

TRUSTEES' ANNUAL REPORT 2019

A new era in HIV prevention, care and sexual health



















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FOREWORD

As Chair, it's my pleasure to introduce this year's Trustees' Report for Terrence Higgins Trust.

In the last year, our dedicated staff, volunteers and supporters have risen to the immense challenges of our work. Without them, we would not have reached this critical moment in the history of the HIV crisis in the UK.

From compelling interactive films to tackle HIV stigma to pioneering new ways to encourage HIV testing and improve access to PrEP, and our key role in ensuring LGBT+-inclusive Relationships and Sex Education will be compulsory in all schools in England, we have much to be proud of in the pages that follow.

During the year, the UK reached the United Nations' HIV target ahead of time with 92% of people diagnosed; 98% of those on treatment; and 97% of those virally suppressed, which means they can't pass on HIV.

We built on this incredible achievement by successfully lobbying governments in Wales and England to look even further ahead and commit to ending HIV transmissions by 2030. With this clear and ambitious target, it's more important than ever that we stay focused and our work continues to hold governments to account on their commitments. We have not, as yet, secured a government response to the escalating sexual health crisis in the country.

As you will see, there is still so much work to be done. As HIV diagnoses fall again, many people

are still being diagnosed late, after damage has been done. Black African communities are disproportionately affected by this, and our work over the last year has sought to address this, along with HIV stigma, which can act as a barrier to testing.

By working alongside people in the communities most affected by HIV and poor sexual health to create and amplify our campaigns and programmes, we help our beneficiaries to tell their stories – the most powerful tool we have in the fight to end HIV transmissions and improve the nation's sexual health.

To ensure we are meeting the needs of the people we support at every step, we've begun a three-year project to look at beneficiary involvement in the charity, with funding from the National Lottery Community Fund.

We are moving towards establishing 'hubs', clearly branded as Terrence Higgins Trust, and offering services geared to local needs in each area. Our first hub will be opened in Glasgow in early 2020 while in London, following the sale of the Gray's Inn Road building, we will be moving to a suitable property during the year.

As we plan for our future, our strategic aims remain the same as we continue our work to end HIV transmissions, provide vital support for people living with HIV and affected by poor sexual health and to amplify the voices of people with lived experience. Our staff, volunteers and supporters continue to work creatively and with passion to bring this about. I have no doubt this will continue in the years to come.

Jonathan McShane Chair, Board of Trustees



OBJECTIVES, MISSION AND VISION

Terrence Higgins Trust is at the forefront of the fight against HIV and to improve the nation's sexual health. Our vision, mission and values are set out below.

OUR VISION

A world where people with HIV live healthy lives free from prejudice and discrimination, and good sexual health is a right and reality for all.

OUR MISSION

- To end the transmission of HIV in the UK.
- To empower and support people living with HIV to lead healthy lives.
- To amplify the voices of those affected by HIV, across public and political arenas, to eradicate stigma and discrimination.
- To enable all people to enjoy good sexual health.

OUR VALUES

- Ambitious: We believe individuals, and communities, are a force for positive change. We drive ourselves, and others, to make things happen.
- **Honest:** We communicate clearly, taking responsibility for both successes and challenges. We are transparent and accountable to our communities, donors and funders.
- **Different:** We are radical professionals, proud of our diversity and united by a common cause. We support, respect and value each other, and work without prejudice.
- Independent: We are an independent charity, rooted in the communities we serve. We use our voice to challenge and inspire change in health services, public policy and people's attitudes.

In developing its objectives for the year, Terrence Higgins Trust has considered the Charity Commission's guidance on public benefit. We believe that the range and accessibility of the services and activities offered and undertaken by the charity clearly demonstrate the public benefit that our work provides.

STRATEGIC REPORT

Over the last year, we have continued to focus on achieving the aims set out in our 2016-2021 Organisation Strategy, Bold Ambitions, to create a new era in HIV prevention, care and sexual health. To drive forward progress, we have renewed our commitment to assessing how we are delivering on our aims and to make sure that at every step, we are putting our beneficiaries at the heart of everything we do.

ACHIEVEMENTS AND PERFORMANCE – OUR YEAR IN OVERVIEW

An estimated 101,600 people are living with HIV in the UK, with 8% of these unaware of their HIV status. In 2018, Public Health England reported that the number of people diagnosed with HIV in the UK saw a 17% decline on the previous year.

This year will be remembered as a key moment in the work to end new HIV transmissions, with the UK meeting – and exceeding - the UNAIDS 90-90-90 targets¹.

This great success is thanks to a combination of prevention methods: people are testing more, getting diagnosed and starting HIV treatment earlier, and staying protected by using condoms and pre-exposure prophylaxis (PrEP).

OUR CHALLENGES

While there is much to celebrate, hard challenges remain and we have much work to do.

Rates of late HIV diagnosis remain stubbornly high especially in black African communities, and outside of London new diagnoses are declining at a much slower rate. Despite excellent treatment outcomes, people living with HIV are much more likely to have poor mental health.

Sexual health services are facing cuts while rates of some sexually transmitted infections (STIs) like gonorrhoea and syphilis have increased by 20% in 2018. There have been reports that people with symptomatic STIs have been turned away at clinics.

It's vital we continue to promote our prevention and testing tools in targeted ways to address these challenges and inequalities, and continue to provide essential services that support people living with HIV. Services and interventions are urgently needed to ensure that by 2030 the pledge to end HIV transmissions in England and Wales is made a reality.

OUR PERSISTENCE PAYS OFF

PrFP

We have kept up pressure on NHS England to expand the PrEP Impact Trial to make PrEP available to all those who need it. Following an additional 3,000 places added in September 2018, earlier this year the Secretary of State for Health and Social Care, Matt Hancock MP promised to double places on the trial. However, there still remains no timetable for this happening; only 67% of Trial sites outside of London and 60% London Local Authorities have agreed to the increase in places.

Over 100 Trial sites (over 50%) are now closed to gay and bisexual men and eight Trial sites have still yet to open. We will continue to pressure

¹Public Health England (2018). Progress towards ending the HIV epidemic in the United Kingdom 2018 report. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/759408/HIV_annual_report_2018.pdf



the government to ensure uncapped access to this vital HIV prevention tool.

In Wales, we have worked to increase uptake of the uncapped PrEP study as part of the national PrEP steering group. Our lobbying and campaigning work alongside Stonewall Cymru was a major factor in the Welsh Government's decision to introduce the three-year trial.

Relationships and Sex Education (RSE)

In March of this year, we won a victory in our fight for compulsory LGBT+-inclusive RSE lessons in all secondary schools, and inclusive **Relationships Education** lessons in all primary schools. At a time when we are seeing high rates of STIs in young people and funding for sexual health services is being cut, it's all the more important that we continue to hold the government to account to ensure the promise of inclusive RSE is fulfilled by the deadline of 2020.

HPV vaccination for boys

After years of campaigning, we welcomed the announcement by the UK Government that the HPV vaccine will be extended to boys in England, following similar announcements from the governments of Scotland and Wales. We are continuing to push for a catch-up programme administered in schools for boys aged 14 to 18 years old. The programme for girls has already seen a big impact on the number of cases of HPV-related warts.

OUR MESSAGES HAVE IMPACT

Can't Pass It On

Following the successful Can't Pass It On campaign in 2017, we relaunched a myth-busting multi-channel campaign aiming to end HIV stigma, and cut HIV transmissions. Again, the simple and powerful message anchored many pieces of media coverage we secured over the past 12 months, helping us to battle stigma,

discrimination and myths about HIV among a range of different national and regional audiences.

National HIV Testing Week (NHTW)

National HIV Testing
Week provides amplified
opportunities for people who
would otherwise never test
to do so, and prompts all
people at risk to get tested.
Continuing from the previous
year's successful campaign
creative, the key message in
2018 was Give HIV the finger,
highlighting that a finger-prick
test is all it takes.

Clinics and community organisations held over 300 testing and promotion events around the country. HIV Prevention England and our local activation partners tested MPs across England, including the Secretary of State for Health and Social Care, Matt Hancock.

His Royal Highness The
Duke of Sussex shared an
important message in a
VIDEO recorded for NHTW
encouraging people to get
tested. The video achieved
100,000 views on Kensington
Palace's official Twitter feed.
The campaign achieved
significant coverage in
mainstream media as well as
targeted features in LGBT+ and
African press, TV and radio.

World AIDS Day

This World AIDS Day was a historic moment for everyone taking part as we marked 30 years of the day dedicated to raising awareness of HIV and remembering those we have lost. This year, we asked our supporters to: 'celebrate the progress we've made in their memory, and stand shoulder to shoulder to work together to hit zero HIV transmissions and zero HIV stigma.'

The #ZeroHIV hashtag was a key focus as we called for zero HIV transmissions by 2030. Our media work also highlighted stigma, and we published our survey of over 1,350 people living with HIV that explores the fear and experience of stigma. This coincided with the release of a range of videos we shot with six HIV activists.

Events were held all over the UK, and the #ZeroHIV hashtag came to life and resonated with many, featuring in interviews and articles across national, regional and sector broadcast, print and online media.

We were proud to support Lloyd Russell-Moyle MP, who disclosed he is living with HIV during a parliamentary debate marking World AIDS Day.

One of the highlights of the day was a special performance of The Inheritance at the Noël Coward Theatre, with guests including Stephen Fry, Paris Lees and our Chief Executive, Ian Green. The play, by Matthew Lopez and produced by Sonia Friedman, a Patron of Terrence Higgins Trust, is a powerful look at

what it's like to be a gay man in New York a generation after the peak of the AIDS crisis.

lan said: 'This important play not only reminds us of how far we've come in the fight against HIV, but also how much more there still is to do.'

OUR RESEARCH AND EXPERTISE IS RECOGNISED

Public health contracts

We secured extended contracts in Suffolk and Cambridgeshire and were successful in our bid to develop a LGBT Health and Wellbeing Service in Luton.

In the West of England, we secured a new contract in Oxfordshire but have faced challenges in the West Midlands with the loss of some contracts. In Wales, we are in the process of reviewing our strategy to maximise our ability as an organisation to face uncertain contract futures in the coming year.

Macfarlane Trust

Macfarlane Trust was set up in 1988 by the UK Government to support people with haemophilia who were infected with HIV as a result of contaminated NHS blood products, and their spouses, partners, carers and dependants. Last December, following distribution of the final grants, the charity was closed, and any residual funds and assets have been transferred to the Terrence Higgins Trust. We look forward to supporting former Macfarlane beneficiaries in the future.

Women and HIV: Invisible no longer

In April 2018, we presented our report *Women* and *HIV: Invisible no longer*, a one-year project led by Sophia Forum and Terrence Higgins Trust. It set out clear recommendations for policy and service development to ensure that greater focus is given to women affected by HIV.

We are now working with Public Health England (PHE) to ensure that women are more fully represented in HIV research. The first step in this journey has been the welcome move by PHE to include women specific data tables in their annual release, a key recommendation in our report.

Peer research

We continue to integrate peer research, training three new young peer researchers, two of whom were involved in our RSE engagement workshops responding to the UK Government consultation on draft RSE guidance.



We were proud to be recognised across many aspects of our work this year:

- European Social Marketing Conference 2018 Best Practice Paper for It Starts With Me
- Black Entertainment, Film, Fashion, Television, Arts and Sports (BEFFTA) Honorary Award and African Diaspora Community Engagement Award for our work in black African communities
- Highly Commended Poster Presentation for Their Story, Your Choice at BHIVA 25th Annual Conference
- In February 2019, THT Direct was awarded with the Advice Quality Standard (AQS)
- Our success in fundraising was recognised by the Institute of Fundraising where we were awarded Best Individual Giving Campaign for our 'Be Proud. Be Sexy. Be Safe' campaign.



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We have a burgeoning relationship with Scottish Drugs Forum - they are currently hosting our Tuesday night clinic at their offices and we're redesigning our clinical pathways to accommodate their "at risk" beneficiaries. We're learning a lot from each other and managers at both charities have already discussed the possibility of co-tendering for relevant work in the future.

Clive King

Service and Partnership Manager Terrence Higgins Trust

OUR INNOVATION

Their Story, Your Choice

Putting beneficiaries at the centre was crucial to the success of our pioneering project, *Their Story, Your Choice*. Funded by Comic Relief and MAC AIDS Fund, the project utilised film in an innovative way to tackle HIV stigma and encourage testing in black African communities. We hosted a special viewing at the BFI, inviting key stakeholders, film-makers Brown Boy Productions, actors and press.

Self testing kits

We launched our landmark free HIV self testing service in May 2018, delivering free HIV self tests to those from communities most affected by HIV: gay and bisexual men, black African people, and trans people. A generous legacy from the late actor, Alec McCowen, a supporter of Terrence Higgins Trust for over 25 years, funded the initial six months of our self testing programme.

OUR RELATIONSHIPS GET STRONGER

Developing our relationships and enhancing partnerships with key stakeholders remains a vital part of our work, helping to ensure that we continue to have as great an impact as possible on the communities we serve.

We have worked collaboratively:

- with Oxford University Hospitals NHS Foundation Trust to deliver the Integrated Sexual Health Service in Oxfordshire to vulnerable groups.
- developing strong relationships with CCS, a partner agency exploring new business and tenders across the East of England.
- providing HIV prevention and sexual health promotion and outreach work from Southend Hospital's sexual health centre.
- in our network of partnership agencies in Scotland, with Turning Point Scotland, Scotlish Drugs Forum, Shelter, Police Scotland and many others.













Work Positive programme

Supporting people living with HIV getting back to work continued to be another important priority for us, as part of the Work Positive programme. This is supported by Barclays Spectrum and is in its eighth year.

The programme helps participants who have been out of work for more than two years to:

- build confidence
- learn new skills
- transform their lives.

This year we supported people in more locations than ever, including London, Brighton, and Suffolk, with over 62% of participants who completed the programme finding employment afterwards.

Our beneficiaries: Putting people in the lead

With a £1.1 million investment from The National Lottery Community Fund, we launched our new three-year project to provide a blueprint for meaningful beneficiary involvement for the whole third sector. Drawing on advice from the public, private and voluntary sectors, we will

seek to find enduring answers to the question of how to genuinely involve beneficiaries and those with lived experience across an entire organisation. By putting people in the lead, we will ensure we are delivering activities that reflect the changing needs of our beneficiaries.

Generous leadership

We have started work on adopting an approach of generous leadership as a way to help voluntary and community organisations. We recognised a huge wealth of knowledge, assets and skills within the sector, and wanted to support the wider use and dissemination of this across the sector.

In Brighton, the charity's Finance Department has been working with the Sussex Beacon who offer specialist in-patient support and care for people living with HIV. We have provided a full finance service since August 2017 when the Beacon was in danger of closing. In February this year, after a year and a half working closely and visiting weekly, we began handover of the finance function fully back to them. They have now stabilised their position and can continue to provide a robust, and vital, service to people living with HIV.

In Scotland, we are building new relationships within the sector and offering our experience and expertise as and when appropriate. We hope to create alliances that can come together to pursue new contracts in the future.

IN CONCLUSION

From our campaigning successes for LGBT+-inclusive RSE and improving access to PrEP, to our bold and innovative approaches to encourage HIV and STI testing, this year has seen Terrence Higgins Trust continue to keep its high profile within the media.

Again, funding pressures have meant we had to cease or reduce a number of our services. However, as we enter our second year of organisational transformation, we have continued to build new relationships within the sector, and look to new ways of working to ensure our services are responsive to need, tuned to the needs of our beneficiaries and are fit for the future.

We are ambitious in the face of our challenges, and we will continue work more strategically to end HIV transmission in the UK, support people to live well with HIV and amplify their voices, and enable all people to enjoy good sexual health.

ENDING HIV TRANSMISSION AND IMPROVING SEXUAL HEALTH

We have come to a tipping point in the fight to bring an end to HIV transmissions in the UK. From our vital work to widen access to PrEP and promote combination prevention, to our ground-breaking self testing programme, Terrence Higgins Trust is at the forefront of the battle to reach zero HIV transmissions and improve the nation's sexual health.

This year was a seminal moment as the UK met the UNAIDS 90-90-90 targets early, with 92% of people diagnosed; 98% of those on treatment; and 97% of those virally suppressed and unable to pass on the virus.

Rates of new HIV diagnoses declined again, with a 17% drop on the previous year (PHE, 2018).

Following our successful lobbying, in late 2018 Cabinet Secretary for Health and Social Services in Wales, Vaughan Gething AM, made a commitment to end HIV transmission by 2030, with his English counterpart Matt Hancock making a similar pledge in January this year. We now have a vital leadership role to play as we work to achieve this.

GETTING TO ZERO HIV

In 2017, 43% of people in England were diagnosed late, often after the virus has done permanent damage. This number is even higher for black Africans, 57% of whom were diagnosed late. Preventing late diagnosis and linking those who are diagnosed into care at an early stage is crucial.

Stigma and the resulting fear of experiencing prejudice and discrimination can stop people testing for HIV. To fight this, we have created interventions that target stigma and debunk HIV

myths, using innovative digital tools and technologies.

New diagnoses are declining at a much slower rate outside London. There are still an estimated 8,200 people in the UK who don't know their HIV status - a finger-prick test could change not only their life, but that of their partners. We need to ensure access to testing and prevention services throughout all parts of the UK.

Gay and bisexual men and black African people continue to bear the greatest burden of HIV in the UK. In 2017, 53% of the 4,363 people diagnosed with HIV were gay or bisexual men; and of the 2,033 heterosexual people diagnosed, 38% were black African men and women.

Promoting use of and access to combination prevention tools in targeted ways is vital if we are to address these challenges and inequalities. Delivering the right services and interventions is critical if we are to realise the pledge to end HIV in England and Wales by 2030.

We will continue to lead the national HIV prevention programme for England funded by Public Health England, HIV Prevention England. This was delivered working in partnership with other community and public health organisations.

DRIVING DOWN STIS

There were 420,000 new sexually transmitted infections (STIs) diagnosed in 2017 in England, the highest rates found among young people age 16-24 years, black, Asian and minority ethnic (BAME) communities, gay and bisexual men, and people living with HIV. Syphilis continues to rise, with a 20% jump in cases to 7,137 cases with 78% of diagnoses in gay and bisexual men.

We have worked in partnership with the wider HIV and sexual health sector, and with local councils, to put in place a plan on what needs to happen in England to tackle the continued STI crisis, as well as calling for investment in vital sexual health services, both face-to-face and digital.

Providing targeted sexual health information and prevention services such as the free condom service 'C-Card' is vital to increase condom use and encourage testing.

IT STARTS WITH ME

In 2018, we continued to deliver It Starts With Me, the social marketing campaign aimed at gay and bisexual men and black African people, via different media such as print, broadcast, digital, and outdoor advertising.

Our main goal was to bring attention to the many tools we have to prevent HIV, and to let people know they can choose one that is suited to them and their circumstances. The campaign featured individuals who are playing their part in stopping HIV, focusing on:

 raising awareness on the effectiveness of PrEP

In numbers:

- 320,581 unique visitors to the website
- **193,462** completions of online tools, including our test finder
- 224 million opportunities to view targeted print and outdoor advertising
- 25,000 self-sampling tests distributed
- **19,787** face-to-face interventions
- **1,353** pieces of press coverage
- 6,000 condom sample packs ordered by target community members following online 'condom fit' tool completions
- 462 organisations participated in NHTW 2018.
- highlighting the importance of and ease of regular HIV testing
- how choosing the right condom can improve the experience of using them
- and that people on effective HIV treatment can't pass it on.

This year, our 'Can't Pass It On' message gained global traction as it coincided with release of the PARTNER 2 study findings at AIDS 2018 Conference in July 2018.

Using targeted digital advertising, we promoted our Condom Quiz tool which encourages people to find the best condom for their needs. We gave away 5,000 sample packs of condoms to gay and bisexual men and black African men and women.

The campaign was also amplified at local level by our Local Activation Partners, consisting of community organisations. This was

supported by our attendance of African festivals and LGBT+ Pride events across the country to share the message in a colourful gazebo with our green screen where people took photographs to share on social media.

NATIONAL HIV TESTING WEEK (NHTW)

'We can be the generation to finally bring an end to HIV,' His Royal Highness The Duke of Sussex told us in a video message marking the start of this year's *National HIV Testing Week*.

Our flagship NHTW campaign continues to bring together the sector, with community organisations and clinics across the UK holding testing events and encouraging people to 'Give HIV the finger'.

In Brighton, local MPs Caroline Lucas, Peter Kyle and Lloyd Russell-Moyle visited the Terrence Higgins Trust office to encourage more people to get tested, met volunteers and staff and discussed the importance of normalising testing and busting stigma. HPE and our local activation partners tested MPs across England, including the Secretary of State for Health and Social Care Matt Hancock.

Around 1 in 8 people living with HIV are undiagnosed and unaware they have the virus, while over 4 in 10 people newly diagnosed were diagnosed late, after the virus has began to damage their immune system.

Regular testing and early diagnosis are key. *NHTW* this year promoted the ease of testing ('a finger-prick test is all it takes') and all the different ways to test, including ordering a self-sampling test online to do in your own home, or testing at the clinic, GPs and other community settings.

Wearing a red ribbon in solidarity with those living with HIV, the Duke called for testing to become 'the norm' and that despite drops in new HIV diagnoses, warned that 'this is no time for complacency'.

SELF TESTING

Following successful pilot projects in 2016 and 2017, we rolled out a UK-wide, free HIV self testing service in May 2018. Over 24,000 HIV self tests have been ordered online and sent out to those from communities most affected by HIV, gay and bisexual men, black African people, and trans people.

Adding Click and Collect as a delivery option (funded by Public Health England) enabled us to reach more black African people, a group affected by high levels of late diagnosis. Black African men in particular had expressed concern for privacy and confidentiality when receiving tests in a shared home. The success of the service suggests that self testing is a way to increase HIV testing in black African communities.

Together with our self-sampling HIV tests delivered through HIV Prevention England and funded by Public Health England, we have sent out over 50,000 HIV tests to those in need.

Andrew Gamez-Heath, from Lincoln, was diagnosed with HIV during *National HIV Testing Week* four years ago. Now he's one of the faces of the campaign.

'Never in a million years did I think I'd be part of a National HIV Testing Week campaign. When I was first diagnosed with HIV I told four people initially, and now here I am on posters all over the UK.

'When I was first diagnosed I was really scared, because I wasn't aware of how much medical progress has been made in HIV treatment. Me and my partner Ricardo (now husband) had been dating for just five weeks when we decided to go for routine STI check, and I was diagnosed with HIV.

'We weren't that committed prior to my diagnosis and, as an added complication, I wasn't actually out as gay at the time. I knew I really liked him but I was unsure about what the future held for us. When you go through something like an HIV diagnosis with someone, it not only strengthens you as a person, but also your relationship.

'I got involved in the National HIV Testing Week campaign because I wanted to raise awareness about the importance of HIV testing and knowing your status. The earlier you're diagnosed, the better it is for your health, and I think it's important that everyone knows this. The more people that know about this, the better the chance we have at beating HIV stigma.

'Now I am able to use my platform to do my part in debunking HIV stigma by being a living embodiment of the can't pass it on message.

'Having the 'Can't Pass It On' message that Terrence Higgins Trust has been championing and being able to say loud and proud that effective treatment means I can't pass it on is amazing not just for me, but for many others alike who are living with HIV.

'There is more to me than my HIV status and I refuse to let it define who I am.'



IWANTPREPNOW

Last year, we welcomed iwantPrEPnow into the Terrence Higgins Trust umbrella, a move that reflects our belief that PrEP is a vital HIV prevention tool and critical to our push to get to zero new HIV transmissions by 2030.

The website provides information for accessing PrEP from reputable sources, as well as information about accessing it on the NHS in Scotland and via trials in England and Wales. It also provides information about how PrEP works and how to take PrEP, whether daily or event based.

In October, we opened the Mags Portman PrEP Access Fund – named in honour of the pioneering HIV clinician who died earlier this year – to help people access PrEP who have been unable to get on the trial and could otherwise not afford it. We will strive to keep this open until PrEP is accessible to everyone who needs it.

We worked alongside iwantPrEPnow, PrEPster, and My Genderation to promote a new film about trans people's experiences of taking PrEP. The film, made with funding from Elton John AIDS Foundation, aims to increase awareness of PrEP among the trans community, a most at risk community. Trans women are 49 times more likely to acquire HIV than the general population¹. The film received great coverage in traditional and social media.

BOOSTING SECTOR INVOLVEMENT

Working to increase the involvement of key stakeholders like GPs and Primary Care professionals in HIV prevention efforts is vital. Following launch of our GP Engagement Strategy, we attended the Royal College of General Practitioners (RCGP) Annual Conference in Glasgow to promote *NHTW* and worked in partnership with Sexual Health in Practice (SHIP) CIC and iwantPrEPnow to deliver PrEP seminars in London and Manchester.

In August, we facilitated a pilot training event for people working with gay and bisexual men in partnership with ESTICOM, a European-wide project bringing together professionals from community organisations across England and Wales to share insight and experiences. In March this year, we hosted a fully-subscribed training day in London to take a look at some of the populations which HIV prevention efforts need to engage with.

OUR WEBSITES

In line with our digital ambitions, the new Terrence Higgins Trust website went live in June 2018. The new site has been designed mobile first, reflecting the way most users access our sites. In 2018/19, there were 3.2 million visits across all our sites.

We have also taken the opportunity to revise and rewrite our content to help people find the information they need as quickly as possible and to tie in fully with our overall strategy.

We provide high quality health information and support services through our websites, as well as incorporating innovative digital decision making tools such as our iwantPrEPnow and 'Do I need PEP' quizzes.

HPV

Last year, we successfully campaigned for a national HPV vaccination programme for gay and bisexual men in England, and rollout of the HPV vaccination for boys. However, a catch-up programme has been ruled out by governments in England and Wales, despite this being available for girls when the programme was implemented in 2008.

We will continue to campaign for an HPV vaccination catch-up programme to be rolled out for boys above 13 years old in England and Wales, to ensure all young people are protected from HPV. We will maintain our lead role in parliamentary engagement on behalf of the HPV Action coalition.

CONDOM DAY

To coincide with International Condom Day on 13 February, we launched a free condom service for gay and bisexual men.

There were over 50,000 new STIs diagnosed among gay and bisexual men in England during 2017 (PHE, 2018). Gonorrhoea and syphilis were the most common STIs in this group with an increase of 21% in gonorrhoea diagnoses and 17% increase in syphilis in just a year.

We continue to expand our C-Card service to help young people age 13-24 years access sexual health information and prevention services to increase condom use and encourage testing in a group affected by high rates of STIs.

¹UNAIDS (2014). The Gap Report. https://www.unaids.org/sites/default/files/media_asset/08_Transgenderpeople.pdf

Boosting engagement – Hackney BAME LGBTQ+ project

Funded by Hackney and the City of London CCG

'The project in Hackney explores the health and social care experiences of BAME LGBTQ+ living here. Previous research has shown that BAME LGBTQ+ have poorer health outcomes across mental health, sexual health, and drug and alcohol abuse, and a lower level of engagement with services.

Based on service user data for outreach projects we had run in Hackney, we knew that as a group, gay and bisexual men in the borough were highly ethnically diverse and wanted to get a picture of their experiences with a view to designing services that would better meet their needs (and thereby boost engagement).

'We conducted 1:1 interviews, a community building event with three focus groups (which was attended by the Mayor of Hackney), and an online survey, to which we received 87 unique responses.

'In our report, we give service design proposals that might be implemented by existing local services. We recommended:

- more training for front line health and social care staff
- increased involvement of LGBTQ+ people of colour in planning and delivery of services
- more visibility and representations of LGBTQ+ POC in health and social care campaigns
- training and support on how to navigate an increasingly complex health and social care system
- make services more convenient by boosting online and integrated options.

'We hope our findings will prove useful to commissioners, service providers, researchers and policy makers working in the area, and to raise awareness of "intersectional invisibility" of LGBTQ+ people of colour to help reduce health inequalities.'

Dominic Reilly, Senior Outreach Worker, Healthier Hackney

EMPOWERING PEOPLE TO LIVE WELL WITH HIV

People living with HIV experience unique challenges in their lives, and have needs that vary – those that have lived with the virus for a long time are likely to experience co-morbidities and periods of ill-health. We strive to empower and support people living with HIV to lead healthy lives, and our services are designed to offer the right support whenever it is needed.

People living with HIV now have excellent treatment outcomes, and can live long and healthy lives, free from the fear of passing on the virus. But many diagnosed prior to the advent of effective treatment have multiple health issues, as do those diagnosed late, after the virus has caused damage.

Despite medical advances, knowledge of HIV hasn't kept up with progress. In our YouGov survey last July, over half the people told us that they believed the 'Can't Pass It On' message was false, while only a third of people would consider dating a person with HIV on effective treatment.

Misinformation and myths around HIV causes stigma and selfstigma, which impacts many people living with HIV. These impacts can be felt in many areas of life, from employment and financial stability through to relationships and mental health.

We lead in adopting unique and innovative ways to tackle HIV stigma, from our *Can't Pass It On* campaign, to our ground-breaking use of interactive film in *Their Story, Your Choice*.

While we campaign to inform people and battle stigma, we provide vital services across England, Scotland and Wales, designed to help empower people to live well and thrive with HIV.

Our specialist services for older people are tailored to the first generation of people growing older with HIV, whose health concerns are compounded by age-related issues like menopause or social isolation.

From online counselling to complementary therapies, peer support and help getting back into the workplace, we are committed to supporting people living with and affected by HIV, ensuring that the diverse HIV community has the services it needs.





When I think about how far I've come, I feel proud. I am still standing strong. Before I came here, I thought I had lost it... Now I've met all of you here, I enjoy the company. You have made me smile all the way.

Service userPeer Support Scotland

OUR VOLUNTEERS

We couldn't do what we do without our volunteers.

Last year, 179 volunteers donated 27,776 hours to supporting delivery of our services. They provided support across key services including health promotion, complementary therapy, counselling, mentoring, admin support, our THT Helpline, reception and within our boutique shop.

THERAPY SERVICES

Over the last 12 months, we have provided counselling for over 500 clients through nearly 5000 counselling sessions. Our core counselling services are based in London:

- 'Connect', low cost face-to-face counselling
- online counselling, free of charge to people living with HIV
- youth counselling.

Counsellors also operate across the UK to support the delivery of some of our contracts, including in Brighton and Cardiff.

TEN YEARS OF ONLINE COUNSELLING

Terrence Higgins Trust was the first UK charity to set-up a nationwide online counselling service in 2008. Our award-winning online service was re-launched as myHIV.org.uk, funded by the Elton John AIDS Foundation, then incorporated into our main offering in 2018.

The myHIV forum continues to be the biggest online community of people living with HIV in the country, as well as supporting those further afield.

We are ambitious in providing innovative outreach programs to engage underserved groups, making sure we are using technology to its fullest to extend access to counselling and emotional support.

As a key part of this, we have enhanced our digital offering in the last year to include:

- optimisation for mobile
- webcam, audio and instant messaging options.

In a Google search for 'HIV counselling in UK', our online counselling service comes first out of over 6.5 million search results.

We have seen an 37% increase in people accessing online counselling. New registrations have increased by 48%, with online counselling sessions delivered increasing by 23%. Increasing access has coincided with positive feedback from clients.

In the year 2018/19, depression was the most recorded issue (14%), followed by problems related to living with HIV (12%) and relationships (12%). Anxiety was recorded 11% of the time, followed by drug and alcohol problems (8%) and newly diagnosed as the main issue for 7%.

Nicolas, THT Direct Telephone Helpline Volunteer

'I started volunteering back in August 2017. I chose Terrence Higgins Trust because when I was diagnosed back in 1992, I turned to them for support and counselling, they were so helpful and understanding.

'Over the years they have helped in a variety of ways, supporting me by giving me benefit advice and also helping me to develop my employability skills and confidence through the Work Positive programme.

'I enjoy volunteering with Terrence Higgins Trust because I want to be of service to my community. Being a THT Direct Helpline volunteer allows me to empower people who are newly diagnosed and calm people's anxieties over HIV. Terrence Higgins Trust have been there for me and now I can be there for others.'

Beneficiary, Terrence Higgins Trust Online Counselling Service

'It saved my sanity. HIV and the problems it threw up in my life had become jumbled up with various other aspects of my life experience and seemed impossible to untangle.

'There was no option but to carry on in the middle of mental chaos. Chatting with a professional enabled me to separate things and make some decisions which had seemed impossible.'

'When I first came to Peer Support Scotland, I was newly diagnosed. I had just left my job because I'd felt so pressured by my manager to disclose my status when I was off sick. A peer volunteer helped me prepare my benefit application forms and taking part in the group work really boosted my confidence. I have now been trained up to advise and support people who are newly diagnosed.

Beneficiary

Peer Support Scotland

PEER SUPPORT IN SCOTLAND

Peer Support Scotland enjoyed a very successful second year providing a unique mix of support services to people living with hepatitis C and/or HIV in Scotland.

Funded by The National Lottery Community Fund, the project brings beneficiaries and living well specialists together in diverse workshops and activities designed to enhance skills and wellbeing.

Last year, the project involved 449 clients and 41 volunteers across the whole of Scotland. Forty-eight participants attained the Peer Support Scotland Development Award over 84 hours of workshop activities, with a further 152 hours of peer group work.

Other innovations this year included:

- Here in Vitality, an intensive course for people with a long term diagnosis
- Launch of MAPS (Meetings to Affect Positive Support) forum
- Taking the reins of our Men United group for men living with HIV
- Partnering with Positive Voices to design and deliver training for positive speakers in Scotland.

We continued to nurture our network of partnership agencies, working alongside Turning Point Scotland, Scotlish Drugs Forum, Shelter, Police Scotland and many others.

WORK POSITIVE

Work Positive is one of our flagship programmes that support people living with HIV who are unemployed, helping them to get back to work through mentoring, training and work placements in supportive environments. This year 80 people took part in the programme with 50 expected to graduate.

This was the second year the programme was funded by Barclays Spectrum, the bank's lesbian, gay, bisexual, trans (LGBT) employee network. We are grateful to the network's ongoing support for this crucial programme, which links so strongly with the bank's inclusive ethos.

Thanks to an increase in funding, Work Positive was able to expand its offering, with new programmes in Brighton and Sussex. So far this year:

- 5 people have found full-time work
- 4 people have found part-time work
- 4 programme graduates are in placements at ViiV healthcare.

Work Positive will be launching a digital pilot in the summer 2019. The pilot will look at opportunities to expand digitally to increase access to the programme for beneficiaries all over the UK.

THT DIRECT

Last year, we had over 18,000 enquiries to our confidential free helpline THT Direct on a range of subjects related to HIV and sexual health. Nearly 25% of our enquiries were via email or online, sometimes from different parts of the world.

The key subjects called about were:

- HIV transmission
- HIV testing
- STIs
- PrEP and PEP
- accessing services.

There was a significant rise of enquiries about legal issues from people living with HIV.

THT Direct is our longest running frontline service, set up in 1984. In February 2019, we were awarded with the Advice Quality Standard (AQS). Our caller survey in December 2018 showed the best ever satisfaction rate of over 90% overall.

Volunteers are the heart of THT Direct. Last year, 17 active volunteers gave up over 1,185 hours of their time to help with answering telephone enquiries.

This coming year, we will be extending our digital THT Direct offering and adding web chat to see if this new channel can improve the experience of service users and increase the volume of enquiries we can deal with to reach more service users.

AGEING WITH HIV

The over 50s are the fastest growing population of people living with HIV, with the proportion of over 50s projected to rise to 54% by 2028.

Our Health, Wealth and Happiness programme ran to April, and provided support for 150 older people living with HIV in Brighton and London through group work and peer support activities.

Our advice service supported 93 people, largely with welfare benefit issues, and we trialled an online and telephone advice service with a view to supporting more people around the UK.

We know that many older people living with HIV experience loneliness and isolation. In London, we focused on providing activities to help address these issues and introduced a peer support group for those diagnosed before medication became available in 1996, recognising the unique nature of the challenges that this group faces.

Many older people living with HIV fear going into a care home when they're older because of the lack of understanding that surrounds the virus; we have been told of many awful experiences including healthcare professionals 'double gloving'.

Tackling stigma is key to enabling this group to live well with HIV. As a result, we delivered HIV awareness training for organisations working with older people and partnered with Skills For Care to deliver training for social care professionals.



It has been a lifesaver – having this facility and resource encourages me to go out, to socialise and to cope with daily life. Without it my quality of life would be dreadful.

Beneficiary

Health, Wealth and Happiness

AMPLIFYING THE VOICES OF PEOPLE LIVING WITH HIV

The stories and lived experiences of people living with HIV are at the core of our work, helping to shape the services we offer and the campaigns we fight. This year, with over £1m funding from The National Lottery Community Fund, we began a three-year project to take our work amplifying the voices of people living with and affected by HIV to the next level.

No one is better placed to talk about the impact of HIV than someone living with HIV — what motivated them to test, how it felt to be diagnosed, the services they need. Across the breadth of our work, the voices of people living with and affected by HIV can be heard: from those on effective treatment who can't pass on HIV and those on PrEP, to those living with HIV who have experienced stigma and discrimination.

We showcase the diversity of voices of people living with HIV, giving them a platform to share their stories with the world. In our media team, we are proud to have over 50 people who we work with to share their stories, ensuring their powerful messages challenge stigma, bust myths and change attitudes every day.

We also work to ensure the voices of those affected by HIV are heard by decision-makers locally and nationally, and we have continued our sector-leading work with parliamentarians, as well as local commissioners.

AMPLIFYING OUR USER VOICE

With a £1.1 million investment from The National Lottery Community Fund, in January this year we launched our new three-year project 'Amplifying our user voice' to answer the question of how to genuinely involve beneficiaries and those with lived experience across an entire organisation. We aim to create a blueprint for meaningful

beneficiary involvement across the whole third sector.

Drawing on advice from the public, private and voluntary sectors, we will bring together innovative new approaches to adapt how we work to ensure we are delivering activities that reflect the changing needs of our beneficiaries.

PRESS AND PR

It's been an incredibly successful year for Terrence Higgins Trust in terms of media coverage, across national, regional and sector press, for print, online and broadcast.

Our reach over the past 12 months is 5.22 billion, which includes features in Huff Post, Daily Mail, BBC News, Thomson Reuters, The Voice Newspaper, Pink News and Gay Times.

SOCIAL MEDIA

Sharing the real stories of people living with and affected by HIV is a central part of our social media activity. Engagement with these stories has been consistently strong across our campaign work on Facebook, Twitter and Instagram. On Facebook our likes have shot up from 30,000 to almost 40,000, while on Twitter we've gone from 26,000 to over 30,000. This means we have an even bigger audience to engage and help champion our stigma-busting messages.



CAN'T PASS IT ON

In July last year, results from the PARTNER 2 study were announced at the 22nd International AIDS Conference (AIDS 2018). They confirmed the statistical certainty that, like heterosexual partners, gay men living with HIV on effective treatment could not pass the virus on to their sexual partners.

In June 2018, we commissioned a YouGov survey to check if there had been any progress in people's knowledge of this key development in our understanding of HIV.

We found:

- that only 10% of the British public know this
- over one third would 'swipe left' on a dating app to reject someone living with HIV and is on effective treatment
- just 35% of Brits would feel comfortable kissing someone who's living with HIV and is on effective treatment
- over half of people don't believe that people on effective treatment cannot pass HIV on.

While amazing medical progress has been made, knowledge of HIV hasn't kept up with that progress. As a result, stigma and discrimination continue to affect people living with HIV and stops others from getting tested.

To address this, we updated our *Can't Pass It On* campaign in 2018 to make it a multi-channel campaign to maximise reach, sharing stories of people on effective HIV treatment who can't pass on the virus.

We recruited and trained 20 people living with HIV to be media ambassadors for the campaign, their stories reaching over 17 million across all platforms. A post-campaign survey showed that there was a 10% increase in knowledge in our target audience, while #CantPassItOn is now an internationally used hashtag on social media.

WORLD AIDS DAY

Across the UK, our regional offices worked with the community to put on events centred on the theme of 'ZeroHIV'. Our Buckinghamshire team held a breaking stigma event in High Wycombe, featuring drag queen Cherry Liquor and Strictly Come Dancing's Brendan Cole. In Dundee, our volunteers braved the cold to collect money in a festive City Square, while in London we gave out red ribbons and collected donations at a number of major tube stations.

Our media work focused not just on transmission but stigma too, as we published our survey of 1,350 people living with HIV, with half of people experiencing discrimination because of their status. Two thirds said fear of HIV discrimination has impacted their mental health.

During the *National HIV Testing Week* and World AIDS Day period we worked with 22 case studies, in order to amplify their voices in national, BAME and gay media outlets. Highlights include a report-based piece on black women and HIV testing in Cosmopolitan, Charity's diagnosis story in The Voice (which was on its most read list for the week of *NHTW*), and the Channel 4 News story about older people living with HIV filmed at Brockwell Lido with Julie and Jonathan.

We also received a lot of press coverage due to both the video we worked on with The Duke of Sussex and MP Lloyd Russell-Moyle who spoke publicly for the first time about living with HIV in a speech to the Commons.

We secured a total of 1220 pieces of coverage, comprised of 999 online articles, 215 broadcast and six print pieces.

Our reach on social media was impressive with our World AIDS Day tweets amassing 509,000 impressions, Facebook content achieving 146,000 impressions and Instagram securing 1,200 likes.









Elsewhere, our video starring a range of HIV activists who shared their experiences living with HIV was seen over 75,000 times on Twitter.

THEIR STORY, YOUR CHOICE

One of the highlights of our year was *Their Story, Your Choice*, a pioneering new way of using film to tackle HIV stigma and encourage testing in black African communities who are disproportionately affected by HIV in the UK.

The stories were developed from the experiences of people living with HIV and scripted in a compelling 'soap opera' style. They dealt with themes including disclosure in relationships, late diagnosis, dating, and abuse. An interactive element was added, with viewers

invited to make choices throughout the films to choose the outcome of each story.

Each film was user tested throughout production, and we engaged Bakita Kasadha, a black African writer living with HIV as a consultant, as well as conducting medical peer reviews.

The films were promoted via social media using both video trailers and static adverts. There have been over 80,000 clicks on the first scene of a film and over 27% people have watched to the end of at least one storyline.

Feedback continues to be overwhelming positive, and from the way people watched multiple strands, chatted online, and ordered HIV tests we can tell they learned from the films and behaviour was influenced.

POSITIVE VOICES

Our Positive Voices programme enables us to take the real stories of people living with HIV into schools and businesses to tackle stigma, raise awareness of HIV and promote good sexual health.

Over the last 12 months the project has delivered 150 talks reaching a total audience of over 6,000 people and engaged 20 beneficiaries living with HIV. This year, Positive Voices has also produced four videos featuring people living with HIV telling their powerful stories.

PREP

PrEP is playing a key role in reducing HIV transmissions in the UK. While we campaign for it to be available as part of routine sexual health services for all those who need it, we have learned that an alarming proportion of people who are eligible for PrEP decline it. Many state they don't see themselves at risk, while others give no reason at all.

This urgently needs to be addressed, and we will contribute to forthcoming research as part of the PrEP steering group, as well as continuing to showcase the stories of people who are benefitting from PrEP.

PARLIAMENTARY ENGAGEMENT

We also work to ensure the voices of those affected by HIV are heard by decision-makers, and we have continued our sector-leading work with parliamentarians. That includes stepping up our policy and lobbying work in Wales, including our active role in the steering group overseeing Public Health Wales's review of sexual health services.

In 2018, we:

- engaged with 105 MPs, peers and Welsh Assembly members
- had 46 meetings with parliamentarians
- organised 4 events in Parliament and the Welsh Assembly
- tested the Secretary of State for Health and Social Care, Matt Hancock MP for *National HIV Testing Week*
- responded to the Parliamentary Health Select Committee inquiry on sexual health and supported Ian Green to give oral evidence
- were mentioned in Parliament 24 times.



The talk was very insightful and has taught me the experiences of those living with HIV. After this talk I hope to take on board what I have learnt today in my progress to become a pharmacist to look on the individual and not just the treatment itself. Very informative, really appreciated the honesty. It helped me gain a better understanding of HIV.

Positive Voices talk attendee

OUR PLANS FOR THE FUTURE

We are in a new era for HIV prevention, having achieved the UNAIDS target of 90-90-90 ahead of time. We now look to 2030 and our goal of zero HIV transmissions. To meet this challenge we are working to transform the charity's delivery of services and activities for prevention and living well.

Our ambitious agenda is unwavering: to contribute to the end of HIV transmissions and improve sexual health, support people living with and affected by HIV and poor sexual health, and ensure that the voices of people affected by HIV are heard.

To get there, despite having two years left on our current strategy, we have decided to begin work on a new strategy that reflects our values and insight in the current climate – many things have moved faster than could be predicted, not least incredible medical progress and digital innovations, but the need for us to re-evaluate how we raise money to continue our vital work as the UK's leading HIV and sexual health charity.

Over the last year, we have been moving towards our new ways of working and a refocused strategy, which we aim to complete by 2020.

Bringing beneficiaries into the centre of all that we do is the focus of our three-year The National Lottery Community Fund funded programme 'Amplifying our user voice'. We will redesign our services using insight gained from our users so we are meeting their needs, and finding new ways for our beneficiaries to engage with us.

We will:

- Develop excellent partnerships and support learning across the public, private and voluntary sectors
- Bring together and act on best practice and develop innovative new approaches to adapt how we work

- Identify and deliver activities that reflect the changing needs of our beneficiaries
- Embed the expertise of our beneficiaries to drive impact across Terrence Higgins Trust and amplify our user voice

The programme has a strong digital focus and we will use social marketing techniques to reach people who we wouldn't ordinarily engage. A strong digital presence will enable us to offer more services, information and support online, when and wherever they are needed. This will go alongside continued development of our face-to-face services, central to not only our work as a charity but our ethos to support people to live well with HIV.

A key part of the move towards our new ways of working is the development of hubs across the UK, tailored to local needs as centres for HIV, sexual health and innovation. We will be piloting new integrated delivery hubs to ensure that beneficiaries are supported in spaces that are welcoming, inclusive, and friendly. Our Glasgow hub should be up and running by early 2020, to be followed by hubs in Brighton and London.

Planning for the London hub, which will enable us to best meet the needs of who we're here for, follows the sale of the building at Gray's Inn Road, home for Terrence Higgins Trust's main office, THT Direct and other services since 2006. Our London move is due in autumn 2019, after we have located a suitable building.

Alongside staff and team development, we have hired new strategic leads for Health Improvement, Living Well and Income Generation. We will develop an overview of

all health improvement and health promotion activity across the charity, working with colleagues to ensure our work is robust, evidenced-based and fit for purpose to meet our strategic aims.

Crucially, the project will also have a direct impact on those using their voice and experience to make meaningful change for the future. It is by putting people in the lead that charities can ensure their activities and priorities reflect the constantly changing needs of who they are there to serve.

In the coming year, we will also have a major focus on what needs to happen in England to tackle the continuing STI crisis. Deep cuts to local authority public health budgets across England are taking their toll at a time when public health services need more, not less, funding. In Wales, we will keep up pressure to ensure that progress is made on the recommendations of the national review of sexual health and that access to sexual health services is equal for all.

To drive forward our mission to end new HIV transmissions, we will continue to provide our vital online self testing programme which will distribute self test kits to gay and bisexual men, black African people and trans women. In addition, we will continue work towards a new National Commission for HIV in a joint partnership with NAT and sector partners and specialists, to deliver our ambition to get to zero new transmissions.

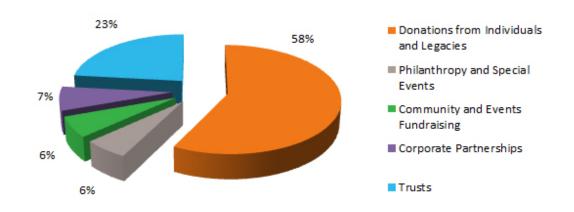


Matt Hancock, Secretary of State for Health and Social Care having a test during HIV Testing Week.

FUNDRAISING AND SUSTAINABILITY

We would not be able to undertake our vital work without the support of individuals, charitable trusts and companies who support our mission. This year, we received £6.1m in voluntary income, which goes towards stopping HIV transmission, helping those with HIV to live well, and amplifying the voices of people with HIV.

HOW WE RAISED OUR MONEY



DONATIONS FROM INDIVIDUALS AND LEGACIES

Support from the general public, many of whom are long-term supporters, raised over £1 million providing vital ongoing support for our HIV and sexual health services. Our self testing appeal helped raise over £20,000 to deliver the programme.

Within the past year, we recruited 1,230 new regular givers, primarily through two digital acquisition campaigns focused around Pride and World AIDS Day. Our success was recognised

by the Institute of Fundraising where we were awarded Best Individual Giving Campaign for our 'Be Proud. Be Sexy. Be Safe' campaign.

Over the last year, we received over £1.9 million from people who remembered us in their will. This includes a large legacy from the late actor, Alec McCowen, a supporter of Terrence Higgins Trust for over 25 years.

This generous gift left by Alec allowed us to pay for the initial six months of our own self testing programme, which delivered free HIV self tests to those from communities most affected by HIV.



The main lot of the charity auction. The Binham Pride Quilt, made by the cast and crew at Thursford.

Binham Pride, raising money for Terrence Higgins Trust for five years

'We love to support Terrence Higgins Trust at Binham Pride! The event was created in 2014 by singers in the Thursford Christmas Spectacular, and has been an annual event ever since.

'Binham is a small village in north Norfolk and the fundraiser transforms Binham Village Memorial Hall into its very own spectacular.

The event sees an auction, tombola, performances from those in the Thursford show and much more. We also raise money leading up to the event with the Great Binham Bake-off. With overwhelming support from the local pub, The Chequers Inn, the Cushing family who produce the Thursford show, and many of the local residents, we have raised around £24,000 for Terrence Higgins Trust. We are so proud of what we have achieved over the years and are looking forward to Binham Pride 2019!'

Dale Page, co-organiser

PHILANTHROPY AND SPECIAL EVENTS

We are so grateful to our amazing group of generous supporters who remain committed to Terrence Higgins Trust through our Friends network. This year's Friends Dinner was held at the V&A in London and featured entertainment from the spectacular Nadine Coyle, and hosted by our Patron Paul Gambaccini.

In May, we launched our self testing programme to our Friends at The Gherkin, which allowed

us to update members on our innovative new testing campaign and methods.

Our special events programme this year included a very successful Auction. This was thanks to the support of Prudential, our sponsor for the Auction for the past 10 years, and Christie's, our hosts, as well as our very generous lot donors and purchasers. We were also delighted to host our popular Supper Club, which was made possible by a large number of London's finest restaurants and our supportive diners. We are also grateful to lan Davenport and Alan Cristea Gallery who

very generously donated 40 editions of the print Colour Splat Cluster which have proven very popular with our supporters.

COMMUNITY AND EVENTS FUNDRAISING

Across the UK, we are lucky enough to have loyal support from people in local communities. This year has seen a wide range of fundraising activities including active challenge events, such as running, cycling, trekking, skydives and bungee jumps, where we saw hundreds of individuals and groups raising thousands of pounds through sponsorship. We've seen a 30% increase in community-based activities this year such as quiz nights, bake-offs, celebrity tribute nights and dance competitions.

This year also saw the launch of our first ever student ambassador programme, with 16 universities from across the UK joining the programme, and we have continued to grow our work with university LGBT+ societies and RAG groups.

We have had hundreds of individuals, companies, universities, schools and community groups all over the country getting involved in World AIDS Day, from ribbon collections, club nights and sponsored physical challenges to raise money for our flagship campaign *Zero HIV*. In total, we have acquired 1,237 new community supporters across the programme.

We have also had success with our high-value community fundraising groups, for example Binham Pride, where the cast of a local Christmas production in Norfolk raised over £6,000 from their event this year.

Finally, we piloted our first local fundraising programme in Glasgow and created a brand new network of community and corporate supporters. We are extremely grateful to the many people who were involved in these activities.

CORPORATE PARTNERSHIPS

Over the past year, we have received amazing support from a range of companies across the corporate sector. MAC AIDS Fund has continued to support our Positive Voices project in Brighton and Glasgow, allowing us to make a significant impact on those communities and American Express, another longstanding supporter, continued to fund our volunteer programme.

We again partnered with Barclays Spectrum (Barclays' LGBT network) to support its Gala

Dinner at The Savoy Hotel which was hosted by the brilliant Brian Dowling with entertainment from our very own Patron Beverley Knight. This raised thousands of pounds to support our Work Positive programme. Once again, we had a very successful World AIDS Day with our corporate partners delivering a vast range of events throughout the country.

TRUSTS

A wide range of charitable trusts give their support to our work. We have received a significant grant from The National Lottery Community Fund to enable us to undertake a major project to better understand the changing needs of our beneficiaries, in order that we can develop our services around their needs in the future. The National Community Fund Scotland continued its funding of the Peer Support Scotland programme, and City Bridge Trust continued its funding of the Youth Counselling Programme. Finally, Elton John AIDS Foundation funded iwantPrEPnow, enabling those who need PrEP to get access to this life changing drug.

STATUTORY

Support from statutory sources to fund our work is a critical source for the charity. This year, we won several bids to provide vital work to promote HIV testing, support people living with HIV and enable better sexual health.

We opened our new HIV Support Service in Hertfordshire, as well as starting work in partnership to deliver the Integrated Sexual Health Service in Oxfordshire with Oxford University Hospitals NHS Foundation Trust. Our work includes sexual health promotion and outreach to vulnerable groups; digital campaigns; and a condom-card scheme. We have secured an extension to our contract for HIV prevention and sexual health promotion and outreach work in Southend-on-Sea, and have started a new project to undertake research into the experiences of LGBTQ+ BAME people in Hackney.

HOW WE RAISE MONEY

Terrence Higgins Trust is committed to providing the best possible standards for all our supporters. Our fundraising activities are carried out respectfully and we are a member of the Fundraising Regulator (FR) and the Institute of Fundraising (IOF), working within their agreed guidelines.

Ahead of the launch of the General Data Protection Regulation (GDPR) in May 2018 we conducted a full review of how we contact our supporters and potential supporters so that we remain compliant and respect their wishes. Our supporter promise ensures we regularly ask supporters how they wish to be contacted, for example by email, letter or phone. Every communication sent to a supporter offers a feedback mechanism where specific requests regarding the frequency and type of communications received can be made. All preferences are recorded on our database.

We follow the Institute of Fundraising's 'Treating Donor Fairly Guidance 2016' to ensure vulnerable people are treated in a suitable way.

We respond to all complaints promptly and include clear contact details on communications so that new or existing supporters can raise any issues or make changes to their contact preferences. Any official complaints made in relation to fundraising are registered as part of our official complaints process and the complainant is allocated an Executive Director to resolve the issue.

We use third party suppliers to undertake telephone fundraising and payroll giving fundraising on our behalf. All of these suppliers are subject to agreeing to our own robust terms of engaging with beneficiaries. Our telephone fundraising agency and payroll giving agency also supply a vulnerable persons policy as part of those contracts. Our telephone fundraising agency is a member of the Institute of Fundraising and the Direct Marketing Association. We provide charity specific training to their fundraisers before each campaign and undertake weekly random call listening.

They also provide details of any calls they believe to be a cause for concern, in line with their vulnerable persons policy. We listen to the call and decide what action should be taken. Any complaints are also given to us, with the call recording. They use IOF's Telemarketing Code of Conduct as the guidelines for their calling. All call data is run through the Telephone Preference Service to ensure we have the correct permissions to call our supporters. We also promise to never pressure anyone into giving a gift and respect a donor's decision if they decide to stop giving. All work carried out with third party fundraising organisations adheres to legal requirements and best practice guidelines.

CHARITY FUNDRAISING: REPORTING BY THE TRUSTEES

The Trustees have been guided by six key principles:

- **Planning effectively:** our fundraising strategy was scrutinised and agreed at Terrence Higgins Trust's Finance, Audit and Risk Committee (FARC) and a subsequent Board Meeting.
- **Supervising our fundraisers:** authority to oversee our Income Generation team is delegated to our CEO and Executive Director of Transformation and Operations. Our FARC receives and scrutinises regular reports on key areas of income generation.
- **Protecting our charity's reputation, money and other assets:** our FARC considers and approves reputational and financial risk and agrees our overall budget framework and investment strategy.
- **Following the law and upholding compliance:** we carry out our fundraising activities respectfully and are a member of the Fundraising Regulator and the Institute of Fundraising.
- **Following recognised standards:** we work within the Code of Fundraising Practice and other agreed guidelines to ensure that our fundraising is open, honest and respectful.
- **Being open and accountable:** we receive regular reports of any fundraising complaints as part of Terrence Higgins Trust's overall complaints procedure, which is accessible, open and transparent.

FINANCIAL REVIEW

THE OVERALL PICTURE

The 2018/19 period was a year of transition, as we began to lay the foundations for moving forward our programme of transformation across the charity.

Alongside strategic development, we have seen the depth and breadth of our services developing. Our financial position as at 31st March 2019 is a reflection of this.

We are pleased to report a year of relative stability in our operational income and expenditure. We have seen an increase of income gifted from organisations that have closed, an increase of our reserve position after the sale of our London headquarters (HQ) at Gray's Inn Road, which is offset by an increase of our pension liability in line with the FRS 102 revaluation.

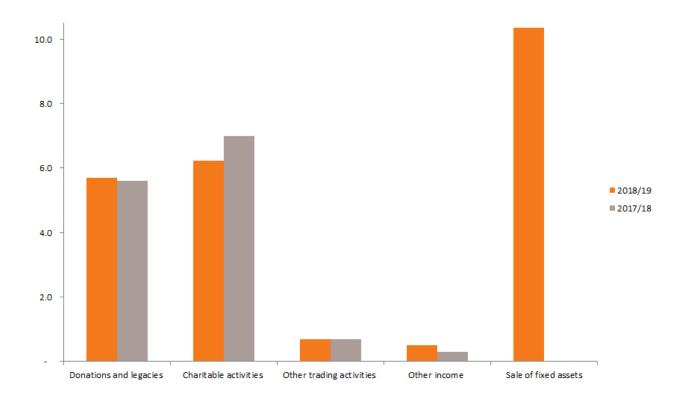
This all provides a strong basis for 2019/20, which will be a pivotal year of change for Terrence Higgins Trust.

WHERE OUR MONEY COMES FROM

Our income for 2018/19 totals £23.5 million. Operating expenditure for the year totals £13.1 million and net proceeds from the sale of the London HQ are £10.3 million.

At £13.2 million, the operating income is marginally lower than the 2017/18 total of £13.6 million. There have been some slight movements in the categories of how we generate our income but the overall picture shows stability with the previous year.

The net proceeds from the sale of the London HQ are included in 'other income' in line with SORP requirements. The sale of our London property was the result of a strategic decision taken in 2016. The operational budget for 2018/19 was not structured with the proceeds of the sale, and it is therefore important to recognise the sale but separate it from review of the current and future viability of our operational income and expenditure.



DONATIONS AND LEGACIES

In 2018/19, donations and legacies contributed £5.7 million to overall income. This is a small increase from £5.6 million in the previous year. Although there is a slight shift between restricted and unrestricted income, the overall position in this area is consistent.

The increase in restricted funds is primarily from funds received on closure of the Macfarlane Trust. Whilst restricted funds have risen, the number of organisations that we work with to deliver restricted programmes has reduced, from 47 different providers last year to 27 in 2018/19. This reflects the changing nature of the funding environment and we are actively managing this in our strategic planning.

CHARITABLE ACTIVITIES SUPPORTED BY STATUTORY INCOME FROM LOCAL GOVERNMENT AND HEALTH ORGANISATIONS

Statutory income in 2018/19 is £6.2 million (£7.1m, 2017/18). Historically, this area has always been the highest proportion of our income. In 2018/19, we have seen it fall to 47% of our overall operational income, from 51% in 2017/18. In real terms, this is a fall of £0.9 million.

The trend in diminishing statutory income reflects the wider environment, and we are proactively managing this as part of our in-year budgeting, our long-term financial plan and our strategy. We are working with commissioners to find savings to ensure continuation of services. This is challenging, as we strive to balance quality of services with the financial sustainability of each contract.

We continue to apply for new contracts throughout the year, but the nature of the political environment and funding market mean that opportunities are progressively limited. As an organisation, we remain committed to providing statutory services where we are able to.

OTHER TRADING ACTIVITIES

Income of £0.7 million (£0.7m) was generated from other trading activities, including fundraising events, sponsorship, rent, room hire and catering as detailed in note 4 to the accounts. This income is consistent with that of last year. A small decrease in income from our

tenants was offset by an increase in income from fundraising events. As we move towards our new income generation strategy in 2019/20 and move into our new premises in London, we expect to see the income profile in this area alter.

OTHER INCOME

Operational income in this area is primarily from training courses, counselling, student placements and investment income. This income is £0.3 million (£0.1m), slightly higher than 2017/18 and results from a marginal increase in counselling income and return on investment.

In 2018/19, this area also includes net proceeds from the sale of the London HQ (£10.3 million) and the proceeds from the merger with HertsAID (£0.2 million). These are one off items and will not be replicated in 2019/20.

HOW WE SPEND OUR MONEY

Total expenditure for 2018/19 was £13.1 million (£13.7m). This small decrease of £0.6 million from 2017/18 is in line with our budgeted position and overall income streams.

As the UK's leading HIV and sexual health charity, we continue to deliver a vast breadth of services across, England, Wales and Scotland, alongside creating new and innovative programmes that cement our place at the heart of the sector.

Throughout the last three years, we have seen a key shift in our expenditure profiles. This is due both to the fact we are contracting as an organisation and the changing nature of the HIV and sexual health sector.

In 2018/19, we spent £11.2 million (£11.9m) directly on charitable activities, representing 85% of our overall expenditure. The cost of raising funds was £1.9 million (£1.8m), making up 15% of overall expenditure.

In the past year, we have spent:

- £8.3 million (£8.4 million in 2017/18) on Ending HIV transmission and improving sexual health
- £2.5 million (£3 million in 2017/18) on Empowering People to live well with HIV
- £0.4 million (£0.4 million in 2017/18) on Amplifying the voices of people living with HIV.

It is important to note that 56% of this expenditure is funded by our voluntary income. In 2017/18, this was 49% and 2016/17 it was only 41%. It is a clear demonstration that our business and financial model is moving from statutory funding as a primary stream of funding to a mixed financing model.

During this transition, we will continue to support vital projects that may not garner wide funding, such as a complimentary therapy service for people diagnosed with HIV, a counselling service and a programme to support self testing and access to PrEP as well as services to support people with HIV to live well.

We fully maintain investment in our campaigning and lobbying work, essential to fulfilling our strategic aim of amplifying the voices of people living with HIV. This has bearing at a national level and delivers wide reaching impact with minimal investment.

Support costs in 2018/19 are £2 million (£1.6m), an increase of £0.3 million from 2017/18. This represents 15% of total expenditure. This proportion has increased slightly, but is primarily due to key provisions made for VAT and redundancy.

The remaining support costs are in line with expenditure for 2017/18. We are focused on keeping our support costs in line with the needs of the services and to ensure value for money.

As part of our office transition in 2019/20, we expect support costs will decrease materially and will mirror the structure and size of the organisation. These costs, which are made up of head office costs, IT, facilities, HR and Finance, have been allocated across areas on the basis of staff whole-time equivalent. This is detailed fully in note 10 to the accounts.

OUR RESERVES

In the current economic and funding environment it is essential we maintain a strong reserve position and ensure the most appropriate use of funds. At Terrence Higgins Trust, our focus is on ensuring that investment in long-term operational and financial sustainability has the highest impact on the needs of beneficiaries.

Our reserve position at the 31 March 2019 is £19.2 million. This is a material change from the

reserve position of £10.2 million at the end of 2017/18. The increase is due to the sale of the London HQ, and the growth of the restricted reserves which is offset by the increase in the pension fund liability.

We will ensure the most appropriate use of the proceeds of the sale. We have designated £8.5 million in the reserves for key investment. Firstly, we are investing in a new London property which is smaller and in line with our current need and future operational requirements.

Secondly, as the new strategy develops, we will identify areas for investment in services to ensure the highest level of impact. This reserve will ensure we are able to meet the level of need and achieve the scope required.

The increase in the restricted reserve is primarily due to gifted funds from the Macfarlane Trust. A programme dedicated for the beneficiaries of this fund is being developed and will use these funds.

FRS 102 dictates how pension scheme assets and liabilities are calculated and disposed in the accounts. One impact of the requirements is quite significant fluctuations in the value of the pension scheme which form part of our reserves.

The pension scheme deficit as defined under FRS 102 is now at a value of £3.1 million, (£2.8 million in 2017/18 and £3.1 million in 2016/17). As demonstrated, this provides a negative impact of £1.5 million on our overall reserve position.

The reserve policy agreed by the Trustees ensures that the free level of reserves held should be between the equivalent of three months and six months expenditure. Our budgeted expenditure for 2019/20 is £13.9 million. Within the framework of the reserve policy this indicates a required reserve level of between £3.5 million and £7 million. The free reserve position on the 31 March 2019 is £10.7 million (£4.7m).

Whilst this indicates a strong foundation for the financial stability of the organisation, this level of free reserves is a short term position and includes the £8.5 million designated reserve for investment.

Free reserves will be scaled within policy as part of a planned expenditure programme in the next three to five years.

GOING CONCERN

The Trustees have taken the view that in light of the ongoing challenges in the economic and funding environment, and the organisation's commitment to providing continuity for key existing services, the current level of unrestricted reserves is appropriate.

The Trustees believe that Terrence Higgins Trust has adequate financial resources. Our planning process, including financial projections, has taken into consideration the current economic and funding environment and its impact on income and expenditure. We are also ensuring that planning is taking into account key areas to invest in to ensure sustainability, for example, our digital streams, increasing return on investment for voluntary income and establishing our hub model.

On the sale of the head office building, 314-320 Gray's Inn Road, we were able to remove the long-term liability of our mortgage. As outlined in the Pension Fund Recovery Plan (Note 13) we were also able to meet the liability of £1 million due to the pension fund. This has provided a strong foundation for our underlying financial security. The Trustees are committed to following a robust process to ensure any investment of the funds from the sale of this asset are in line with charitable objectives and do not undermine the ongoing sustainability of the charity.

The Trustees acknowledge our pension fund obligations and have a plan in place to eliminate the deficit over 12 years. The liability, as calculated according to FRS 102 and included in these accounts, does not impact on the operational finances of the charity except for the agreed payments under the deficit recovery plan. The plan was reviewed in 2016/17 by the Trustees of the Pension Scheme and Terrence Higgins Trust and the deficit recovery was agreed to be affordable, the details of which are in Note 13 to the accounts.

Therefore, Terrence Higgins Trust has a reasonable expectation that it has adequate resources to continue in operational existence for the foreseeable future. The Trustees believe there are no material uncertainties that call into doubt the charity's ability to continue. The accounts have therefore been prepared on the basis that the charity is a going concern.

INVESTMENTS

The charity has two investment funds.

- A capital fund was established to accommodate a legacy received in 1994/95 as a permanent endowment. This is managed by Rathbone Investment Management Limited. In 2018/19, the invested endowment made a realised return of £7,000 with an overall increase in value of £10,000. This is less than a 1% decrease in value over 12 months and a 4% increase in value since inception. There has been an increase of 15% since the inception of the fund.
- In 2015/16, a fund was established with Rathbone Investment Management Limited to manage on a discretionary basis the proceeds from the sale of our Lighthouse West London Property. In 2018/19, this fund made a realised return of £116,000 with an overall increase in value of £259,000. There is an unrealised gain of £173,000 which is a 4% increase in value over the past 12 months. There has been an increase of 29% since the inception of the fund.

The target return outlined in our Investment Policy is CPI plus 4% after expenses. CPI rose to 1.8% in March 2018. The return on both investment funds since inception outperforms this target quite markedly. This is primarily due to the exceptional performance of the investment funds in 2016/17 which was recognised at the time.

The investment portfolio has been affected by the changing nature and relative instability of the global and national markets over the past two years. As an organisation we are focused on the need to manage the risk and return of our investment portfolio on a long-term basis, therefore, we expect to manage the fund through times of instability.

The diversification of our asset classes within the portfolio do guard against a certain level of risk but it is inevitable that with a global downturn our investments will be affected. We are working with Rathbones to review this and manage the risk of the portfolio, which we in turn manage through our budgeting process to ensure prudent management of any expected return.

OVERVIEW AND OBJECTIVES OF THE INVESTMENT

Terrence Higgins Trust has around £6 million in investments as a result of the sale of Lighthouse West London. The investments are both short term and long term in nature with £1.5 million to be easily accessible and the remaining balance to be drawn down in line with the long-term agreed business plan of the organisation.

In line with the five year business plan it may be required to hold additional investments. The organisation will ensure that:

- a minimum cash balance for daily operational needs to be held by the charity which will be instantly accessible
- additional funds for short term strategic capital and revenue investment will be held in appropriate short term accounts to maximise the return and ensure cash is accessible in line with business requirements.

Terrence Higgins Trust aims to maximise the financial return on the investments with an acceptable level of risk and volatility as defined below.

ROLES AND RESPONSIBILITY

The Board of Trustees delegates the appointment and monitoring of investment managers to FARC.

Investment decisions, within the confines of this IPS, are delegated by the Board to the Investment Manager.

The key contacts authorised to instruct the investment manager on behalf of the Board are any two of the Executive Director of Corporate Resources, the Head of Finance and the Chief Executive.

ACCEPTABLE LEVEL OF RISK

Assets should be invested to protect against inflation in the long term, however, it is recognised that Terrence Higgins Trust intends to draw both capital and income out of the fund and as such its value will decrease over time.

Terrence Higgins Trust can tolerate some volatility in the capital value of assets as long as withdrawals can be met from total return and are sufficient to meet the requirements of the innovation fund. Any capital withdrawals should be planned to minimise the realisation of any capital losses.

ETHICAL RESTRICTIONS

Terrence Higgins Trust assets should be invested in line with its charitable objectives. Investments should be excluded if perceived as conflicting with the charity's purpose. Specifically, Terrence Higgins Trust does not wish to invest directly in tobacco producing companies.

TARGET ASSET ALLOCATION

Asset Class	Tactical weight %	Strategic weight %	Range %
Fixed interest	13	18	0-30
UK equities	33	35	40.00
Overseas equities	37	35	40-80
Diversifiers	15	10	0-20
Cash	2	2	0-20
Total	100	100	

CURRENCY

The base currency of the investment will be sterling.

LONG-TERM INVESTMENT OBJECTIVE

Target return = Consumer Price Index (CPI) plus 4% after expenses.

INDUSTRY BENCHMARK

A Composite index benchmark, as detailed below, and Asset Risk Consultants (ARC) Steady Growth Charity Index.

The composite benchmark will comprise:

	Weight (%)	Index
UK equities	35.0	FTSE All-Share
Overseas equities	35.0	FTSE All-World (ex-UK)(£)
Property	5.0	FTSE UK Commercial Prop
Alternatives	5.0	3-month GBP LIBOR +2%
Fixed income	18.0	FT Brit Govt All Stocks
Cash	2.0	7-day LIBOR
Total portfolio	100.0	Composite of the above

RISK MANAGEMENT

The charity has a Risk Management Framework that is designed to:

- · identify and assess risks
- identify and evaluate options for the treatment of those risks
- select control objectives and controls that will reduce those risks to acceptable levels within the context of the business plan, operational requirements, constraints, objectives and international legislation and regulation.

THE FRAMEWORK IS BASED ON THE FOLLOWING PRINCIPLES:

Comprehensive

All risks that may prevent the charity from fulfilling its objectives should be considered at all levels of the charity.

Integration

Risk management should be part of the routine management and governance activities of the charity

Maximisation of value

Risk management should not be a 'bureaucratic add-on' to existing processes, rather it should enable existing processes and work to be enhanced.

Transparency

Risk management should involve assessment and control of risks to be undertaken in a transparent manner and clearly comunicated.

Affordability

Systems and controls should be affordable, and be capable of implementation without significant additional investment.

Risks are classified as either 'strategic', 'quality', 'reputational', 'operational', 'information security', 'financial' or 'contractual' – this permits the charity to apply a category-specific Risk Appetite approach. Risk is managed through Directorate and Project Risk Registers and an overarching Charity Risk Register.

The Charity Risk Register is reviewed monthly by the Leadership team and by the Board's Finance, Audit and Risk Committee at its quarterly meetings. The register is also provided to the full Board quarterly.

The review considers:

- significant risks to which the charity is exposed
- impact and probability associated with each risk
- existing internal controls and mitigating actions to reduce each risk to a level within the charity's Risk Appetite
- assurance available for the management of risk.

The risk framework and management plan is being reviewed and refreshed in 2019/20. This will enhance work already in place, and allow us to plan for any new risk associated with realising our new strategy.

PRINCIPAL RISKS AND UNCERTAINTIES

Princip al Risk	Risk Management (internal controls and actions)
Changes to Government policy and reforms will reduce statutory funding beyond the level expected in the long term financial plan and impact the resources available to achieve the charity's strategy.	 Development of a prudent financial strategy for the strategic period. Preparation of budgets, management accounts and careful monitoring. Implementation of fundraising growth strategy. Development of new enterprising income streams. Review our service offering to ensure we are maximising impact with the resources available. Developing our digital service provision to take advantage of technological advances to ensure our services are accessible to those who need them. Working closely with commissioners to ensure we can proactively manage contracts.
Fundraising may be unable to deliver the required growth in voluntary income and impact on our ability to achieve the charity's objectives.	 Development and implementation of a fundraising growth plan. Appropriate investment in fundraising activities to allow the generation of the required returns. Monitoring of performance against plans. To ensure the team has the depth and breadth of skills to respond to new and innovative funding opportunities.
Incidents may occur which adversely affect service delivery, reputation or security.	 Maintenance of robust incident management policy and procedure to ensure that incidents are reported, monitored and investigated and that lessons are learnt. Business Continuity and Disaster Recovery Plans put in place. Policy and procedure for the safeguarding of children and vulnerable adults in place, with an associated rolling training programme for staff. Proactive and reactive media management in place. Training of staff to be able to recognise and report incidents. Proactively manage the IT infrastructure to ensure systems are operational.
The charity's activities are not sufficiently focused to deliver the objectives set out in our strategy.	 Robust business planning aligned to the strategy. Executive review of activities and performance against the business plan. Robust team and line management to ensure all necessary activities are undertaken.

Terrence Higgins Trust strategy Proactively continue to network at all levels to ensure does not keep pace with the Terrence Higgins Trust remains abreast of latest external environment and needs developments in the sector. of beneficiaries. Terrence Higgins Trust pursues a co-production model of services so beneficiaries are involved. • Executive and Board level review of strategy to ensure its relevance. Available resources are Robust business planning which clearly outlines resource not sufficient to be able to requirements, key milestones and timeframes. complete key service reviews Phased introduction of the transformation to ensure available and transformation of business resource is in place. model at the pace required. • Executive review of activities and performance against the business plan. Board of Trustee oversight of business plan to ensure delivery of milestones. To proactively explore new opportunities as they arise systematically and objectively.



STRUCTURE, GOVERNANCE AND MANAGEMENT

Terrence Higgins Trust is a charitable company limited by guarantee, incorporated on 14 December 1983 (company registration number 1778149). Terrence Higgins Trust was registered as a charity in England and Wales on 26 January 1984 (registration number 288527) and with the Office of the Scottish Charity Regulator (OSCR) in January 2009 (registration number SC039986).

The Trustees of Terrence Higgins Trust are the charity's Trustees under charity law and the Directors of the charitable company. While the organisation is registered under the name The Terrence Higgins Trust, its working name is Terrence Higgins Trust (used throughout this Report).

Terrence Higgins Trust is governed by its Articles of Association. This document sets out the charity's objectives and the framework within which Terrence Higgins Trust must operate to achieve these. The Articles of Association are subject to approval by the Charity Commission and are regularly reviewed by Trustees to ensure they remain up to date.

A full review of Terrence Higgins Trust's governing documents took place in 2016 and as a result changes were approved at the Annual General Meeting (AGM) in December 2016. This included replacing the previous Memorandum and Articles of Association with one document. The Articles of Association were amended in July 2018 to increase the maximum number of Trustees from 12 to 15.

The charity has one active 100% owned subsidiary; Terrence Higgins Enterprises Limited, the activities of which are accounted for in Note 27. This company's principal activity is that of raising funds for the charity and its company registration number is 2242767. The company carries on trading activities for the benefit of Terrence Higgins Trust and is contracted to deliver some care contracts, the performance

of which is subcontracted to Terrence Higgins Trust. The company will continue to develop merchandising and fundraising events to raise funds for Terrence Higgins Trust.

Since the Charity Governance Code was launched on 13th July 2017, the Board has utilised the Code as a tool to support the Board to reflect upon its governance structures and consider the ways in which the Charity and its Trustees currently apply the Charity Governance Code's seven principles and recommended practice. The Board of Trustees formally adopted the Code in September 2017.

The Charity already meets a number of the Code's measures. These include clear and accountable Trustee term-limits within the Charity's Articles of Association which state no Trustee can serve more than three three-year terms, an explicit statement regarding the size of the charity's Board, which shall consist of a minimum of 6 and a maximum of 15 Trustees (the Board currently consists of 13 trustees). The Board has also just instigated a review and evaluation of Trustee performance which will include an external review every 3 years.

Whilst the Charity already applies a considerable number of the recommended practices relating to each of the code's seven principles through an action plan, the charity and its Trustees believe that constant review of its governance arrangements is required to further improve standards and increase its overall effectiveness as an organisation.

Our Advisory Board of experts provides independent advice to the charity, and supports the Chief Executive and the Trustees. The members provide expert and objective advice to the charity, challenging and scrutinising key issues in a supportive way. As it is not part of the formal governance of the charity, the Advisory Board can be independent and objective in its feedback.

TRUSTEES

Our Board of Trustees (Directors) is responsible for setting the overall strategy and direction of the charity, and for ensuring Terrence Higgins Trust uses its resources effectively in pursuit of its strategy.

The charity's Articles of Association provides for 15 Trustees, the majority of whom must be elected by the charity's members. Our Trustees are unpaid, are either elected or appointed and are drawn from a variety of backgrounds to ensure a balanced, skills-based Board. Our Articles provide for a mid-term vacancy on the Board to be filled by a co-opted Trustee, who holds office until the AGM following their appointment.

Trustees are:

- elected or appointed to the Board for three years at our Annual General Meeting (AGM)
- subject to re-election (or re-appointment)
- serve for a maximum nine-year term.

All Trustees undergo a formal induction to the charity, the content of which is reviewed annually and includes a mixture of formal training and visits to observe delivery of the charity's services and meetings with senior management.

The Board currently consists of 13 Trustees.

Trustees who served during the year are:

Jonathan McShane (Chair) ##

Gavin Wills (Deputy Chair) ‡‡ (resigned May 2019)

Dr Bilal Ali ∞+

Dr Jake Bayley ∞

Rt Hon. Ben Bradshaw MP

Robert Glick ‡∞

(retired November 2018)

Gordon Mundie ~

William Roberts ~

Randeep Sidhu ∞+

Dr Laura Waters ~

Dr Samantha Westrop ~-

Ben Roberts ∞ (appointed November 2018)

Delroy Corinaldi ‡ (appointed November 2018)

Antonia Belcher ‡ (appointed November 2018)

Key

- ‡ Finance and Risk Committee member
- ~ Quality and Governance Committee member
- † Trustee Recruitment Committee member

Biographical information on the current Trustees can be found at: www.tht.org.uk/our-work/about-our-charity/our-governance/our-trustees

SUB-COMMITTEES

Trustees meet at least four times each year as a Board and attend two full-day strategy meetings. In addition to this, they are supported through the work of four committees which were reviewed during 2018 and revised to ensure they remain appropriate in supporting the board going forward:

- Finance and Risk Committee, which is responsible for appointing the external auditors, reviewing Terrence Higgins Trust's accounts and financial controls, and reviewing the statements and actions on risk and internal controls.
- Development and Enterprise Committee, which oversees the development of organisational corporate development, commercial and business enterprise/ innovation and planning functions.
- Quality and Governance Committee, which oversees service quality and organisational governance including safeguarding.
- Trustee Recruitment Committee, which oversees the recruitment of new Trustees. This includes: identifying which of the applicants meet the requirements of the Trustee specification; managing the application and interview process; and making recommendations to the Board of suitable candidates.

Membership of these committees is drawn from:

- Trustees
- Senior Management
- lay members.

Lay members are often specialists, who possess a particular expertise relevant to the work of the committee. During the year, Sue Baines, Tim Gutteridge, Alex Lawrence-Archer and Peter Orlov served as lay members of the FARC. Christine Caitlin served as a lay member on Development and Enterprise.

TRUSTEES' RESPONSIBILITIES

The Trustees are responsible for preparing the:

- Strategic Report
- Trustees' Report
- Financial Statements in accordance with applicable law and regulations.

Company law requires the Trustees to prepare Financial Statements for each financial year in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards) and applicable law.

Under company law the Trustees must not approve the Financial Statements unless they are satisfied that they give a true and fair view of the state of affairs of the charity and the group, and of the surplus or deficit of the group, for that period.

In preparing these Financial Statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently
- make judgements and accounting estimates that are reasonable and prudent
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the Financial Statements
- prepare the Financial Statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The Trustees are responsible for ensuring that adequate accounting records are maintained that are sufficient to show and explain the charity's and the group's transactions and disclose with reasonable accuracy at any time the financial position of the charity and the group and enable them to ensure that the Financial Statements comply with the Companies Act 2006.

They are also responsible for safeguarding the assets of the charity and the group and ensuring their proper application in accordance with charity law, and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

So far as each of the Trustees at the time of the Report are aware there is no relevant information of which the auditors are unaware and they have taken all the steps they ought to have taken to make themselves aware of any relevant audit information and to establish the auditors are aware of that information.

Haysmacintyre LLP has indicated its willingness to be reappointed as statutory auditor.

This Annual Report of the Trustees, under the Charities Act 2011 and the Companies Act 2006, was approved by the Board of Trustees on 30 September 2019, including approving in their capacity as company directors the Strategic Report contained therein, and is signed as authorised on its behalf by:

Jonathan McShane Chair, Board of Trustees

EXECUTIVE TEAM

The Executive Team works closely with the Board of Trustees to help turn the charity's vision and strategy into a reality. They are responsible for the day-to-day management of the organisation. The Executive Team pay is approved by the Board of Trustees. In addition, we periodically carry out external pay benchmarking using market data to assess senior staff salaries.

The Executive Team that served during the year are:

Ian Green

Chief Executive

Hannah Bodek

Executive Director of Corporate Resources — (resigned May 2018)

Dr Michael Brady

Medical Director

Dominic Edwardes

Executive Director of Communications

Rebecca Phillips

Executive Director of Transformation and Operations

Biographical information on the current Executive Team can be found at:

www.tht.org.uk/our-work/about-our-charity/our-governance/our-executive

VOLUNTEERS, EMPLOYEES AND SUPPORTERS

As an organisation founded by a group of committed friends who recruited volunteers to join the cause, a strong volunteer culture developed in the organisation that continues today.

Our incredible volunteers are the backbone of many of our services, which otherwise could not exist.

In 2018/19 we were lucky enough to have an average of 179 volunteers per month working across England, Wales and Scotland. They undertook a variety of roles from fundraisers and receptionists, counsellors and trainers, office and retail assistants through to outreach workers.

Volunteers contributed more than 27,776 hours to Terrence Higgins Trust this year, equivalent to almost 18 full-time employees.

Terrence Higgins Trust also relies on the work and commitment of its 229 paid staff, which includes 100 part-time staff. We continue our commitment to equal opportunities and to good staff relations.

Terrence Higgins Trust has an Equality and Diversity for Inclusion Policy, the stated aim of which is:

'to provide equality and diversity and fair treatment for all permanent, fixed term, part-time and full-time employees, volunteers and service users. Terrence Higgins Trust is opposed to all forms of unfair discrimination. To achieve this, Terrence Higgins Trust works within the legal obligations and in accordance with the relevant codes and practices relating to diversity and equality.'

It is important to us that staff at Terrence Higgins Trust are representative of the beneficiaries we serve. This year 9% of staff are living with HIV.

To engage and consult staff in a structured and effective manner, we have a Staff Forum with terms of reference and elected representatives.

Representatives are able to raise issues on behalf of their colleagues in the presence of the Chief Executive. In addition to this formal structure, we have an intranet, regular communications to all staff and WorkPlace. WorkPlace is Facebook for work and provides a space for staff across the organisation to share work developments, best practice and ideas.

All of our communication channels exist to encourage and empower our staff to share their news, learn from one another and celebrate achievements.

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS AND TRUSTEES OF TERRENCE HIGGINS TRUST

OPINION

We have audited the financial statements of Terrence Higgins Trust for the year ended 31 March 2019 which comprise the Consolidated Statement of Financial Activities, the Consolidated and Charity Balance Sheets, the Consolidated Cash Flow Statement, and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally

Accepted Accounting Practice). In our opinion, the financial statements:

- give a true and fair view of the state of the group's and of the parent charitable company's affairs as at 31 March 2019 and of the group's net movement in funds, including the income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006 and the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006.

BASIS FOR OPINION

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the group in accordance with the ethical requirements that are relevant

to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

RESPONSIBILITIES OF TRUSTEES FOR THE FINANCIAL STATEMENTS

As explained more fully in the trustees' responsibilities statement set out on page 45, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

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

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

CONCLUSIONS RELATING TO GOING CONCERN

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

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

OTHER INFORMATION

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

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

OPINIONS ON OTHER MATTERS PRESCRIBED BY THE COMPANIES ACT 2006

In our opinion, based on the work undertaken in the course of the audit:

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

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

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

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

- adequate accounting records have not been kept by the parent charitable company, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

USE OF OUR REPORT

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

AnnaBourett

Anna Bennett (Senior Statutory Auditor)

For and on behalf of Haysmacintyre LLP, Statutory Auditors 10 Queen Street Place London, EC4R 1AG

2019

REPORT AND FINANCIAL STATEMENTS

31 March 2019

TERRENCE HIGGINS TRUST
CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES (incorporating an income and expenditure account)
Year ended 31 March 2019

N	U lote	nrestricted £'000	2019 Restricted £'000	Total £'000	Unrestricted £'000	2018 Restricted £'000	Total £'000
Income and endowments from:							
Donations and legacies Other trading activities Investments	3 4 5	4,012 751 142	1,692 - -	5,704 751 142	4,286 738 114	1,279 - -	5,565 738 114
Charitable activities	3				-224		
Ending HIV transmission and improving sexual health Empowering people to live well with HIV Other	6 6 7	5,455 633 10,672	132 - -	5,587 633 10,672	6.379 589 143	88 - -	6,467 589 143
Total	_	21,665	1,824	23,489	12,249	1,367	13,616
Expenditure on:							
Raising funds	8	1,925	-	1,925	1,812	-	1,812
Charitable activities							
Ending HIV transmission and improving sexual health Empowering people to live well with HIV Amplifying the voices of people living with HIV	9 9	7,645 2,114 324	636 450 38	8,281 2,564 362	7,806 2,463 303	586 593	8,392 3,056 403
Total	_	12,008	1,124	13,132	12,384	1,279	13,663
	_						
Net gains/(losses) on investments	16	173	10	183	14	(1)	13
Net income/(expenditure)		9,830	710	10,540	(121)	87	(34)
Other recognised gains and losses Gains/(losses) on revaluation of fixed assets Actuarial gains/(losses) on		(50)	-	(50)	(50)	-	(50)
defined benefit pension schemes	13	(1,469)	-	(1,469)	281	-	281
Net movement in funds	_	8,311	710	9,021	110	87	197
Reconciliation of funds: Total funds brought forward	21 _	9,710	504	10,214	9,600	417	10,017
Total funds carried forward	21_	18,021	1,214	19,235	9,710	504	10,214

The restricted funds column includes an endowment fund as follows: Opening balance of £257,000, net gain on investment for the year of £10,000 and a closing balance of £267,000.

Movements in funds are disclosed in Note 21 to the financial statements.

The notes on pages 53 to 79 form part of these financial statements.

TERRENCE HIGGINS TRUST BALANCE SHEETS As at 31 March 2019

		Grou	ıp	Cha	arity
	Note	2019 £'000	2018 £'000	2019 £'000	2018 £'000
Fixed assets	14010	2 000	2000	2000	2000
Intangible fixed assets	14	506	587	506	587
Tangible fixed assets Investments	15 16	17 6 007	5,765 5,788	17 6 007	5,765 5,700
investments	10 _	6,007	5,/00	6,007	5,788
Current assets	-	6,530	12,140	6,530	12,140
Debtors	17	2,568	1,990	2,543	1,933
Cash held as short term deposits		7,588	2,181	7,501	2,153
Cash at bank and in hand	-	8,600	138	8,600	138
	-	18,756	4,309	18,644	4,224
Creditors: amounts due within 1 year	18 _	(2,913)	(2,355)	(3,196)	(2,687)
Net current assets		15,843	454	15,448	37
Total assets less current liabilities		22,373	14,094	21,978	13,677
Creditors: amounts falling due after 1 year	20 _	<u>-</u>	(1,102)		(1,102)
Net assets excluding pension liability		22,373	12,992	21,978	12,575
Pension liability	13 _	(3,138)	(2,778)	(3,138)	(2,778)
Net assets including pension liability	=	19,235	10,214	18,840	9,797
Funds					
i dilds					
Permanent endowment funds	21	267	257	267	257
Restricted funds Total	21 _	947 1,214	<u>247</u> 504	947	<u>247</u> 504
Unrestricted funds	-	<u> </u>		1,414	
General funds	21	12,264	12,071	12,264	12,071
Designated Funds	21	8,500	-	8,500	-
Subsidiary companies' non-charitable					
funds Pension fund	21 21	395 (3,138)	417 (2,778)	(3,138)	- (2,778)
Total unrestricted funds	_ 	18,021	9,710	17,626	9,293
	-				
Total funds	=	19,235	10,214	18,840	9,797

The Charity's net gain for the year of £9m (2018: gain of £0.2m)

The notes on pages 53 to 79 form part of these accounts.

The financial statements were approved and authorised for issue by the trustees on 30 September 2019 and signed on their behalf by

Jonathan McShane -Chair

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TERRENCE HIGGINS TRUST CONSOLIDATED CASH FLOW STATEMENT Year ended 31 March 2019

		2019	2018
	Note	5,000	5,000
Cash flows from operating activities:		(0)	
Net cash provided by (used in) operating activities	29	(894)	(930)
Cash flows from investing activities:			
Dividends, interest and rents from investments		122	94
Proceeds from the sale of property, plant and equipment		16,100	-
Purchase of property, plant and equipment		(7)	(3)
Purchase of investments	-	(116)	(106)
Net cash provided by (used in) investing activities		15,205	(945)
Cash flows from financing activities:			
Repayments of borrowing		(1,336)	(244)
Net cash provided by (used in) financing activities	•	(1,336)	(244)
Change in cash and cash equivalents in the reporting period		13,869	(1,189)
Cash equivalents at the beginning of the reporting period		2,319	3,508
	•		
Cash and cash equivalents at the end of the reporting period		16,188	2,319

2018 figures have been adjusted following the reclassification of £1.5m of short-term cash investments from 'investments' to 'cash held as short-term deposits'.

1. Charity Information

The charity is a private limited company (registered number 1778149), which is incorporated and domiciled in the UK and is a public benefit entity. The address of the registered office is 314-320 Gray's Inn Road, London WC1X 8DP.

2. Accounting policies

The principle accounting policies adopted and critical areas of judgements are as follows:

a) Basis of preparation

The accounts (financial statements) have been prepared in accordance with the Charities SORP (FRS 102) applicable to charities preparing their accounts in accordance with FRS 102 the Financial Reporting Standard applicable in the UK and Republic of Ireland and the Companies Act 2006 and the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 and UK Generally Accepted Practice as it applies from 1 January 2015.

Terrence Higgins Trust meets the definition of a public benefit entity under FRS 102.

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

The financial statements of Terrence Higgins Trust and its subsidiary company are consolidated, on a line-by-line basis, to produce the Group financial statements. The consolidated entity is referred to as 'the Group'. No separate Statement of Financial Activities has been presented for Terrence Higgins Trust as permitted by Section 408 of the Companies Act 2006. The charity has taken advantage of the exemptions in FRS 102 from the requirements to present a charity only Cash Flow Statement and certain disclosures about the charity's financial instruments.

b) Critical accounting judgements and key sources of estimation uncertainty In the application of the charity's accounting policies, which are described in this note, Trustees are required to make judgements, estimates, assumptions about the carrying values of assets and liabilities that are not readily apparent from other sources. The estimates and underlying assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an on-going basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised if the revision affects only that period or in the period of the revision and future periods if the revision affects the current and future periods.

The key sources of estimation uncertainty that have a significant effect on the amounts recognised in the financial statements are described in the accounting policies and are summarised below:

- Dilapidation provision The charity has provided for its possible liability in relation to its leasehold property which has been estimated and included in accruals in note 18.
- Pension liabilities The charity recognises its liability to its defined benefit pension scheme which involves a number of estimations as disclosed in note 13.

c) Preparation of the accounts on a going concern basis.

The charity reported a reserve position of £19.2m for the year on a group basis. The Trustees are of the view that reserves and cash balances of the charity are sufficient and that on this basis the charity and group is a going concern.

d) Functional/Presentation currency

The functional currency of Terrence Higgins Trust and its subsidiary is considered to be in pounds sterling because that is the currency of the primary economic environment in which the charity/group operates. The consolidated financial statements are also presented in pounds sterling.

e) Income

Income is recognised in the period in which the Charity is entitled to its receipt, it is probable that it will be received and the amount receivable can be measured reliably. Income is deferred only when the charity has to fulfil conditions before becoming entitled to it or where the donor or funder has specified that the income is to be used in a future accounting period.

Legacies are included in the Statement of Financial Activities (SOFA) on the earlier of the date of receipt of finalised estate accounts, the date of payment or where there is sufficient evidence to provide the necessary certainty that the legacy will be received and the value is measurable with sufficient reliability.

f) Expenditure

Expenditure is recognised in the period in which it is incurred. Expenditure includes attributable VAT which cannot be recovered.

The SOFA headings comprise expenditure directly attributable to the activity. Where support costs (including finance, information technology, estates and human resources) cannot be directly attributed, they have been allocated to activities on a whole time equivalent basis.

Expenditure on raising funds comprise the direct costs of fundraising activities and a proportion of support costs.

q) Gifts in kind

Other than significant donated gifts-in-kind, no amounts are included in respect of the substantial contributions made by the many volunteers and volunteer organisations which provide various services and supplies free of charge. Where out of pocket travel and other expenses have been reimbursed to volunteers, these costs are included in the accounts.

Donated facilities and services are recognised as income if the charity would have otherwise purchased them and their value can be reliably measured. They are recognised at the value to the charity, which will often be the open market value. When the goods and services are consumed, an amount to the value of the income is recognised as expenditure. It is difficult to make a reliable estimate of the value of volunteer time and as such, this is not recognised in the accounts.

Lower value gifts that are donated for resale, usually in our Boutique, are recognised as income at the point at which they are sold.

Higher value gifts that are donated for resale, are recognised as income when they are received and held as stock on the balance sheet, where legal ownership has been transferred, until they are sold. They are recognised at fair value, being the expected sale proceeds less cost of sales.

h) Redundancy and termination costs

Redundancy and termination costs are recognised in the period in which they are incurred. Costs are considered to be incurred when staff have been formally notified of the decision to terminate their employment or accept their request for voluntary redundancy. Costs can include redundancy costs, contractual payment in lieu of notice (where applicable) and training costs, all in line with our Redundancy and Redeployment Policy and in exceptional circumstances, settlement costs.

i) Pension costs

Terrence Higgins Trust operates a defined benefit scheme for employees, which provides benefits to members on retirement and on death in service. The assets of the scheme are held and managed separately from those of the charity. Pension scheme assets are measured at fair value at each balance sheet date. Liabilities are measured on an actuarial basis. The net of these two figures is recognised as an asset or liability on the balance sheet. Any change in the asset or liability between the balance sheet dates is reflected in the Statement of Financial Activities as a recognised gain or loss for the period.

Current service costs relating to the defined benefit scheme are charged to the Statement of Financial Activities. Contributions to defined contribution schemes are charged to the Statement of Financial Activities in the year in which they are incurred.

j) Tangible fixed assets

Assets costing more than £1,000 are capitalised.

Tangible fixed assets are stated at their original cost (including any incidental expenses of acquisition such as surveyor's fees).

Depreciation, which reduces the value of tangible fixed assets over time, is calculated at the following annual rates in order to write off each asset over its estimated useful life:

Freehold buildings 2% on cost

Leasehold improvements 20% on cost (or over the life of the lease if shorter)

Fixtures and fittings 20% on cost Motor vehicles 25% on cost

No depreciation is charged on freehold land.

k) Intangible fixed assets

Website development, databases and management information software costs have been capitalised within intangible assets as they can be identified with a specific project anticipated to produce future benefits. Once brought into use they will be amortised over the anticipated life of the benefits arising from the completed project as following:

Website development 25% on cost (or over life of the project if shorter)

Management information 10% on cost

Databases and other software 25% on cost (or over life of the project if shorter)

l) Investments

Shares are stated at market value at the balance sheet date. The SOFA includes realised gain and losses on investments sold in the year and unrealised gains and losses on the revaluation of investments.

Terrence Higgins Trust holds one investment property at a value of £1.4m. The Trustees have approved the valuation which is based upon an independent Estate Agent's market valuation. The original valuation of £1.5m was confirmed by three independent offers of purchase in excess of £1.5m. The loss on the asset in 2019 is in line with the slight fall in the market.

m) Financial instruments

Terrence Higgins Trust has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at the present value of future cash flows (amortised cost). Financial assets held at amortised cost comprise cash at bank and in hand, short term cash deposits and the group's debtors excluding prepayments. Financial liabilities held at amortised cost comprise the group's short and long term creditors excluding deferred income and taxation payable. No discounting has been applied to these financial instruments on the basis that the periods over which amounts will be settled are such that any discounting would be immaterial.

Investments, including bonds and cash held as part of the investment portfolio, are held at fair value at the Balance Sheet date, with gains and losses being recognised within income and expenditure. Investments in subsidiary undertakings are held at cost less impairment.

At the balance sheet date the charity held financial assets at amortised cost of £4,340,000 (2018 £4,092,000) and Financial liabilities at amortised cost of £2,913,000 (2018 £3,165,000)

n) Provisions

Provisions are recognised when the Charity has a present legal or constructive obligation arising as a result of a past event, it is probable that an outflow of economic benefits will be required to settle the obligation and a reliable estimate can be made. Provisions are measured at the present value of the expenditures expected to be required to settle the obligation using a rate that reflects current market assessments of the time value of money and the risks specific to the obligation. The increase in the provision due to the passage of time is recognised as an interest expense.

o) Leased assets

Rental costs relating to operating leases, where substantially all the benefits and risks of ownership remain with the lessor rather than with Terrence Higgins Trust, are charged to the Statement of Financial Activities as incurred.

p) Fund accounting

Unrestricted funds (General Funds) are those available for use at the discretion of the Trustees in furtherance of the objectives of Terrence Higgins Trust.

Designated funds comprise funds that are expendable, but which have been set aside by the Trustees for specific purposes.

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund, together with a fair allocation of support costs.

Capital funds consist of income permanently endowed by donors. Income from these funds is transferred to General Funds.

3.	Donations and Legacies Year ended 31st March 2019	Unrestricted £'000	Restricted £'000	2019 £'000
	Corporate donations Trust donations National Lottery Communities Fund Community fundraising Individual donations Legacies	110 79 - 374 1,513 1,936	324 1,080 250 1 37	434 1,159 250 375 1,550 1,936
	Total donations and legacies	4,012	1,692	5,704
	Year ended 31st March 2018	Unrestricted £'000	Restricted £'000	2018 £'000
	Corporate donations Trust donations National Lottery Communities Fund Community fundraising Individual donations Legacies	142 28 - 318 1,574 2,224	404 103 678 - 17	546 131 677 318 1,591 2,301
	Total donations and legacies	4,286	1,278	5,564
4.	Other trading activities		2019 £'000	2018 £'000
	Fundraising events Shop sales Rental income from operating leases Room hire and catering Sponsorship, sales and cause related marketing		351 92 295 6 7	307 91 324 7 9
	Total other trading activities		751	738
5.	Investment income		2019 £'000	2018 £'000
	Investment income Bank interest		133 9	106 8
	Total investment income		142	114

6.	Income from charitable activities Year ended 31st March 2019	Unrestricted £'000	Restricted £'000	Total £'000
	Ending HIV transmission and improving sexual health Public Health England Health authorities Local authorities and other statutory bodies	1,204 381 3,870	46 - 86	1,250 381 3,956
	Total Ending HIV transmission and improving sexual health	5,455	132	5,587
	Empowering people to live well with HIV Health authorities Local authorities and other statutory bodies	116 517		116 517
	Total Empowering people to live well with HIV	633		633
	Total income for charitable activities	6,088	132	6,220
	Year ended 31st March 2018	Unrestricted £'000	Restricted £'000	Total £'000
	Ending HIV transmission and improving sexual health Public Health England Health authorities Local authorities and other statutory bodies	1,200 374 4,805	27 - 61	1,227 374 4,866
	Total Ending HIV transmission and improving sexual health	6,379	88	6,467
	Empowering people to live well with HIV Health authorities Local authorities and other statutory bodies	117 472	1	118 472
	Total Empowering people to live well with HIV	589	1	590
	Total	6,968	89	7,057
7.	Other income		2019 £'000	2018 £'000
	Net Sale Proceeds on Property Disposal Training and conferences Counselling and therapy fees Student placements Other		10,319 5 80 - 268	- 14 58 2 69
	Total other income		10,672	143

8.	Expenditure on raising funds			
		Cost of raising	Fundraising	
	Year ended 31st March 2019	funds	& trading	2019
		£'000	£'000	£'000
	Salaried staff costs	745	119	864
	Non-salaried staff costs	15	3	18
	Printing costs	203	36	239
	Event costs	113	20	133
	Other direct costs	257	41	298
	Premises costs	43	8	51
	Support costs (note 10)	305	17	322
	Total	1,681	244	1,925
		Cost of raising	Fundraising	
	Year ended 31st March 2018	funds	& trading	2018
		£,000	£'000	£'000
	Salaried staff costs	715	108	823
	Non-salaried staff costs	56	10	66
	Printing costs	172	30	202
	Event costs	129	25	154
	Other direct costs	262	42	304
	Premises costs	40	7	47
	Support costs (note 10)	204	12	216
	Total	1,578	234	1,812

9. Charitable activities Year ended 31st March 2019 Ending HIV transmission and improving people to sexual live well with health HIV	Amplifying the voices of people living with HIV	Total 2019
£,000 £,000	£'000	£'000
Salaried staff costs 3,898 1,486	244	5,628
Non-salaried staff costs 13 7	-	20
Subcontractors and partners 632 11	-	643
Clinical supplies 387 1	-	388
Hardship grants - 51	-	51
Website 12 16	-	28
Volunteer costs 14 15 Print and design costs 233 14	1	30
Print and design costs 233 14 Condoms & materials 95 14	4	251 109
Event costs 44 20	2	66
Campaign/service advertising 510 3	1	514
Research & evaluation 11 2	-	13
Staff travel and subsistence 114 25	9	148
Other direct costs 480 191	41	712
Premises costs 482 177	-	659
Support costs (note 10)1,356531	60	1,947
Total 8,281 2,564	362	11,207
Charitable activities Year ended 31st March 2018 Ending HIV transmission and improving people to sexual live well with health HIV	Amplifying the voices of people living with HIV	Total 2018
£'000 £'000		
	£'000	£'000
	£'000 288	
		£'000 6,747 42
Salaried staff costs 4.527 1,932	288	6,747
Salaried staff costs 4.527 1,932 Non-salaried staff costs 21 19	288	6,747 42
Salaried staff costs 4.527 1,932 Non-salaried staff costs 21 19 Subcontractors and partners 525 28 Clinical supplies 239 1 Hardship grants - 60	288	6,747 42 553 240 60
Salaried staff costs4.5271,932Non-salaried staff costs2119Subcontractors and partners52528Clinical supplies2391Hardship grants-60Website5522	288 2 - - - 10	6.747 42 553 240 60 87
Salaried staff costs 4,527 1,932 Non-salaried staff costs 21 19 Subcontractors and partners 525 28 Clinical supplies 239 1 Hardship grants - 60 Website 55 22 Volunteer costs 11 27	288 2 - - - 10 2	6.747 42 553 240 60 87 40
Salaried staff costs4.5271,932Non-salaried staff costs2119Subcontractors and partners52528Clinical supplies2391Hardship grants-60Website5522Volunteer costs1127Print and design costs26418	288 2 - - - 10	6.747 42 553 240 60 87 40 285
Salaried staff costs4.5271,932Non-salaried staff costs2119Subcontractors and partners52528Clinical supplies2391Hardship grants-60Website5522Volunteer costs1127Print and design costs26418Condoms & materials991	288 2 - - 10 2 3	6.747 42 553 240 60 87 40 285
Salaried staff costs4.5271,932Non-salaried staff costs2119Subcontractors and partners52528Clinical supplies2391Hardship grants-60Website5522Volunteer costs1127Print and design costs26418Condoms & materials991Event costs5536	288 2 - - - 10 2	6.747 42 553 240 60 87 40 285 100 92
Salaried staff costs 4,527 1,932 Non-salaried staff costs 21 19 Subcontractors and partners 525 28 Clinical supplies 239 1 Hardship grants - 60 Website 55 22 Volunteer costs 11 27 Print and design costs 264 18 Condoms & materials 99 1 Event costs 55 36 Campaign/service advertising 442 2	288 2 - - - 10 2 3 - 1	6.747 42 553 240 60 87 40 285 100 92 444
Salaried staff costs4.5271,932Non-salaried staff costs2119Subcontractors and partners52528Clinical supplies2391Hardship grants-60Website5522Volunteer costs1127Print and design costs26418Condoms & materials991Event costs5536Campaign/service advertising4422Research & evaluation42	288 2 - - - 10 2 3 - 1	6.747 42 553 240 60 87 40 285 100 92 444
Salaried staff costs Non-salaried staff costs Subcontractors and partners Clinical supplies Hardship grants Volunteer costs Print and design costs Condoms & materials Event costs Campaign/service advertising Staff travel and subsistence 1,932	288 2 - - 10 2 3 - 1 - 1	6.747 42 553 240 60 87 40 285 100 92 444 7 183
Salaried staff costs Non-salaried staff costs Subcontractors and partners Clinical supplies Hardship grants Volunteer costs Print and design costs Condoms & materials Event costs Campaign/service advertising Staff travel and subsistence Other direct costs 1,932 1,932 28 29 10 19 10 10 10 10 10 10 10 1	288 2 - - - 10 2 3 - 1	6.747 42 553 240 60 87 40 285 100 92 444 7 183 639
Salaried staff costs Non-salaried staff costs Subcontractors and partners Clinical supplies Hardship grants Volunteer costs Print and design costs Condoms & materials Event costs Campaign/service advertising Staff travel and subsistence Other direct costs 1,932 1,932 28 29 10 19 10 10 10 10 10 10 10 1	288 2 - - 10 2 3 - 1 - 1	6.747 42 553 240 60 87 40 285 100 92 444 7 183

		Ending HIV transmission				
10.	Support costs	and	Empowering	Amplifying		
	Year ended 31st March 2019	improving	people to	the voices of		
		sexual	live well with	people living	Fundraising	Total
		health	HIV	with HIV	& trading	2019
		£'000	£'000	£'000	£'000	£'000
	Salaried staff costs	616	241	27	146	1,030
	Non salaried staff costs	26	10	1	6	43
	Staff travel and subsistence	7	2	-	2	11
	IT costs	285	112	13	68	478
	Other direct costs	394	155	18	94	661
	Premises costs	28	11	1	6	46
	Total support costs	1,356	531	60	322	2,269
		Ending HIV				
	Support costs Year ended 31st March 2018	transmission and improving sexual health £'000	Empowering people to live well with HIV £'000	Amplifying the voices of people living with HIV £'000	Fundraising & trading £'000	Total 2018 £'000
	• •	transmission and improving sexual health	people to live well with HIV	the voices of people living with HIV	& trading	2018
	Year ended 31st March 2018	transmission and improving sexual health £'000	people to live well with HIV £'000	the voices of people living with HIV £'000	& trading £'000	2018 £'000
	Year ended 31st March 2018 Salaried staff costs	transmission and improving sexual health £'000	people to live well with HIV £'000 206	the voices of people living with HIV £'000 21	& trading £'000 103	2018 £'000 863
	Year ended 31st March 2018 Salaried staff costs Non salaried staff costs	transmission and improving sexual health £'000 533 20	people to live well with HIV £'000 206	the voices of people living with HIV £'000 21	& trading £'000 103 4	2018 £'000 863 33
	Year ended 31st March 2018 Salaried staff costs Non salaried staff costs Staff travel and subsistence	transmission and improving sexual health £'000 533 20 6 264 281	people to live well with HIV £'000 206 8 2	the voices of people living with HIV £'000 21 1	& trading £'000 103 4 1	2018 £'000 863 33 9
	Year ended 31st March 2018 Salaried staff costs Non salaried staff costs Staff travel and subsistence IT costs	transmission and improving sexual health £'000 533 20 6	people to live well with HIV £'000 206 8 2	the voices of people living with HIV £'000 21 1	& trading £'000 103 4 1	2018 £'000 863 33 9

Support costs include the cost of the Finance, Human Resources, IT and Estates departments. Support costs are allocated to activities based on the number of whole time equivalent employees working

11. Net income

This is stated after charging:	2019	2018
	£'000	£'000
Depreciation and amortisation	243	268
Rental costs relating to operating leases	306	342
Trustees' indemnity insurance	5	5
Auditors' remuneration: audit	27	27
Auditors' remuneration: pension	7	7
Actuarial fee for FRS 17 valuation	3	3

None of the Trustees received any remuneration from the Charity (2018: £nil). No Trustees (2018: none) were reimbursed for travel expenses during the year. No catering costs for the committee and other meetings were incurred (2018: £nil). Travel and accommodation was booked and paid for directly by the charity for Trustees with total costs amounting to £259 (2018: £739). The auditors' remuneration stated above are exclusive of irrecoverable VAT that is an additional cost for the charity.

12. Staff costs

Staff costs (paid staff, not including volunteers) were as follows:

	2019	2018
	£'000	£'000
Salaries and wages	6,370	7,283
Social security costs	623	689
Pension contributions	255	264
Agency staff	75	140
Redundancy costs	280	198
Total staff costs	7,603	8,574

Redundancy costs relate to staff in posts that have been made redundant either because of changes to funding and the services we provide have been stopped or cut back as a result or because unfunded posts have been reduced through restructures that have been carried out to reduce the overheads of the Charity. At the 31st March 2019 £33,176 of redundancy payments were outstanding and were included in the accounts as a creditor.

		2019	2018
Staff costs are categorised as:	Notes	£'000	£'000
Cost of raising funds	8	760	771
Fundraising trading	8	122	118
Ending HIV transmission and improving sexual health	9	3,911	4,549
Empowering people to live well with HIV	9	1,493	1,951
Amplifying the voices of people living with HIV	9	244	290
Support staff	10	1,073	895
Total staff costs		7,603	8,574
The average head count of staff employed during the year	was as follows	:	
		2019	2018
		No.	No.
Salaried staff		228	268
The average weekly number of whole time equivalent emp	oloyees during	the year was a	as follows:
		2019	2018
		No.	No.
Salaried staff		186	206
Sessional staff		11	14
		197	220
The number of higher paid employees was:		2019	2018
		No.	No.
£60,000 to £69,999		2	4
£70,000 to £79,999		2	2
£100,000 to £109,999		1	1

Of the higher paid employees, all received employer contributions totalling £19,441 (2018: £21,515) paid into a defined contribution pension scheme. The total benefits received by the Executive team during the year ending 31 March 2019 was £379,880 (2018: £460,902) with salaries ranging from £11,821 to £102,009 in the current year.

13. Staff pension

Terrence Higgins Trust operated a defined benefit pension scheme, Terrence Higgins Trust Pension Scheme ("the Scheme"), where benefits are based on each member's salary and pensionable service prior to leaving the scheme. The Scheme has been closed to new entrants for a number of years and existing members are no longer accruing defined benefits under the Scheme. Benefits receive statutory revaluation in deferment. Once in payment, pension increases are applied, the majority of which are linked to inflation (subject to floors and caps).

To replace the final salary scheme a Group Personal Pension Scheme was introduced. During the year ended 31st March 2019, Terrence Higgins Trust contributed £232,522 (2018: £228,245) and employees contributed £192,031 (2018 £165,827).

Funding

The Scheme's assets are held completely separately from the Trust in a separate trust fund. The fund is looked after by the Pension Trustees on behalf of the members. The assets are invested to meet the benefits promised under the Scheme by a combination of investment returns and future contributions. Under the normal course of events, actuarial valuations are undertaken every three years to confirm whether the assets are expected to be sufficient to provide the benefits. If there is a shortfall, a recovery plan is put in place under which the Charity is required to pay additional contributions over a period of time agreed with the Trustees.

The last triennial actuarial valuation was at 31 July 2015 which indicated the Scheme had a shortfall. The charity agreed to pay deficit reduction contributions in line with the following schedule:

- £18,677 on 1st March 2017
- £14,000 per month from 1 April 2017 to 31 May 2030, increasing each subsequent 1 January in line with CPI (capped at 5% per pa);
- The amount raised to £14,726 per month on 1 January 2018

plus

A special lump sum of £1 million to be paid into the Scheme on the earlier of:

- the completion of the sale of the Grays Inn Road property; and
- 31 December 2019.

This lump sum was paid in February 2019 on the completion of the sale of the Gray's Inn Road property.

The accounting disclosures are based on different assumptions from the Scheme's funding assumptions. This is because:

- The funding and accounting valuations may be carried out at different dates and so are based on different market conditions;
- ii. The funding assumptions are determined by the Trustees who must include margins for prudence. The accounting assumptions are determined by the Charity directors in accordance with accounting standards, which are different from funding regulations.

13. Staff pension (continued)

The FRS102 value placed on the pension benefit obligation has been determined by rolling forward from previous results, making adjustments to reflect benefits paid out of the Scheme, and for differences between the assumptions used at this year-end and the previous year-end.

Effective Date	At 31/03/19	
Principal Actuarial Assumptions		
Discount rate	2.70%	2.90%
Pension increases (RPI up to 5%)	3.30%	3.20%
Revaluation in deferment (CPI up to 5 %)	2.20%	2.10%
Mortality		
- Base Table	S2PXA YOB	S2PXA YOB
- Allowance for future improvements	CMI 2017	CMI 2015
- Allowance for future improvements	1.25%	1.25%

Scheme's assets 3.20% 3.50%

The expected return on assets is a weighted average of the assumed long-term returns for the various asset classes.

The major categories of assets as a proportion of total assets are as follows:

Equities	61%	80%
Bonds	29%	14%
Other (cash etc)	10%	6%

The actuarial loss on the Scheme's assets over the year to the review date was £1,469,000.

The assets do not include any investment in the Trust.

13. Staff pension (continued)

Balance sheet position	31/03/19 £'000	31/03/18 £'000
Present value of defined benefit obligation Fair value of plan assets Excess / (Deficit)	21,133 17,995 (3,138)	18,947 16,169 (2,778)
Net Defined Benefit Liability	(3,138)	(2,778)
Net assets available for benefits	17,995	16,169
Profit and loss		
Interest on net liability Past service cost	(64)	(89)
1 452 551, 1100 5051	(64)	(89)
Actual return on plan assets	821	448
Other comprehensive income (OCI) Actual less expected return on plan assets Experience gains and losses on Change in assumptions Actuarial gain / (loss) recognised in O(338 (1,050) (757) (1,469)	(8) (134) 423 281
Changes in fair value of plan assets:	31/03/19	31/03/18
Opening fair value of plan assets	£'000 16,169	£'000 15,754
Employer contributions Benefit payments	1,173 (168)	169 (202)
Expected return on plan assets	483	456
Actuarial gains / (losses)	338 17,995	(8) 16,169
Changes in present value of defined benefit obligation:	31/03/19	31/03/18
Opening defined honefit obligation	£'000	£'000
Opening defined benefit obligation Interest cost	18,947 547	18,893 545
Benefits paid Actuarial losses / (gains)	(168) 1,807	(202) (289)
Closing defined benefit obligation	21,133	18,947

14.	Intangible fixed assets - group and charity			
	3 ,		Software &	
	As at 31st March 2019	Website	systems	Total
		£'000	900'3	£,000
	Cost			
	At the start of the year	768	1,540	2,308
	Additions in year	215	3	218
	Disposals/write offs in year	(768)	(67)	(835)
	At the end of the year	215	1,476	1,691
	Amortisation			
	At the start of the year	562	1,159	1,721
	Charge for the year	43	89	132
	Disposals/write offs in year	(601)	(67)	(668)
	At the end of the year	4	1,181	1,185
	Net book value			
	At the end of the year	211	295	506
	At the start of the year	206	381	587
			Software &	
	As at 31st March 2018	Website	systems	Total
		£'000	£'000	£'000
	Cost			
	At the start of the year	562	1,502	2,064
	Additions in year	206	38	244
	Disposals/write offs in year	-	-	12
	At the end of the year	768	1,540	2,308
	Amortisation			
	At the start of the year	562	1,061	1,623
	Charge for the year	-	98	98
	Disposals/write offs in year	_	<u>-</u>	_
	At the end of the year	562	1,159	1,721
	Net book value			
	At the end of the year	206	381	587
	At the start of the year	-	441	441

15. Tangible fixed assets - group and charity

	Freehold	Leasehold	Fixtures &	Computer		
As at 31st March 2019	property	improvements	fittings	equipment	Motor vehicles	Total
01	£,000	£,000	£,000	£,000	5,000	£,000
Cost	6.611	90	475	520	40	7.750
At the start of the year	0,011	89	475	529	48	7,752
Additions in year	(6,611)	2	5	- (40 7)	(38)	7
Disposals/write offs in year Reclassification/Revaluation	(0,011)	(34)	(247)	(187)	(38)	(7,117)
Rectassification/ Revaluation		-				
At the end of the year		57	233	342	10	642
Danier inting and incoming out and						
Depreciation and impairment pro		6.4	46.4	406	40	4.007
At the start of the year	925	64	464	486	48	1,987
Charge for the year Disposals/write offs in year	65	11 (20)	5 (240)	30	(20)	(1.472)
Reclassification/Revaluation	(990)	(20)	(240)	(185)	(38)	(1,473)
At the end of the year		55	229	331	10	625
Net book value						
At the end of the year		2	4	11		17
At the start of the year	5,686	25	11	43		5.765
			, ,_			
	Freehold	Leasehold	Fixtures &	Computer		
As at 31st March 2018	property	improvements	fittings	equipment	Motor vehicles	Total
					Motor vehicles £'000	Total £'000
Cost	property £'000	improvements £'000	fittings £'000	equipment £'000	£,000	£'000
Cost At the start of the year	property	improvements £'000	fittings £'000	equipment £'000		£'000 7,808
Cost At the start of the year Additions in year	property £'000	improvements £'000	fittings £'000 482	equipment £'000	£,000	£'000 7,808 3
Cost At the start of the year Additions in year Disposals/write offs in year	property £'000	improvements £'000 134 - (45)	fittings £'000 482 - (7)	equipment £'000	£'000 48 - -	£'000 7,808
Cost At the start of the year Additions in year	property £'000	improvements £'000	fittings £'000 482	equipment £'000	£,000	£'000 7,808 3
Cost At the start of the year Additions in year Disposals/write offs in year	property £'000	improvements £'000 134 - (45)	fittings £'000 482 - (7)	equipment £'000	£'000 48 - -	£'000 7,808 3
Cost At the start of the year Additions in year Disposals/write offs in year Reclassification/Revaluation At the end of the year	property £'000 6.611 - - - 6.611	improvements £'000 134 - (45)	fittings £'000 482 - (7) -	equipment £'000 533 3 (7)	£'000 48 - -	£'000 7,808 3 (59)
Cost At the start of the year Additions in year Disposals/write offs in year Reclassification/Revaluation At the end of the year Depreciation and impairment pro	property £'000 6.611 6.611 ovisions	improvements £'000 134 - (45) - 89	fittings £'000 482 - (7) - 475	equipment £'000 533 3 (7) - 529	£'000 48 - - - 48	£'000 7,808 3 (59) - 7,752
Cost At the start of the year Additions in year Disposals/write offs in year Reclassification/Revaluation At the end of the year Depreciation and impairment pro	property £'000 6.611 6.611 ovisions 847	improvements £'000 134 - (45) - 89	fittings £'000 482 - (7) - 475	equipment £'000 533 3 (7) - 529	£'000 48 - - - 48	£'000 7.808 3 (59) - 7.752
Cost At the start of the year Additions in year Disposals/write offs in year Reclassification/Revaluation At the end of the year Depreciation and impairment pro At the start of the year Charge for the year	property £'000 6.611 6.611 ovisions	improvements £'000 134 - (45) - 89 89 18	fittings £'000 482 - (7) - 475	equipment £'000 533 3 (7) - 529 453 40	£'000 48 - - - 48	£'000 7.808 3 (59) - 7.752 1,874 170
Cost At the start of the year Additions in year Disposals/write offs in year Reclassification/Revaluation At the end of the year Depreciation and impairment pro At the start of the year Charge for the year Disposals/write offs in year	property £'000 6.611 6.611 ovisions 847	improvements £'000 134 - (45) - 89	fittings £'000 482 - (7) - 475	equipment £'000 533 3 (7) - 529	£'000 48 - - - 48	£'000 7.808 3 (59) - 7.752
Cost At the start of the year Additions in year Disposals/write offs in year Reclassification/Revaluation At the end of the year Depreciation and impairment pro At the start of the year Charge for the year	property £'000 6.611 6.611 ovisions 847	improvements £'000 134 - (45) - 89 89 18	fittings £'000 482 - (7) - 475	equipment £'000 533 3 (7) - 529 453 40	£'000 48 - - - 48	£'000 7.808 3 (59) - 7.752 1,874 170
Cost At the start of the year Additions in year Disposals/write offs in year Reclassification/Revaluation At the end of the year Depreciation and impairment pro At the start of the year Charge for the year Disposals/write offs in year	property £'000 6.611 6.611 ovisions 847	improvements £'000 134 - (45) - 89 89 18	fittings £'000 482 - (7) - 475	equipment £'000 533 3 (7) - 529 453 40	£'000 48 - - - 48	£'000 7.808 3 (59) - 7.752 1,874 170
Cost At the start of the year Additions in year Disposals/write offs in year Reclassification/Revaluation At the end of the year Depreciation and impairment pro At the start of the year Charge for the year Disposals/write offs in year Reclassification/Revaluation	property £'000 6,611	improvements £'000 134 - (45) - 89 18 (43) -	fittings £'000 482 - (7) - 475 439 32 (7) -	equipment £'000 533 3 (7) - 529 453 40 (7) -	£'000 48 - - - 48 46 2	£'000 7,808 3 (59) - 7,752 1,874 170 (57)
Cost At the start of the year Additions in year Disposals/write offs in year Reclassification/Revaluation At the end of the year Depreciation and impairment pro At the start of the year Charge for the year Disposals/write offs in year Reclassification/Revaluation At the end of the year	property £'000 6,611	improvements £'000 134 - (45) - 89 18 (43) -	fittings £'000 482 - (7) - 475 439 32 (7) -	equipment £'000 533 3 (7) - 529 453 40 (7) -	£'000 48 - - - 48 46 2	£'000 7,808 3 (59) - 7,752 1,874 170 (57)
Cost At the start of the year Additions in year Disposals/write offs in year Reclassification/Revaluation At the end of the year Depreciation and impairment pro At the start of the year Charge for the year Disposals/write offs in year Reclassification/Revaluation At the end of the year Net book value	property £'000 6,611	improvements £'000 134 - (45) - 89 89 18 (43) - 64	fittings ξ'000 482 - (7) - 475 439 32 (7) - 464	equipment £'000 533 3 (7) - 529 453 40 (7) - 486	£'000 48 - - - 48 46 2	£'000 7,808 3 (59) - 7.752 1,874 170 (57) - 1,987

From the beginning of March 2017 one of the Charity's freehold properties, located at 14-15 Lower Marsh London, was surplus to operational requirements. It was marketed for commercial letting and is being leased to a number of tenants. As a result, the property is classified within investments.

Details of charges over properties are given in note 20.

16. Fixed asset investments - group and charity

As at 31st March 2019	Investment Property £'000	Investments £'000	Endowment £'000	2019 £'000
Market value at the start of the year Reclassification	1,450	4,081	257	5,788
Additions Withdrawals		116	7 (7)	123 (7)
Management fees		(30)	(2)	(32)
Unrealised gain/(loss)	(50)	173	12	135
Market value at the end of the year	1,400	4,340	267	6,007
Historic cost at the end of the year	1,500	3,786	243	5,529
Unrealised investment gain based on historical cost	(100)	554	24	478

Fixed asset investments comprise of an endowment fund and unrestricted investments. The endowment fund at £0.27m and £4.3m of the unrestricted investments are managed by Rathbones and are invested as detailed in the split below. The investment property, at the value of £1.4m, is a decommissioned operating unit which is now being marketed commercially. For details of investments held by the Charity in subsidiary undertakings see note 26.

The major categories of assets as a proportion of total assets are as follows for unrestricted funds:

	2019	2010
UK Equities	36.1%	36.6%
Overseas Equities	39.0%	37.6%
Cash	1.5%	0.5%
Alternatives	14.5%	15.3%
Fixed Interest	8.8%	9.9%

As at 31st March 2018	Investment Property £'000	Investments £'000	Endowment £'000	2018 £'000
Market value at the start of the year Reclassification	1,500	3,991	258	5,749
Additions Withdrawals		106	7 (7)	113 (7)
Management fees		(30)	(2)	(32)
Unrealised gain/(loss)	(50)	14	1	(35)
Market value at the end of the year	1,450	4,081	257	5,788
Historic cost at the end of the year	1,500	4,800	207	6,507
Unrealised investment gain based on historical cost	(50)	(719)	50	(719)

17. Debtors

	Group		Charity	
	2019	2018	2019	2018
	£'000	£,000	£,000	£,000
Grant and contract funding receivable and similar debtors	1,778	1,092	1,764	1,049
Other debtors	324	242	324	242
Amounts due from subsidiary undertakings	-	-	-	-
Prepayments	243	217	243	217
Accrued income	223	439	212	425
Total debtors	2,568	1,990	2,543	1,933

18.	Creditors: amounts due within 1 year				
	·	Group		Chari	ity
		2019	2018	2019	2018
		9000	£,000	£,000	£,000
	Loan repayable (note 20)	-	234	-	234
	Trade creditors	357	267	357	267
	Social security, pension contributions and other taxes	1,043	298	1,043	298
	Other creditors	65	75	22	18
	Accruals	1,066	852	1,066	852
	Amount owed by subsidiary undertaking Deferred income (note 19)		620	334	411
	Deferred income (note 19)	382	629	374_	607
	Total creditors due within 1 year	2,913	2,355	3,196	2,687
19.	Deferred income reconciliation				
				Deferred	At
		At	Released to	during the	31 March
		1 April 2018	income	year	2019
		\$'000	£,000	£'000	£,000
	Donations and legacies	446	(446)	313	313
	Charitable activities	161	(161)	61	61
	Other income	22	(22)	8	8
		629	(629)	382	382
	Income is deferred when cash is received in advance of the cha specific future date or for a specific activity that hasn't yet been		, for example wh	nen funding is gi	ven a
				Deferred	At
		At	Released to	during the	31 March
		1 April 2017	income	year	2018
		£'000	£,000	£'000	£,000
	Donations and legacies	516	(516)	446	446
	Charitable activities	83	(83)	161	161
	Other income	17_	(17)	22	22
		616	(616)	629	629
20.	Creditors: amounts due after 1 year				
		Group		Chari	ity
		2019	2018	2019	2018
		9000	£,000	£,000	£,000
	Loan		1,102		1,102

Two loans were taken out to assist Terrence Higgins Trust in the move to the Charity's current headquarters. A loan of $\mathfrak{L}_{3,000,000}$ was taken out in respect of the purchase of the building and a further loan of $\mathfrak{L}_{1,250,000}$ was taken out to assist with the refurbishment of the premises. The interest rate on both loans is base rate plus 1%. There are charges over the Charity's buildings in relation to the loans. The loans were repaid upon sale of the Gray's Inn Road premises.

As part of the funding discussions between the Charity and the Terrence Higgins Trust Pension Scheme, the Charity agreed to grant the Scheme Trustees security by way of a legal mortgage over two of its properties in respect of its liabilities under the scheme recovery plan. This charge ranks second in priority.

21. Movements in funds

As at 31st March 2019

As at 315t March 2019	Opening balance £'000	Income £'000	Expenditure £'000	Other movement in funds £'000	At the end of March 2019 £'000
Unrestricted funds: General fund Designated Fund Pension fund	12,488	21,665	(13,117)	(8,377) 8,500	12,659 8,500
	(2,778)		1,109	(1,469)	(3,138)
Total unrestricted funds	9,710	21,665	(12,008)	(1,346)	18,021
Restricted funds					
American Express Anglo American African Health Promotion Faith and Communities	13	63	(63)	-	13
Project	1	-	-	-	1
Anglo American Group Foundation	13	-	-	-	13
Barclays Spectrum - Work Positive Project	121	85	(120)	-	86
BLF Champions of Change (African HP Midlands)	-	101	(101)	-	-
BLF Peer Support Scotland	-	130	(130)	-	-
BLF Generous Leadership Programme	-	8	(8)	-	-
BLF Beneficiary Programme CHAFEA - EMIS European MSM Survey & Training Esticom	-	11	(11)	-	-
City Bridge Trust Young People's Counselling	-	25	(25)	-	-
Comic Relief:SWISH	- 5	49	(49)	-	-
Comic Relief - BAME Stigma Digital Outreach Programe	5		(79)	_	5
ECDC -Developing European HIV & STI Testing Directory	-	79 5	(5)	_	-
Elton John AIDS Foundation - PrEP	_	108	(108)	_	_
Gilead BAME MSN Outreach	_	31	(31)	_	_
Gilead - BAME & MSM Can't Pass it on Campaigns	_	36	(36)	_	_
Hardship Legacy	78	-	(68)	_	10
MAC - Positive Voices	-	36	(36)	_	-
MAD Trust Wales Policy	_	2	(2)	_	_
Macfarlane Trust	_	841	(38)	_	803
Soho Estates - MSM Outreach Project	-	25	(25)	-	-
Tesco LGBTQ Healthy Relationships	-	1	(1)	-	-
Viiv Healthcare Groupwork Peer Support	-	11	(11)	-	-
PHE Innovation Fund - PrEP	-	46	(46)	-	-
PHE Innovation Pilot self- testing Black & African Communities	-	56	(56)	-	-
THT Self-Testing Programme	-	37	(37)	-	-
Other Restricted Funds	16	38	(38)		16
Restricted income funds	247	1,824	(1,124)		947
Permanent endowment	257	10			267
Total restricted funds	504	1,834	(1,124)		1,214
Total funds	10,214	23,499	(13,132)	(1,346)	19,235

21. Movements in funds

As at 31st March 2018

7-3 dt 313t Huron 2010	Opening balance	Income	Expenditure	Other movement in funds	At the end of March 2018
Unrestricted funds:	£,000	£,000	£,000	£,000	£'000
General fund Pension fund	12,739 (3,139)	12,249	(12,464) 80	(36) 281	12,488 (2,778)
Total unrestricted funds	9,600	12,249	(12,384)	245	9,710
Restricted funds					
American Express Volunteer Programme	17	44	(48)	-	13
Anglo American African Health Promotion Faith and Communities Pr	14	10	(11)	-	13
Anglo American Group Foundation	10	-	(9)	-	1
Barclays Spectrum - Work Positive Project Barclays SWISH placement service	- 8	176	(55) (8)	-	121
Big Lottery Fund Investing in Communities: Confident Families	-	32	(32)	-	-
Big Lottery Fund People & Places: Community Liaison and Participati	-	40	(40)	-	-
Big Lottery Fund Reaching Communities: Informed Passions	-	28	(28)	-	-
Big Lottery Fund Silver Dreams: Health, Wealth and Happiness	-	135	(135)	-	-
Big Lottery Fund: Life Positive Nottingham	-	20	(20)	-	-
BLF - Work Positive (Back to Work) BLF Awards for all - Living Positively	_	21 8	(21) (8)	_	_
BLF Champions of Change (African HP Midlands)	13	150	(163)	_	_
BLF Children & Families project Nottingham	-5	21	(21)	_	-
BLF Peer Support Scotland	-	110	(110)	-	-
BLF People for People Peer Volunteering Coventry & Wirral	-	61	(61)	-	-
BLF Wales: Positive Action Wales 2 - Gweithredu HIV a Hepatitis Act	-	51	(51)	-	-
CHAFEA - EMIS European MSM Survey & Training Esticom	-	33	(33)	-	-
Church of Scotland Fastest/Health Promotion Programme City Bridge Trust Young People's Counselling	1 10	_	(1) (10)	_	_
City Bridge Trust Young People's Counselling 2	-	24	(24)	_	_
Clinical Services Scotland	28		(28)	_	-
Comic Relief - Positive Balance (Advice)	-	28	(28)	-	-
Comic Relief:SWISH	5	-	-	-	5
ECDC -Developing European HIV & STI Testing Directory	-	21	(21)	-	-
Elton John AIDS Foundation - PrEP	-	28	(28)	-	-
Fastest Direct Scotland Friday/Monday Innovation - MSM Online therapeutic change	_	17 27	(17) (27)	-	-
Garfield Weston - Positive voices	_	12	(12)	_	_
Gilead - HIV testing in Primary Care	-	19	(19)	_	-
Gilead BME MSN Outreach	-	9	(9)	-	-
Hardship Legacy	-	78	-	-	78
Helping Hands - BLF Awards for All Scotland	1	-	(1)	-	-
Henry smith Welfare Rights Advice Lambeth Law Centre BLF Advice	-	6	(6) (4)	-	-
MAC - Positive Voices	4	66	(66)	_	-
MAD Trust Wales Policy	_	6	(6)	_	_
Pfizer - Health and Wellbeing Development	-	10	(10)	-	-
PHE Innovation Pilot	-	7	(7)	-	-
Soho Estates - MSM Outreach Project	-	10	(10)	-	-
Soho Estates - SWISH	-	1	(1)	-	-
Viiv Healthcare - European Migrants ViiV Healthcare - Modelling intergrated HIV services	_	22 5	(22) (5)	-	-
Viiv Healthcare Groupwork Peer Support	_	13	(13)	_	_
ViiV Healthcare - Modelling integrated HIV services in Primary care	5	-5	(5)	-	-
Viiv Healthcare WAD events Nottingham	-	16	(16)	-	-
Other Restricted Funds	43	2	(29)		16
Restricted income funds	159	1,367	(1,279)		247
Permanent endowment	258	_		(1)	257
Total restricted funds	417	1,367	(1,279)	(1)	504
Total funds	10,017	13,616	(13,663)	244	10,214

21. Movement in funds (continued)

Unrestricted funds are funds that the Trustees are free to spend on any charitable activities.

Designated funds are funds allocated to key investment, including the purchase of a new London office. A purchase is currently under consideration and funds should be committed in 2019/20.

The pension fund represents the value of the defined benefit scheme at 31st March 2019. This fund is held separately from the Charity and is not available for distribution on charitable activities.

Permanent endowment

A legacy was received in 1994/95 which the donor specified should be held as a permanent endowment. This was invested in Common Investment Funds but transferred in the 2016/2017 financial year to Rathbones. Any income from this endowment is included in the unrestricted funds but losses or gains on the investment, arising from changes in market value, are included in the endowment fund.

Restricted funds

Restricted funds relate to statutory grants and voluntary income received towards the charity's activities where their use is restricted by the conditions imposed by the grantors or donors. The majority of restricted income is spent in the same year that it is received. A description of our material restricted funds is given below:

American Express Volunteer Programme - Supports the infrastructure of the volunteer programme in London and Brighton. The partnership helps to improve volunteer management systems to recruit, train and retrain volunteers.

Anglo American Group Foundation - African Health Promotion

Anglo American African Health Promotion Faith and Communities Project - An innovative project focussed on engaging African faith and community leaders across the UK to provide the congregations of churches, mosques and other community groups with the opportunity to test for and learn about HIV within their community.

Barclays Spectrum: Work Positive – Peer mentoring, support and training for people with HIV to access employment opportunities.

Barclays SWISH Placement Service - Supports sex workers who would like to exit the industry or find alternative employment. The project helps sex workers develop the skills and expertise needed to re-enter regular employment, education or volunteering.

Big Lottery Fund Scotland: Confident Families – Provision of a comprehensive support package of short and long-term activities tailored to the needs of all types of families who have at least one person (including a child) living with HIV.

Big Lottery Fund People & Places: Community Liaison and Participation Project – Community action project raising awareness of HIV/Hepatitis C in Wales, including through volunteering.

Big Lottery Fund Silver Dreams: Health, Wealth and Happiness - This project supports older people living with HIV (OPLHIV) in London, Brighton, Manchester, Birmingham and Bristol.

Big Lottery Fund Reaching Communities: Informed Passions – A project training people from Yorkshire living with HIV and/or Hepatitis C, or at risk of poor sexual health, to become volunteers and deliver peer support to other people in the same or similar situations.

Big Lottery Fund: Life Positive Nottingham - Long-term condition management support for PLHIV.

Big Lottery Fund Reaching Communities: Work Positive – Peer mentoring, support and training for people with HIV to access employment opportunities.

BLF Champions for Change - An intergenerational project engaging with African communities who are infected with or affected by HIV across the Midlands.

The National Lottery Communities Fund (formerly Big Lottery Fund) - Peer Support Scotland - This is a new kind of service for people living with Hepatitis C and / or HIV. Our expert team of Living Well Specialists support and offer advice on issues around both conditions, through one-to-one mentoring, group activities and learning workshops.

The National Lottery Communities Fund (formerly Big Lottery Fund) - Generous Leadership Programme - Defining generous leadership and identifying HR related examples of best practice.

The National Lottery Communities Fund (formerly Big Lottery Fund) - The Beneficiary Programme will deliver a three year programme that will improve the way the organisation works with our diverse beneficiaries so as to ensure that what we do and the services we provide better meet their needs and involve them more in designing, delivering and evaluating them. The programme is operating from three key geographical areas: London, Brighton and the East of England.

BLF Children & Family project Nottingham - Project for children and families living with and affected by HIV.

BLF People for People Peer Volunteering Coventry & Wirral - To support vulnerable PLHIV in West Midlands and the Wirral, to enable them to manage their long-term condition and to develop peer support networks.

Big Lottery Fund Wales: Positive Action Wales 2 – Support services for people living with HIV/Hepatitis C across Wales to self-manage their condition.

BLF Awards for all - Living Positively - This project aims to improve the mental and physical well being of people living with HIV through a creation of a support network.

Church of Scotland Fastest/Health Promotion Programme - To support fastest clinics in Glasgow and Health promotion programme.

CHAFEA - Creating a training programme for community healthcare workers to improve their work with MSM in Europe.

City Bridge Trust: Young People's Counselling Services – For young people in London. **Clinical Services Scotland** - HIV and sexual health testing clinic.

Comic Relief: Positive Balance – Designed to tackle the root causes of financial exclusion faced by people living with HIV in London, primarily in the deprived areas of Lambeth and Southwark.

Comic Relief: SWISH - Vital support service for sex workers.

Comic Relief - BAME Stigma Digital Outreach Programme - A series of short films 'Their Story, Your Choice' where the viewer is able to choose alternative routes through the stories.

ECDC - Test finder to co-ordinate the development and promotion of the European test finder online tool in countries within WHO and European regions.

EJAF Prep - Supporting Terrence Higgins Trust working with IwantPrEPNow and Prepster to promote improved knowledge around PrEP.

European Aids Treatment - EmERGE project leader - A research project commissioned by the European Commission to better understand the use of mobile technology (such as mobile apps) to improve patient empowerment and experience for people living with HIV in the UK.

Fastest Direct Scotland - HIV testing in Scotland.

Friday/Monday Innovation - Online counselling and group work for MSM around alcohol, drugs and sexual behaviour.

Garfield Western - Positive Voices, London, is a project where people living with HIV volunteer to go into schools, colleges and universities to tell their story and talk about HIV, STIs and general sexual health. Positive Voices presents a unique opportunity to improve sexual health while directly addressing HIV stigma amongst the younger generation.

Gilead BAME MSN Outreach - A 'deliver and learn' project focussing on reaching black and minority ethnic men who have sex with men with HIV prevention information and support.

Gilead BAME & MSN 'Can't Pass it on' Campaign - Terrence Higgins Trust's successful campaign Can't Pass It On, explains that people on effective treatment cannot pass on the virus.

Gilead Sciences Ltd - HIV in Primary Care. The project aims to develop and deliver online HIV self-sampling in GP practices to facilitate HIV testing at GP registration and to increase the uptake of HIV testing in primary care, especially for high-risk communities.

Helping Hands - BLF Awards for All Scotland - To support PLHIV through the provision of workshops and group sessions.

Henry Smith Charity: Scotland Welfare Rights – Money management project providing advice and support on budgets for people living with HIV in Scotland.

Lambeth Law Centre BLF Advice - Providing Advice for PLHIV.

MAC AIDS Fund – Positive Voices. Positive Voices is a project where people living with HIV go into schools, colleges and universities to tell their stories and talk about HIV. The project presents a unique opportunity to improve sexual health while directly addressing HIV stigma amongst the younger generation.

MAD Trust Wales Policy - To support the Policy post in Wales.

Macfarlane Trust - As part of a deed of gift on the closure of the Macfarlane Trust the assets of the organisation were donated to the Terrence Higgins Trust. Under the Deed of Gift the funds are for services supporting beneficiaries that the MacFarlane Trust was set up to work with.

PHE Innovation Fund - Prep - Development of an online tool to help people decide whether PrEP is right for them.

PHE Innovation Pilot - Self Testing black and African Communities - Enhanced promotion and 'click and collect' delivery option for Terrence Higgins Trust's online HIV self testing service for black African people in England.

Soho Estates - MSN Outreach Project to provide a community outreach service which will support the health of residents and people who use the area's night time economy.

Soho Estates SWISH - We have worked in partnership for six years to support SWISH at the Dean Street clinic which provides vital support services to sex workers.

Tesco - LGBTQ Healthy Relationships - Funding LGBTQ events.

ViiV Healthcare Modelling integrated HIV services in Primary care - The project aims to define and model a novel, wholly integrated pathway for a selected group of people over the age of 50 living with HIV in Lambeth and Southwark.

Viiv Healthcare - European Migrants - Digital Marketing pilot for European Migrants. Viiv Healthcare Groupwork Peer Support - support for friends and family

22. Analysis of group net assets between funds

As at 31st March 2019					
	Intangible and Tangible Fixed Assets	Investments	Net current assets	Long-term liabilities	Total funds 2019
	£'000	£'000	£'000	£'000	£'000
General Funds Subsidiary company	523 	5,740	14,501 395	(3,138)	17,626 <u>395</u>
Total unrestricted funds	523	5.740	14,896	(3,138)	18,021
Restricted funds Permanent endowment	<u> </u>	267	947		947 267
Total restricted funds	<u>-</u>	267	947		1,214
Total funds	523	6,007	15,843	(3,138)	19,235
Prior year comparative As at 31st March 2018	Intangible				
	and Tangible Fixed Assets	Investments	Net current assets	Long-term liabilities	Total funds 2018
	£'000	£'000	£'000	£,000	£'000
General Funds Subsidiary company	6,352 	5,581 	(210) 417	(3,880)	7,843 <u>417</u>
Total unrestricted funds	6,352	5,581	207	(3,880)	8,260
Restricted funds Permanent endowment		257	247 		247 257
Total restricted funds		257	247		504
Total funds	6,352	5,838	454	(3,880)	8,764

23. Lease commitments

As a lessee, the charity had future minimum commitments at the year end under non-cancellable operating leases as follows:

	2019 £'000	2018 £'000
	1000	2000
Not later than 1 year	91	235
Later than one year and not later than 5 years	135	228
Later than 5 years		9

As a lessor, the charity had future minimum rental income at the year end under non-cancellable operating leases as follows:

	2019 £'000	2018 £'000
Not later than 1 year	139	332
Later than one year and not later than 5 years Later than 5 years	25 	329 33

24. Legacies Receivable

At the year end the Charity had been notified of an estimated £1.1m (2018: £2.7m) of residual legacies and are expected to be received by the Charity over a number of accounting periods. These mainly comprise shares in properties and investments held in trusts and have not been recognised as income by the Charity as we have been unable to form a reliable estimate of the amounts the Charity is entitled to.

25. Taxation

No corporation tax has been provided in these accounts because, as a registered charity, Terrence Higgins Trust is entitled to the exemptions granted by sections 466 to 493 Corporation Tax Act 2010.

Terrence Higgins Trust is a partially exempt business, which means it can only reclaim a small proportion of the Value Added Tax (VAT) it incurs on expenses. The amount of irrecoverable VAT suffered by Terrence Higgins Trust on its expenditure during the year was £290,793 (2018: £380,049).

26. Subsidiary companies

The Charity has investments costing £100 (2018: £100) in two companies (2018: 2). The shareholding comprises ordinary shares. Details of the subsidiary companies at 31st March 2018, which were incorporated in England and Wales and are wholly owned or controlled directly by Terrence Higgins Trust, are set out below:

Subsidiary companies Activity
Terrence Higgins Enterprises Limited Fundraising
Crusaid Limited Dormant

Summary accounts for Terrence Higgins Enterprises Limited are shown in note 27.

27. Terrence Higgins Enterprises Limited

Profit and loss account	2019 £'000	2018 £'000
Turnover Cost of sales Administrative expenses Profit on trading activities	397 (6) (2) 389	421 (9) (1) 411
Interest		
Profit for the financial year Profit donated through gift aid	389	411
Profit for the financial year after gift aid Retained profit brought forward	389 6	411
Retained profit carried forward	395	417
Balance sheet Cash Debtors Amounts from parent undertaking Other creditors Net assets	87 27 334 (53) 395	28 58 411 (80) 417
Net assets Share Capital Retained profits Capital and Reserves	395 - 395 395	417 - 417 417

28. Related party transactions

There were no material related party transactions during the year other than the transactions with the subsidiary company, Terrence Higgins Enterprise Limited and donations from Trustees that are described below (2018: none).

In 2019 the charity did not charge Terrence Higgins Enterprise Limited for any management fees (2018: none).

In 2019 Terrence Higgins Enterprise Limited did not subcontract the provision of certain long term condition management services to the charity (2018: none).

All profits made by Terrence Higgins Enterprise Limited will be gifted to the charity, the profits in 2018 of £395,000 will be transferred under member resolution in 2019. (2018: £412,000)

During the year Trustees have made donations to the Charity with a total value of £3,217 (2018: £5,094). No conditions were attached to these donations.

- 29. Notes to the consolidated cash flow statement
- (a) Reconciliation of net (expenditure)/income to net cash flow from operating activities

		2019	2018
		£'000	£'000
	Net (expenditure) / income for the reporting period (as per the		
	Statement of Financial Activities)	10,540	(34)
	Adjustments for:	20,040	,5-7,
	Net (gain) / loss on investments	183	13
	Pension adjustment	(1,109)	(80)
	Additional Pension Contribution	1,000	-
	Investment income	(133)	(106)
	Bank interest received	(9)	(8)
	Interest paid	20	20
	Depreciation and amortisation charge	243	268
	Gain on disposal of fixed assets	(10,508)	-
	(Increase) / decrease in debtors	(577)	(550)
	(Increase) / decrease in stock	-	-
	(Decrease) / increase in creditors	(544)	(453)
	Net cash provided by (used in) operating activities	(894)	(930)
(b)	Analysis of cash and cash equivalents		
		2019	2018
		£'000	£'000
	Cash held at bank and in hand	8,600	138
	Liquid resources - cash held on short term deposits	7,588	681
		16,188	819
	Mortgages due within one year	_	(234)
	Mortgages due after one year		(1,102)
	Total	16 100	([17]
	Total	16,188	(517)

30. Terrence Higgins Trust Scotland
This is a summary of the activities of the Terrence Higgins Trust in Scotland.

			2019
As at 31st March 2019	Unrestricted £'000	Restricted £'000	Total £'000
Income:			
Donations and Legacies	2	131	133
Charitable Activities			
Statutory income for charitable activities	329	-	329
Other incoming resources from charitable	-	-	-
Total	331	131	462
Expenditure on:			
Charitable expenditure			
Clinical	-	(2)	(2)
Health Improvement	303	-	303
Long Term Condition Management Premises	3 117	130	133 117
Support Costs	-	_	-
Total	423	128	551
Net income (expenditure)	(92)	3	(89)
A 1 2 1 1 4 1 2 2 0		5	2018
As at 31st March 2018	Unrestricted	Restricted	Total
	£'000	£'000	£'000
Income:	£000	£000 205	£ 000 211
Income: Donations and Legacies			
Donations and Legacies	6		211
Donations and Legacies Charitable Activities	6		211
Donations and Legacies	6		211
Donations and Legacies Charitable Activities Statutory income for charitable activities Other incoming resources from charitable activities	6		211
Donations and Legacies Charitable Activities Statutory income for charitable activities	300 17	205	211 300 17
Donations and Legacies Charitable Activities Statutory income for charitable activities Other incoming resources from charitable activities	300 17	205	211 300 17
Donations and Legacies Charitable Activities Statutory income for charitable activities Other incoming resources from charitable activities Total Expenditure on:	300 17	205	211 300 17 528
Donations and Legacies Charitable Activities Statutory income for charitable activities Other incoming resources from charitable activities Total	300 17	205	211 300 17 528
Donations and Legacies Charitable Activities Statutory income for charitable activities Other incoming resources from charitable activities Total Expenditure on: Charitable expenditure	300 17 323	205	211 300 17 528
Donations and Legacies Charitable Activities Statutory income for charitable activities Other incoming resources from charitable activities Total Expenditure on: Charitable expenditure Clinical Health Improvement Long Term Condition Management	300 17 323	205 - - - 205	211 300 17 528
Charitable Activities Statutory income for charitable activities Other incoming resources from charitable activities Total Expenditure on: Charitable expenditure Clinical Health Improvement Long Term Condition Management Premises	300 17 323	205 - - - 205 59 8 203	211 300 17 528 59 329 204
Donations and Legacies Charitable Activities Statutory income for charitable activities Other incoming resources from charitable activities Total Expenditure on: Charitable expenditure Clinical Health Improvement Long Term Condition Management	300 17 323	205 - - 205 59 8 203 -	300 17 528 59 329 204 85
Charitable Activities Statutory income for charitable activities Other incoming resources from charitable activities Total Expenditure on: Charitable expenditure Clinical Health Improvement Long Term Condition Management Premises	300 17 323	205 - - 205 59 8 203 - - 270	300 17 528 59 329 204 85
Charitable Activities Statutory income for charitable activities Other incoming resources from charitable activities Total Expenditure on: Charitable expenditure Clinical Health Improvement Long Term Condition Management Premises Support Costs	300 17 323	205 - - 205 59 8 203 -	300 17 528 59 329 204 85

GLOSSARY

AIDS:

'acquired immune deficiency syndrome' — (also known as 'late-stage' or 'advanced' HIV infection) is a term used to describe the point where your immune system is so badly damaged by HIV that it can no longer protect you from 'opportunistic infections'. HIV can lead to AIDS without early diagnosis and treatment but having HIV does not mean that you have or will develop AIDS.

BAME:

black, Asian and minority ethnic.

BHIVA:

British HIV Association

Bold Ambitions:

Terrence Higgins Trust's current strategy (2016-2021).

C-Card:

also known as 'Condom Card', a membership scheme to provide free condoms to under 25s.

Chlamydia:

a bacterial sexually transmitted infection (STI), often symptom free but left untreated can cause serious problems in men and women. Chlamydia can be easily treated with antibiotics.

Gonorrhoea:

a bacterial STI which lives in warm, moist parts of the body, such as the throat, rectum, penis and vagina. If left untreated, gonorrhoea can cause infertility in men and women. Gonorrhoea is treated with a course of antibiotics.

HIV:

'human immunodeficiency virus' – a virus which weakens your immune system. Over time, without treatment, illnesses and infections it would normally fight off will be able to enter your body and take hold more easily. HIV medicines (known as 'antiretrovirals') keep HIV under control. If you are diagnosed early and start treatment, your immune system is less likely to get damaged. After being diagnosed with HIV most people are able to continue their lives without many alterations and live a normal lifespan.

HPE:

HIV Prevention England, the Public Health England-funded HIV prevention programme run by Terrence Higgins Trust across England.

HP\/

human papilloma virus is the name for a group of contagious viruses that affect the skin and membranes of the body, which can cause genital warts and cervical cancer.

LGBT:

lesbian, gay, bisexual and trans.

MSM:

men who have sex with men.

myHIV:

Terrence Higgins Trust's online support resource, including peer-mentored support forum, advice and counselling: www.myhiv.org.uk

NHTW:

National HIV Testing Week, an annual campaign

PARTNER study:

an international study which looked at 888 gay and straight couples (and 58,000 sex acts) where one partner was HIV positive and on effective treatment and one was HIV negative. Results found that where the HIV positive partner had an undetectable viral load, there were no cases of HIV transmission whether they had anal or vaginal sex without a condom.

PARTNER2 study:

The PARTNER 2 study looked just at gay men and also reported zero transmissions after looking at almost 800 gay couples and 77,000 sex acts without condoms in serodifferent couples where the HIV positive partner is using HIV treatment.

PEP:

post-exposure prophylaxis. A course of medication that someone takes shortly after possible exposure to HIV (following assessment by a doctor), to reduce the possibility of contracting HIV.

PHE:

Public Health England, an executive agency, sponsored by the Department of Health that exists to protect and improve the nation's health and wellbeing, and reduce health inequalities.

PLWHIV:

people living with HIV.

Postal testing:

HIV testing by post, where a finger-prick blood sample is taken at home and sent to the laboratory. Results are given by text message or telephone call.

PrEP:

pre-exposure prophylaxis. A course of HIV medication taken by an HIV negative person (at risk of HIV), prior to potential HIV exposure, to prevent HIV transmission.

Self test:

HIV tests that can be taken at home (or anywhere), that give you your results back in around 15 minutes.

RSE:

Relationships & Sex Education, previously referred to as SRE (sex and relationships education) or PSHE (personal, social, health and economic education).

STI:

sexually transmitted infections are infections you can pick up and pass on during sex. STIs can be

caused by one of three things: bacteria, viruses or parasites. Some STIs can cause symptoms within days, others may not show any symptoms and can only be detected by sexual health screening.

THT Direct:

Terrence Higgins Trust's free helpline, providing advice and support on issues around HIV and sexual health. THT Direct can be contacted on 0808 802 1221 — it is free from landlines and mobiles. Calls will not show up on any phone bill.

Undetectable viral load:

an 'undetectable' viral load does not mean there is no HIV present — HIV is still there but in levels too low for the laboratory test to pick up. Different laboratories may have different cut off points when classifying an undetectable viral load, however most clinics in the UK classify undetectable as being below 20 copies/ml.

U=U:

'Undetectable equals untransmittable', the message to explain what was proven by the PARTNER study, and which is the backbone to the Can't Pass It On campaign.

Viral load:

the amount of HIV particles (copies) in a millilitre (ml) of blood – eg, 100 copies/ml.

World AIDS Day (WAD):

1 December — a day for people across the world to unite in support of the fight against HIV.

THANK YOU

Our supporters are the reason we can continue our vital work. We would like to thank each individual and organisation that extended their hand of support throughout the year, and to everyone who wore their red ribbon with pride.

We particularly want to thank every one of you who supports us regularly, or remembered us in a will.

WE WOULD TO LIKE TO GIVE SPECIAL THANKS TO:

- American Express
- Annandale Charitable Trust
- Barclays
- Beard AID
- Binham Pride
- BLF Scotland
- BritBears
- Brit Insurance
- British Transport Police
- Christie's
- City Bridge Trust
- Comic Relief
- Dalston Superstore
- David Bowie Fan Club
- Elton John AIDS foundation
- Entertainers
- George MichaelAppreciation Society of Bushey
- George Michael Lovelies
- Gilead
- John Browning Trust
- Kings Cross Steelers
- Ofenheim Charitable Trust
- MAC AIDS Fund
- Macfarlane Trust
- National Lottery Community Fund
- 6 O'clock Gin

- Paperchase
- Porn Pedallers Cycle Club
- Prudential plc
- Pfizer
- Royal Vauxhall Tavern
- Sink the Pink
- Soho Estates
- Southampton University Lesbian, Gay, Bisexual and Transgender+ Society
- Terrence Higgins Trust's Friends Network
- The Gay Bikers Motorcycle Club
- The Auction 2018 Committee
- The Auction Lot donors and event supporters
- The Supper Club 2018 Committee
- The Supper Club restaurant donors and event supporters
- Transport For London
- University of Southampton Student Union
- QX Magazine and the Drag Roast team
- ViiV



To everyone who gives us a gift, has a direct debit, every school and college who have taken on amazing fundraising activities; every single supporter who has completed a running or challenge event and to all those who have organised their own fundraiser in the community. You're all incredible. Our work is only possible because we're doing it together with you.

James Beeby,

Director of Income Generation, Terrence Higgins Trust



A SPECIAL THANK YOU ALSO TO:

- Abertawe Bro Morgannwg University Health Board
- Aneurin Bevan University Health Board
- Ayrshire & Arran Health Board
- Bedford Borough Council
- Brent, Ealing & Harrow Councils
- Brighton & Hove City Council
- Bristol Drug Project
- Buckinghamshire County Council
- Cambridge City Council
- Cambridgeshire Community Services NHS Trust
- Cardiff & Vale University Health Board
- Care UK Healthcare
- City of London
- East Sussex County Council
- Essex County Council
- Essex Partnership University NHS Foundation Trust
- European Centre for Disease Prevention and Control
- Gloucestershire County Council
- Hertfordshire County Council
- Kent Community Health NHS Foundation Trust
- Lincolnshire Community Health Services
- London Borough of Hackney
- London Borough of Redbridge
- London North West University Healthcare NHS Trust
- Luton Borough Council
- Milton Keynes Council

- NHS Fife
- NHS Forth Valley
- NHS Lanarkshire
- NHS Tayside
- Norfolk County Council
- North Middlesex University Hospital NHS Trust
- Northumbria University
- Nottingham City Council
- Nottingham University Hospitals NHS Trust
- Oxford University Hospitals NHS Foundation Trust
- Preventx Limited
- Provide Community Interest Company
- Public Health England
- Royal Free London NHS Foundation Trust
- Royal Wolverhampton NHS Trust
- Solent NHS Trust
- Southend on Sea Borough Council
- Spectrum Community Health Community Interest Company
- Suffolk County Council
- Sussex Community NHS Foundation Trust
- Thurrock Council
- University Hospitals Birmingham NHS Foundation Trust
- University Hospitals Bristol NHS Foundation Trust
- Virgin Care Services Ltd
- Wiltshire County Council
- Wolverhampton City Council

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Tony Whitehead MBE

Johnny Wynne-Williams

REGISTERED OFFICE

314-320 Gray's Inn Road

London

WC1X 8DP

AUDITORS

Haysmacintyre LLP 10 Queen Street Place

London

EC4R 1AG

BANKERS

National Westminster Bank PLC 1-4 Berkeley Square House Berkeley Square

London

W₁J 6BR

FUND MANAGERS

Rathbone Investment Management Ltd 8 Finsbury Circus

London

EC₂M 7AZ

SOLICITORS

Bates Wells Braithwaite LLP 10 Queen Street Place London

EC4R 1BE

Weil, Gotshal & Manges LLP

110 Fetter Lane

London,

EC4A 1AY

Russell—Cooke LLP

2 Putney Hill

London

SW15 6AB

