loss of the company during that period. In preparing those financial statements the directors are required to:

- (i.) select suitable accounting policies and then apply them consistently,
- (ii.) make judgements and estimates that are reasonable and prudent,
- (iii.) prepare financial statements on a going concern basis unless it is inappropriate to presume that the company will continue in business.

The directors are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the company and to enable them to ensure that the financial statements comply with the Companies Act 2006. 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. In preparing this report the directors have taken advantage of special provisions of the Companies Act 2006 relating to small companies.

Dated: 10th March 2019

Dr Heather Cameron (Honorary Treasurer)

The British Pain Society

## INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF THE BRITISH PAIN SOCIETY

I report to the charity trustees on my examination of the accounts of the group for the year ended 31st December 2018, which are set out on pages 68 to 70.

### **Responsibilities and basis of report**

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

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

### **Independent examiner's statement**

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

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

1. accounting records were not kept in respect of the group as required by section 386 of the 2006 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the accounting requirements of section 396 of the 2006 Act other than any requirement that the accounts give a 'true and fair view' which is not a matter considered as part of an independent examination; or

4. the accounts have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities [applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)].

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

Mrs N Poore, FCA  
Sandison Lang Limited  
2 St Mary's Road  
Tonbridge  
Kent  
TN9 2LB

20th March 2019

## CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES

(including consolidated income and expenditure account) For The Year Ended 31st December 2018

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

	Notes	Unrestricted funds £	Restricted funds £	Total 2018 £	Total 2017 £
<b>Income</b>					
Donations and legacies	4	160,738	-	160,738	175,873
Income from charitable activities	5	141,649	-	141,649	276,279
Income from other trading activities					
Commercial trading operations	6	67,243	-	67,243	88,591
Investment income	7	5,934	-	5,934	5,072
<b>Total income</b>		<b>375,564</b>	<b>-</b>	<b>375,564</b>	<b>545,815</b>
<b>Expenditure</b>					
Costs of Raising Funds					
Commercial trading operations		47,968	-	47,968	48,488
Expenditure on charitable activities	8	461,426	20,166	481,592	570,572
<b>Total Expenditure</b>		<b>509,394</b>	<b>20,166</b>	<b>529,560</b>	<b>619,060</b>
<b>Net income/expenditure</b>					
		(133,831)	(20,166)	(153,997)	(73,245)
Transfers between funds		-	-	-	-
<b>Net movement in funds</b>		<b>(133,831)</b>	<b>(20,166)</b>	<b>(153,997)</b>	<b>(73,245)</b>
<b>Reconciliation of funds:</b>					
Total Funds Brought Forward		781,867	202,783	984,650	1,057,895
<b>Total Funds Carried Forward</b>		<b>648,036</b>	<b>182,617</b>	<b>830,653</b>	<b>984,650</b>

The trustees have prepared group accounts in accordance with section 398 of the Companies Act 2006 and section 44 of the Charities and Trustee Investment (Scotland) Act 2005. These accounts are prepared in accordance with the special provisions of Part 15 of the Companies Act relating to small companies.

The notes on pages 72 to 89 form part of these financial statements.

Company Registration Number: 5021381

## CONSOLIDATED BALANCE SHEET

as at 31 December 2018

	Note	Group 2018 £	Group 2017 £	Charity 2018 £	Charity 2017 £
<b>Fixed Assets</b>					
Tangible assets	16	4,847	6,059	4,847	6,059
<b>Total fixed assets</b>					
<b>Current Assets</b>					
Debtors	17	85,300	39,960	87,260	44,051
Cash at bank and in hand		905,425	1,048,913	898,049	1,036,381
<b>Total Current Assets</b>					
<b>Liabilities</b>					
Creditors: falling due within 1 year	18	164,919	110,282	160,894	103,210
<b>Net Current assets</b>					
		825,806	978,591	824,416	977,222
<b>Total assets less current liabilities</b>					
		830,653	984,650	829,263	983,281
Creditors: amounts falling due after more than 1 year		-	-	-	-
<b>Net assets</b>					
		830,653	984,650	829,263	983,281
<b>Funds of the Charity</b>					
		20			
Unrestricted income funds		648,036	781,867	646,646	780,498
Restricted Funds		182,617	202,783	182,617	202,783
<b>Total Charity Funds</b>					
		830,653	984,650	829,263	983,281

Approved by the Directors on 10th March 2019

Signed on their behalf by Director

Dr H. Cameron

## STATEMENT OF CASHFLOWS AND CONSOLIDATED STATEMENT OF CASHFLOWS

for the year ending 31st December 2018

	Group 2018 £	Group 2017 £	Charity 2018 £	Charity 2017 £
<b>Cash used in operating activities</b> (a)	(149,422)	(28,338)	(144,266)	9,578
<b>Cash used from investing activities</b>				
Interest income	5,934	5,072	5,934	5,072
Purchase of tangible fixed assets	0	(5,173)	0	(5,173)
<b>Cash provided by (used in) investing activities</b>	5,934	(101)	5,934	(101)
<b>Cash flows from financing activities</b>				
Repayment of borrowing	-	-	-	-
<b>Cash used in financing activities</b>	-	-	-	-
Increase/(decrease) in cash and cash equivalents in the year	(143,488)	(28,439)	(138,332)	9,477
Cash and cash equivalents at the start of the year	1,048,913	1,077,352	1,036,381	1,026,904
<b>TOTAL cash and cash equivalents at the end of the year</b> (b)	905,425	1,048,913	898,049	1,036,381

(a) Reconciliation of net movement in funds to net cash flow from operating activities

## STATEMENT OF CASHFLOWS AND CONSOLIDATED STATEMENT OF CASHFLOWS

continued, for the year ending 31st December 2018

	Group 2018 £	Group 2017 £	Charity 2018 £	Charity 2017 £
Net movement in funds	(153,997)	(73,245)	(154,018)	(73,278)
Add back depreciation charge	1,212	1,514	1,212	1,514
Deduct interest income shown in investing activities	(5,934)	(5,072)	(5,934)	(5,072)
Decrease/(increase) in stock	-	-	-	-
Decrease/(increase) in debtors	(45,340)	160,898	(43,209)	101,022
Increase/(decrease) in creditors	54,637	(112,433)	57,684	(14,608)
<b>Net cash used in operating activities</b>	<b>(149,422)</b>	<b>(28,338)</b>	<b>(144,266)</b>	<b>9,578</b>

### (b) Analysis of cash and cash equivalents

	Group 2018 £	Group 2017 £	Charity 2018 £	Charity 2017 £
Cash at bank and in hand	835,425	844,388	828,049	831,856
Fixed Term Bond	70,000	204,525	70,000	204,525
<b>Total cash and cash equivalents</b>	<b>905,425</b>	<b>1,048,913</b>	<b>898,049</b>	<b>1,036,381</b>

## NOTES TO THE FINANCIAL STATEMENTS

### 1. Accounting policies

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are as follows:

#### a) 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 (FRS102) (effective 1 January 2015) - (Charities SORP (FRS102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) and the Companies Act 2006.

The British Pain Society 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 policy note.

#### Preparation of accounts on a going concern basis

Preparation of the accounts is on a going concern basis.

The Trustees are of the view that the level of reserves will support the charity going forward.

#### c) Income

All incoming resources are included on the Statement of Financial Activities when the charity is legally entitled to the income, it is probable the income will be received and the amount can be quantified with reasonable accuracy.

#### d) 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.

#### e) Fund accounting

Unrestricted funds are available to spend on activities that further any purposes of the charity. Designated funds are unrestricted funds of the charity which the trustees have decided at their discretion to set aside to use for a specific purpose. Restricted funds are donations which the donor has specified are to be solely used for particular areas of the Society's work or for specific projects being undertaken

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

**f) Expenditure**

Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources. Grants offered subject to conditions which have not been met at the year end date are noted as a commitment but not accrued as expenditure.

**g) Allocation of support costs**

Support costs include central functions and have been allocated to the activity cost category of the Annual Scientific Meeting on a basis consistent with the use of resources. The basis is set out in note 3.

**h) Tangible fixed assets**

Tangible fixed assets are stated at cost less depreciation. Assets costing less than £500 are written off in the year of purchase. Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life as follows:

Office Equipment - 20% on a reducing balance basis.

**i) Pensions**

The charity operates a defined contribution pension scheme. Contributions are charged to the Statement of Financial Activities as they become payable in accordance with the rules of the scheme. The charity is under no further obligation to make any extra payments irrespective of how that pension fund performs.

**j) Operating leases**

Rental charges payable under operating leases are charged on a straight line basis over the terms of the lease.

**k) Taxation**

The charity is exempt from tax on its charitable activities.

**l) Group financial statements**

The financial statements consolidate the results of the charity and its wholly owned subsidiary BPS Pain Business Ltd.

A separate Income and Expenditure Account for the charity has not been presented because the charity has taken advantage of the exemption afforded by section 408 of the Companies Act 2006.

The charity is a company limited by guarantee and has no share capital. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the charity.

#### **m) Donated services and facilities**

Donated professional services and donated facilities are recognised as income when the charity has control over the item, any conditions associated with the donated item have been met, the receipt of economic benefit from the use by the charity of the item is probable and that economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), the general volunteer time is not recognised and refer to the trustees' annual report for more information about their contribution. On receipt, donated professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

#### **2. Legal status of the charity**

The charity is a company limited by guarantee and has no share capital. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the charity.

#### **3. Financial performance of the charity**

The statement of financial activities includes income from the charity's wholly owned subsidiary which operates the trade exhibition at the Annual Scientific Meeting, and other trading activities, under licence from the charity.

**Basis on which support costs have been allocated to the activity Annual Scientific Meeting (ASM):**

As agreed for 2018, some staff and office costs are apportioned 60% to the Annual Scientific Meeting and 40% to general fund costs. These are shown above as the office cost contribution. 100% of the annual independent examination cost is attributed this year to this meeting being £1,250 (2017 : 100% of annual audit cost £3,420).

The summary performance of the charity is:

	Unrestricted Funds £	Restricted Funds £	Total 2018 £	Total 2017 £
Incoming resources - charity only	308,320	-	308,320	457,224
Income from subsidiary company paid under licence	18,913	-	18,913	36,600
Corporate donation	341	-	341	3,470
	327,574	-	327,574	497,294
Expenditure on charitable activities - charity only	461,426	20,166	481,592	570,572
<b>Net incoming resources</b>	(133,852)	(20,166)	(154,018)	(73,278)
Total funds brought forward	780,498	202,783	983,281	1,056,559
<b>Total funds carried forward</b>	646,646	182,617	829,263	983,281
Represented by:				
Unrestricted income funds	646,646	-	646,646	780,898
Restricted Funds	-	182,617	182,617	202,783
	646,646	182,617	829,263	983,681

The charity only performance of the Annual Scientific Meeting is:

	Unrestricted Funds £	Restricted Funds £	Total 2018 £	Total 2017 £
<b>Income</b>	119,548	-	119,548	210,678
ASM office costs paid under licence	18,913	-	18,913	36,600
	138,461	-	138,461	247,278
<b>Expenses</b>				
Room hire	50,040	-	50,040	87,600
Venue-miscellaneous	1,634	-	1,634	1,327
Printing	3,120	-	3,120	6,896
Help at venue	-	-	-	918
Speakers expenses (inc.travel & accom)	4,206	-	4,206	8,650
Refreshments	25	-	25	44,140
Out sourced event management	-	-	-	-
Poster prizes	47	-	47	97
Poster boards & advertising	2,084	-	2,084	3,367
Gifts	1,310	-	1,310	1,084

	Unrestricted Funds £	Restricted Funds £	Total 2018 £	Total 2017 £
Van hire	503	-	503	376
Coaching	-	-	-	275
Council	6,060	-	6,060	6,204
Staff	2,551	-	2,551	3,200
PLC committee members	828	-	828	764
Social programme	9,371	-	9,371	10,838
Insurance	2,640	-	2,640	1,697
Badges	729	-	729	696
Contingency- additional purchases	801	-	801	545
Miscellaneous	-	-	-	180
Bursaries	1,240	-	1,240	2,715
AVA's/data projection	26,901	-	26,901	6,523
Stuffing delegates bags	-	-	-	683
ASM registration fee bank charges	-	-	-	642
	114,090	-	114,090	189,417
Office cost contribution	157,547	-	157,547	166,941
Total cost	271,637	-	271,637	356,358
<b>Net movement in funds</b>	(133,177)	-	(133,177)	(109,080)

The income from donations and legacies was £1,378 (2017 : £1,720) of which £1,378 was unrestricted (2017 : £1,720) and £nil restricted (2017 : £nil).

Corporate Donation total £341. (2017: Total £3,470, SIG fund transfer £2,325, Study Day £1,145)

#### 4. Income from donations and legacies

	Group 2018 £	Group 2017 £	Charity 2018 £	Charity 2017 £
Donations	1,379	1,720	1,379	1,720
Legacies	-	-	-	-
Gift aid received	341	-	341	-
Subscriptions	159,009	172,973	159,009	172,973
Corporate donation (note 13)	-	-	341	3,470
Credit Card Charges	9	1,180	9	1,180
<b>Total</b>	<b>160,738</b>	<b>175,873</b>	<b>161,078</b>	<b>179,343</b>

## 5. Income from charitable activities

	Group 2018 £	Group 2017 £	Charity 2018 £	Charity 2017 £
Meeting income	119,547	210,678	119,548	210,678
Publications	27	16	27	16
Research awards and grants	2,000	-	2,000	-
SIGS	5,970	50,268	5,970	50,268
Focus on Pain Research Meeting	9,800	-	9,800	-
Other income	4,295	15,295	4,295	15,295
Pain Awareness Campaign	10	22	10	22
<b>Total</b>	<b>141,649</b>	<b>276,279</b>	<b>141,650</b>	<b>276,279</b>

## 6. Income from other trading activities

	Group 2018 £	Group 2017 £	Charity 2018 £	Charity 2017 £
Trading	67,243	88,591	-	36,600
<b>Total</b>	<b>67,243</b>	<b>88,591</b>	<b>-</b>	<b>36,600</b>

## 7. Investment income

The investment income arises from money held in interest bearing deposit accounts.

	Group 2018 £	Group 2017 £	Charity 2018 £	Charity 2017 £
Interest received	5,934	5,072	5,934	5,072
<b>Total</b>	<b>5,934</b>	<b>5,072</b>	<b>5,934</b>	<b>5,072</b>

## 8. Expenditure on charitable activities

	Group 2018 £	Group 2017 £	Charity 2018 £	Charity 2017 £
Research grants	20,000	15,000	20,000	15,000
Meeting expenses	271,637	356,358	271,637	356,358
Sub-Committee expenses	9,240	6,454	9,240	6,454
Core Com/SIGS	24,838	34,987	24,838	34,987
SIGS- Chairs meetings	1,624	1,746	1,624	1,746
Working parties	-	391	-	391
PLC annual voluntary seminar	166	388	166	388
Study days	-	619	-	619
Professional meetings	1,481	-	1,481	-
Other meeting expenses	1,101	1,361	1,101	1,361
Miscellaneous expenses	60	36	60	36
Newsletter & Journal	38,680	36,584	38,680	36,584
Website	100	792	100	792
Publications	168	2,689	168	2,689
Rent & service charges	19,205	15,119	19,205	15,119
Secretariat & other staff costs	52,696	62,593	52,696	62,593
Printing & postage	430	979	430	979
Telephone & fax costs	1,653	2,294	1,653	2,294
Computer system & software	4,784	5,342	4,784	5,342
Equipment hire & storage	488	477	487	477
Premises rates & insurance	1,746	1,648	1,746	1,648
Office stationery & photocopying	1,263	2,261	1,263	2,261
Professional fees	420	1,142	420	1,142
Subscriptions	609	640	609	640
Bank charges	1,445	2,089	1,445	2,089
Depreciation & asset adjustment	1,212	1,514	1,212	1,514
Council expenses	4,405	3,214	4,405	3,214
Induction of trustees & trustee training	327	256	327	256
Accountancy	11,524	10,613	11,524	10,613
Legal fees	5	5	5	5
Annual report	2,212	2,238	2,212	2,238
Pain Awareness Campaign	73	514	73	514
Focus on Pain Research Meeting	8,000	-	8,000	-
Parliamentary Reception	-	229	-	229
<b>Total</b>	<b>481,592</b>	<b>570,572</b>	<b>481,592</b>	<b>570,572</b>

## 9. Summary analysis of expenditure on charitable activities

This table shows the cost of the main charitable activities including support costs and grant funding to third parties.

Activity or programme	Note	Activities undertaken directly £	Grant funding of activities £	Support costs costs £	Total £
ASM		112,849	1,240	157,547	271,637
Charitable grants	(note 14)	-	20,000	-	20,000
Newsletter and publications		38,848	-	-	38,848
Secretariat costs		144,163	-	-	144,163
Governance costs		6,944	-	-	6,944
		302,804	21,240	157,547	481,592

## 10. Net income/(expenditure) for the year

This is stated after charging:

	Group 2018 £	Group 2017 £	Charity 2018 £	Charity 2017 £
Depreciation	1,212	1,514	1,212	1,514
Auditor's remuneration:				
Audit Fees	-	5,050	-	3,420
Accountancy services	-	-	-	-
Independent Examination Fees	3,200	-	1,250	-
	4,412	6,564	2,462	4,934

100% of staff costs shown right, but expense split 40% charged to general fund and 60% to ASM meeting costs.

No employee had employment benefits in excess of £60,000 (2017 : nil). Pensions are wholly charged to unrestricted funds.

The trustees were not paid or received any other benefits from employment with the charity in the year but were reimbursed expenses during the year of £8,960 which is part of the analysis below for 2018 £11,014.(2017: £7,998).

No charity trustee received payment for professional or other services supplied to the charity (2017 : nil)

All of the staff costs relate to key management personnel of the charity and the group, comprising the Chief Executive Officer, Secretariat Manager and Events and Membership Officer.

## 11. Analysis of staff costs, trustee remuneration and expenses and the cost of key management personnel - charity (also comprising that of the group)

	100% 2018 £	100% 2017 £
Salaries and wages	84,182	112,979
Social security costs	2,735	9,074
Pension costs	9,127	14,813
Temporary staff costs	28,729	11,088
<b>Council expenses</b>	<b>124,774</b>	<b>147,954</b>
Meeting - Catering	3,209	2,700
Meeting - Room Hire / Telecons	216	378
Meeting - Travelling	7,437	4,715
Meeting - Hotels	153	205
	<b>11,014</b>	<b>7,998</b>

## 12. Staff numbers - charity (also comprising that of the group)

The average monthly head count of full-time equivalent employees (including casual and part-time staff) during the year were as follows:

	2018	2017
Charitable activities	2.5	3.5
	<b>2.5</b>	<b>3.5</b>

### 13. Related party transactions

In 2018 the following transactions took place between the charity and its wholly owned trading subsidiary: BPS Pain Business Ltd, company number 9220078 England and Wales.

- The provision of an operating licence, renewable annually by the charity to BPS Pain Business Ltd to further trading activity connected to the charity £18,913 (2017: £36,600).
- The transfer under gift aid of the trading profits of BPS Pain Business Ltd to the charity totalled £341 split
- £341 received to the general fund (2017: £3,470 split as £1,145 to 38th Study Day, £2,025 transferred to the Pain Management SIG designated fund and £300 to te Acute Pain SIG designated fund.

There were no outstanding balances with related parties as at 31 December 2018 (2017 : nil).

### 14. Grants - charity (also comprising that of the group)

The attached annual report details the grants offered by the charity.

The Clulow Award is awarded bi-annually (up to a maximum of £50,000), and is paid in four instalments at agreed milestones. 2017 was a Clulow Award year, with

the first instalment being paid in 2018. The first three instalments will be paid at 30% of the total grant value and the fourth at 10%, each against an invoice from the receiving institution. The first instalment will be transferred following receipt of the signed grant award letter. The second and thirds instalments will be paid on receipt and approval by The British Pain Society of two progress reports to be submitted at 12 and 18 months from the date of receipt of grant award letter. A final instalment of 10% will be paid upon receipt of the study final report.

The 2018 there was no P. Wall grant awarded (2017 : £0). Bursaries for the charity 2018 Annual Scientific Meeting totalled £1,240(2017 : £2,715).

#### 2018 Reconciliation:

2018 Clulow	20,000
	20,000
2018 bursaries	1,240
<b>Total grants and bursaries awarded:</b>	<b>21,240</b>

### 15. Corporation tax

The charity is exempt from tax on income and gains falling within section 505 of the taxes Act 1988 or section 252 of the Taxation of Chargeable Gains Act 1992 to the extent that these are applied to its charitable objects.

## 16. Tangible fixed assets -charity (also comprising that of the group)

	Office Equipment £	Fixtures & Fittings £	Total £
Cost:			
Adjusted at 1st January 2018	11,725	12,326	24,051
Additions	-	-	-
Disposals	-	-	-
<b>As at 31 December 2018</b>	<b>11,725</b>	<b>12,326</b>	<b>24,051</b>
Depreciation:			
As at 1 January 2018	6,586	11,406	17,992
Charge for the year	1,028	184	1,212
Disposals	-	-	-
<b>As at December 2018</b>	<b>7,614</b>	<b>11,590</b>	<b>19,204</b>
Net book value:			
<b>As at 1 January 2018</b>	<b>5,139</b>	<b>920</b>	<b>6,059</b>
<b>As at 31 December 2018</b>	<b>4,111</b>	<b>736</b>	<b>4,847</b>

## 17. Debtors & prepayments

	Group 2018 £	Group 2017 £	Charity 2018 £	Charity 2017 £
Meeting pre-payments	71,583	7,572	63,356	3,665
Charity Invoices	13,376	32,388	23,223	36,916
Corporate donation	-	-	341	3,470
Gift Aid Tax recoverable	341	-	341	-
	<b>85,300</b>	<b>39,960</b>	<b>87,260</b>	<b>44,051</b>

## 18. Creditors: amounts falling due within 1 year

	Group 2018 £	Group 2017 £	Charity 2018 £	Charity 2017 £
Trade creditors	101,060	35,267	101,581	30,246
Advance meeting costs	-	2,435	-	2,435
Subscriptions Advanced Payments	59,313	68,754	59,313	68,754
Accruals	3,212	1,850	-	-
Taxation and VAT	1,334	1,976	-	1,775
	164,919	110,282	160,894	103,210

## 19. Analysis of charitable funds

Analysis of movements in unrestricted funds:

### General fund

The free reserves of the charity after allowing for all designated funds.

	2018 £	2017 £
Balance at 1st January	577,111	639,595
Income	231,133	245,944
Expenditure	(212,919)	(214,326)
Transfer between funds Irene Bainbridge legacy	22,208	-
Transfers between funds - PLC	-	-
Transfers between funds - SIGs	-	2,230
Transfer between funds- ASM	45,012	-
Transfer between funds - Pathways I&D	16,578	-
Transfer between funds- Other Designated reserves	25,000	-
Transfers between funds - ASM	(133,177)	(96,332)
Movement in funds	(6,165)	(62,484)
<b>Total general reserves at 31st December</b>	<b>£570,946</b>	<b>£577,111</b>

Within the general fund of the charity are £51,903 of reserves received as a corporate donation from the wholly owned trading company (2017 : £51,562).

### Analysis of movements in designated funds:

The Council met on 26th September 2018 and agreed to move designated funds into the general funds (with the exception of the designated Map of Medicine fund).

### Irene Bainbridge Legacy

The following designated fund is the sum from a legacy received in 2005, from Irene Bainbridge. It was agreed in 2013 to re-designate from: "Basic research into the causes and cures for pain", to the Society's IT Project Review.

The funds received in 2015 were "set aside" for a new fund. The residual balance of the IT Project is now to be spent as part of the new fund designation.

	2018 £	2017 £
Balance at 1st January	22,208	22,208
Income "Set Aside " fund	-	-
Expenditure	-	-
Transfer between funds	(22,208)	-
Movement in funds	(22,208)	-
<b>Balance as at 31st December</b>	<b>£-</b>	<b>£22,208</b>

### ASM

The Designated ASM Funds are accumulation of surpluses from meetings over several years and are to be spent on education and research. These funds are represented by:

	2018£	2017 £
Balance at 1st January	-	12,748
Income	138,461	247,278
Expenditure	(271,637)	(356,358)
Transfer between funds - Study Days and Education Days	45,012	-
Transfer between funds - General fund	(45,012)	-
Transfer between funds	133,177	96,332
Movement in funds	-	(12,748)
<b>Balance as at 31st December</b>	<b>£-</b>	<b>£-</b>

## SIGS

The Designated SIGS funds also accumulate surpluses which are to be spent to further the work of the individual SIGS as listed on page 34.

These funds are represented by:

	2018 £	2017 £
Balance at 1st January	88,184	70,578
Income	5,970	52,593
Expenditure	(24,838)	(32,757)
Transfer to general funds (internal allocation of expenses)	-	(2,230)
Movement in funds	(18,868)	17,606
<b>Balance as at 31st December</b>	<b>£69,316</b>	<b>£88,184</b>

No activity was recorded in 2018 and therefore within the SIGS funds of the charity are £21,100 of reserves received as a donation from the wholly owned trading company (2017 : £21,100).

## Study Days and Education Days

The designated Study Days and education days funds also accumulate surpluses which are to be spent on furthering those educational activities.

	2018 £	2017 £
Balance at 1st January	45,012	45,631
Income	-	-
Expenditure	-	(619)
Transfer between funds	(45,012)	-
Movement in funds	(45,012)	(619)
<b>Balance as at 31st December</b>	<b>£-</b>	<b>£45,012</b>

The Council met on the 26th September 2018 and agreed that the Study Day designated funds were to be used

towards the 2018 ASM educational activities and therefore mitigated the shortfall.

### Map of Medicine Pathways

	2018 £	2017 £
Balance at 1st January	7,774	7,774
Income	-	-
Expenditure	-	-
Movement in funds	-	-
<b>Balance as at 31st December</b>	<b>£7,774</b>	<b>£7,774</b>

### Pathways I&D

	2018 £	2017 £
Balance at 1st January	16,578	16,578
Income	-	-
Expenditure	(16,578)	-
Transfer between funds	-	-
Movement in funds	(16,578)	-
<b>Balance as at 31st December</b>	<b>£-</b>	<b>£16,578</b>

### Other designated reserves

	2018 £	2017 £
Balance at 1st January	25,000	25,000
Income	-	-
Expenditure	-	-
Transfer between funds	(25,000)	-
Movement in funds	(25,000)	-
<b>Balance as at 31st December</b>	<b>£-</b>	<b>£25,000</b>

### PLC seminar sponsorship

The PLC seminar received no sponsorship and therefore the brought forward loss was written off against the general fund:

	2018 £	2017 £
Balance at 1st January	-	-
Income	-	-
Expenditure	-	-
Transfer from General Funds	-	-
Movement in funds	-	-
<b>Balance as at 31st December</b>	<b>£-</b>	<b>£-</b>
<b>Total designated reserves at 31st December</b>	<b>£77,090</b>	<b>£204,756</b>

Analysis of movements in restricted funds:

### Legacy

The following restricted fund is the sum and associated interest from a legacy received from Mildred B and Elaine Clulow.

The restriction is as follows: "Basic research into the causes and cures for pain".

	2018 £	2017 £
Balance at 1st January	181,563	196,563
Income	-	-
Expenditure	(20,000)	(15,000)
Interest	-	-
Movement in funds	(20,000)	(15,000)
<b>Balance at 31st December</b>	<b>£161,563</b>	<b>£181,563</b>

## Grants

	2018 £	2017 £
<b>GP/Primary Care Publications</b>		
Balance at 1st January	20,220	20,220
Income (GP Pain Patient Pathway Booklet)	-	-
Expenditure (GP Pain Patient Pathway Booklet)	-	-
Reserves Transfer (GP/Primary Care Publication)	-	-
Movement in funds	-	-
<b>Balance at 31st December</b>	<b>£20,220</b>	<b>£20,220</b>
<b>PLC Seminar</b>		
Balance at 1st January	1,000	£-
Income	-	£1,000
Expenditure	(166)	£-
Movement in funds	166	£-
<b>Balance at 31st December</b>	<b>£834</b>	<b>£1,000</b>
<b>Total restricted reserves at 31st December</b>	<b>£182,617</b>	<b>£202,783</b>

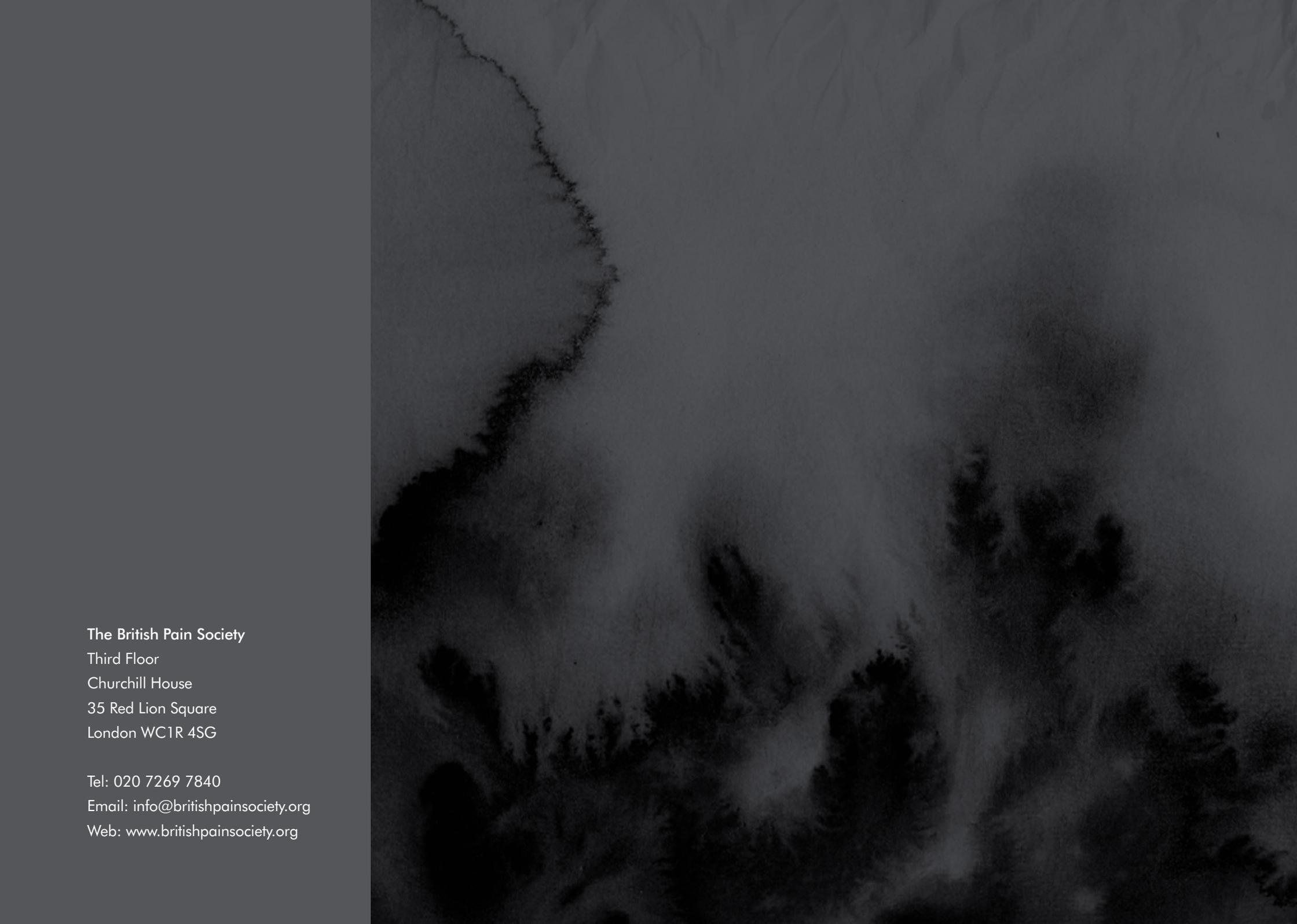
## 20. Analysis of group net assets between funds

	General Fund £	Designated Reserves £	Restricted Reserves £	31.12.2018 Total £	31.12.2017 Total £
Fixed assets:	4,847	-	-	4,847	6,059
Net current assets:	-	-	-	-	-
General	566,099	-	-	566,099	571,052
Designated: I Bainbridge	-	-	-	-	22,208
Designated: ASM	-	-	-	-	-
Designated: SIGS	-	69,316	-	69,316	88,184
Designated: Study Days & Education Days	-	-	-	-	45,012
Designated: Reserves	-	-	-	-	25,000
Designated: Map of Medicine Pathways	-	7,774	-	7,774	7,774
Designated: Pathways I & D	-	-	-	-	16,578
Designated: PLC Seminar	-	-	-	-	-
Restricted : Clulow	-	-	161,563	161,563	181,563
Restricted : Grants	-	-	20,220	20,220	20,220
Restricted : PLC Seminar	-	-	834	834	1,000
	570,946	77,090	182,617	830,653	984,650

## 21. Summary trading account

The summary financial position of the subsidiary alone is:

	2018 £	2017 £
Turnover	67,243	88,591
Cost of sales and administration costs	(47,962)	(48,480)
Corporation tax	(6)	(8)
Profit	19,275	40,103
Amount gift aided to the charity	(19,254)	(40,070)
<b>Retained in subsidiary</b>	<b>21</b>	<b>33</b>



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