

Trustees' Report and Financial Statements

for the year ended 31 March 2017



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Foreword

I am delighted to introduce Terrence Higgins Trust's Trustees' Report for 2016-17.

This marks my first Annual Report as Chair of Terrence Higgins Trust, since joining in January. It has been a true privilege to join an organisation I have known and admired for many years, which continues to be at the forefront of the fight against HIV, and I've been deeply inspired by the huge amount of passion and expertise right across the charity.

It is clear that there are huge challenges, but also real opportunities, ahead of us in the fields of HIV and sexual health – as demonstrated in the pages that follow.

This year has seen the start of an exciting new era for HIV prevention, as we get ever closer to our goal of ending HIV transmission in the UK. After years of steadily high rates of HIV diagnoses among gay and bisexual men, we have started to see early indications of a sharp drop in the numbers among this group – by as much as 32% across five major HIV clinics in London.

We are beginning to see what is possible when we come together and utilise all the weapons in our arsenal against HIV transmission, and this will be fundamental to our strategy going forward. If we can build upon this remarkable progress, a world without HIV transmission could be within our grasp – and Terrence Higgins Trust has a vital role to play in making this a reality.

However, it is no time for complacency and there is no doubt it has been a challenging year. The external commissioning landscape is changing, and we're seeing a worrying trend of cuts or major reductions to funding for HIV support services.

At Terrence Higgins Trust, we have had to respond to these changing times and make difficult decisions to ensure our resilience and independence, so that we can be here for people affected by HIV and poor sexual health for years to come.

But there are many reasons to be optimistic. In the past year alone, we have successfully campaigned for sex and relationships education (SRE) to be made compulsory for all schools, we have led the way in considering the needs of the first generation of people growing older with HIV, and we've conducted a self testing pilot which saw 4,750 people test themselves for HIV for free, in their own homes.

Many of these achievements were made under the leadership of our former Chair, Robert Glick, and I would like to thank my predecessor for his contribution, as well as each of our dedicated staff members, volunteers, members and supporters.

One day, together, we will end the HIV epidemic and achieve our vision of 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.

At Terrence Higgins Trust this goal drives us all year round, 365 days a year. We are not there yet. But with the end of the HIV epidemic in sight, we cannot stop now.

I am genuinely excited about the vital role we can play in making this happen, as the UK's leading HIV and sexual health charity.

Thank you,



Jonathan McShane
Chair, Board of Trustees

Our mission and vision

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

During the year we reviewed our mission statements and included a new focus on ending HIV transmission and on amplifying the voices of people living with, and affected by, HIV.

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 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

Achievements and performance – our year in overview

Altogether, 101,200 people are estimated to be living with HIV in the UK, with one in eight of those unaware of their HIV status. Additionally, over 417,000 sexually transmitted infections (STIs) were diagnosed in England in 2015. Within that context, the last year has seen Terrence Higgins Trust at the heart of many pivotal developments in the field of HIV and sexual health.

In the summer of 2016, we became one of the first HIV organisations globally to publicly say that people who are on effective treatment for HIV, with an undetectable viral load, cannot pass on the virus. This followed the groundbreaking findings of the PARTNER study, which monitored over 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. This *Can't Pass It On* message has the potential to transform social attitudes to HIV, as well as to stop HIV transmission entirely.

This year also saw us shout loud about another key piece of the HIV prevention jigsaw – Pre-exposure prophylaxis (PrEP). This is where people who are HIV negative and at risk take HIV medicine to prevent them from getting the virus. The fight to get PrEP made available on the NHS for those at risk of HIV has been long and hard, but thanks to the HIV sector's united voice, in December NHS England agreed to make PrEP available to 10,000 people through an upcoming trial. Clearly there is a long way to go before everyone at risk can access PrEP on the NHS, wherever they live, but we're now one step closer to using this game-changing tool to its full potential.

In January, we published *Uncharted Territory* – a report into the first generation growing older with HIV. We used the report to show that the social care, healthcare and welfare systems must prepare to support this generation and, for the first time, the needs of an invisible group were championed across the national and sector trade media. One in three people living with HIV is now aged 50 or over and this research will enable us to address this cohort's diverse needs.

We had a huge win in March when, following our campaign for sex and relationships education (SRE) to be compulsory in all schools, the Government announced that this would finally become a reality in England. This is vital to tackling poor sexual health among young people. We will continue to campaign for SRE to become mandatory in all schools in Scotland and Wales as well.

Throughout the year we have made great strides in developing our digital services to empower people to access support and testing, wherever they live in the UK. We already have an established chlamydia screening programme, Young and Free, which enables under 25s to order a free testing kit online. This year saw our first HIV self testing pilot, where people ordered a free testing kit online and got an instant result in their own home – over 4,900 people ordered a test. For one in five of these, it was their first ever HIV test.

In March, working in partnership with London Friend, we launched the first online video counselling services for gay and bisexual men who want to make changes around drug and alcohol use and relationships. The digital services will make it easier for those in rural areas to take the first steps towards regaining control, in a safe and non-judgemental space. This is in addition to our online counselling for people living with HIV, with 128 clients receiving support over the course of the year through myHIV, the largest online community of people living with HIV in the country.

We also continued to support people living with HIV back to work as part of our Work Positive programme. In its sixth year, the programme continues to enable participants who have been out of work for more than two years to build confidence, learn new skills and transform their lives. This year we supported people in more locations than ever, including London, Brighton, Essex and Shropshire.

A real highlight of the year was our World AIDS Day campaign, *It's Not Over*. The campaign saw the entire charity come together with one united message: 'We've come a long way in the fight against HIV, but it's not over. We're still fighting, still caring and still wearing our red ribbons with pride.'

To coincide with the campaign, we commissioned a YouGov survey on 1 December which showed that public attitudes towards HIV have not kept up with medical advances, revealing that 30% of the public still think you can get HIV from a toothbrush. It's certainly not over.

The end of this year also marks the first anniversary of our Chief Executive, Ian Green, taking the helm of Terrence Higgins Trust. During this year we have strengthened our relationships across the sector, working collaboratively on a number of key projects in order to ensure we are continuing to have as great an impact as possible on the communities we serve.

We have also developed and enhanced partnerships with key stakeholders. For example we have continued to work collaboratively with Cambridgeshire Community Services NHS Trust to deliver a range of community-based HIV and sexual health services throughout the east of England and are keen to develop this relationship further.

It is fitting that, in such an eventful year, the profile of Terrence Higgins Trust in the national media has soared. This increased profile not only strengthens our voice as a charity, but more importantly the voices of people living with HIV.

But the year under review has not been without challenges. Due to funding pressures some of our services have needed to be reduced or have ceased completely and this has created some pressure around the quality and sustainability of some of our services. As a result we are currently in the process of undertaking a systematic internal audit review of all of our services to ensure that they are fit for the future.

A high-profile employment tribunal case also resulted in some negative publicity for the Trust and as a result the Board commissioned a full and independent Governance Review and internal audit. Overall the results of these independent reviews were positive and where appropriate remedial actions are being undertaken.

Terrence Higgins Trust has had an incredible impact this year, and we hope to sustain this momentum to enable us to play our part in ending HIV transmission and improving the nation's sexual health, empowering people to live well with HIV, and amplifying the voices of people living with and affected by the virus. Keep reading to see our significant progress against those aims in 2016/17.

Ending HIV transmission and improving sexual health

Condoms, innovations in testing and the impact of effective treatment mean we have the tools necessary to end the HIV epidemic in the UK. That's why we work hard across England, Scotland and Wales to promote good sexual health and encourage HIV testing.

If you are on effective treatment and have an undetectable viral load, you cannot pass on HIV – that's why testing and diagnosis are so important. However, the number of people living with undiagnosed HIV in the UK remains unacceptably high. Remaining undiagnosed means a person is not benefitting from treatment, risking their health and vastly increasing their chances of passing on HIV. That is why our prevention message is clear: if you're living with HIV, you need to know about it.

Altogether 101,200 people were estimated to be living with HIV at the end of 2015. Gay and bisexual men see the highest prevalence rates, followed by black African women. We want to play our part in driving down new HIV transmissions and the number of people who are unaware they have HIV, and target our work accordingly.

In total 417,584 new sexually transmitted infections (STIs) were diagnosed in 2016 in England. The highest rates of new diagnoses were in young people, black and ethnic minority communities and gay and bisexual men. We play a key role in tackling these numbers by testing in a wide range of different settings. This year we screened over 38,000 people for chlamydia, which often has no symptoms.

We provide HIV testing in a range of community settings across the UK, as well as screening for other STIs including hepatitis, chlamydia, gonorrhoea and syphilis. We also work hard to bust myths around HIV among the general public as these are known barriers to people getting tested and on to treatment.

It Starts With Me and National HIV Testing Week

Funded by Public Health England (PHE), *It Starts With Me* aims to cut new HIV infections through condom promotion and the reduction of undiagnosed HIV infection through increased testing. It is a strongly targeted campaign aimed at those most affected by HIV in the UK: gay and bisexual men and black African communities.

We relaunched *It Starts With Me* with a brand new look in September 2016. Adverts across press, social media, high profile billboards and public transport featured the bold message 'I'm not afraid of HIV', featuring real people telling their personal stories of how they are protecting themselves against HIV.

In 2016/17, over 130,000 people visited the *It Starts With Me* website and over 50,000 people used our online tools, including the condom tool which helps you work out the best condom for you. Additionally, nearly 5,000 people ordered one of our size and sensitivity condom trial packs.

We promote HIV testing all 52 weeks of the year, but never more so than during *National HIV Testing Week*. Created by Terrence Higgins Trust in 2012, over the last four years the week has gone from strength to strength and is established as a key component of the *It Starts With Me* campaign. November 2016's campaign was certainly a success – an incredible 83% of gay men and 89% of black Africans recall seeing an advert or message about *National HIV Testing Week* – meaning the campaign was highly successful in promoting HIV testing to its target groups.

The success of *National HIV Testing Week* results from working in collaboration with our local partners who order our resources and organise local testing events. As a result, 20,000 people over the course of the week were engaged in HIV testing across England. Meanwhile, in Scotland and Wales, we utilised *European HIV and Hepatitis Testing Week* to promote testing in parallel to the activities funded in England by PHE.

We also shouted about the importance of HIV testing in the media, with coverage including a series of six articles on the *Metro's* website, as well as *Huffington Post*, *The Sun*, *ITV News* and *BBC Radio 1's Newsbeat*. We also engaged MPs and Welsh Assembly Members around testing with Peter Kyle MP, Simon Kirby MP, Jonathan Lord MP, Ben Gummer MP and Julie James AM having a simple finger-prick test at local centres during the week.



National HIV Testing Week 2016 achievements:

- 20,000 HIV postal testing kits were distributed
- 64,000 people followed the campaign via social media
- 342 pieces of media coverage were generated about *National HIV Testing Week* and *It Starts With Me*.

Self testing pilot

In order to tackle new HIV transmissions, we need to increase the number of tests being carried out in the UK. We are committed to breaking down barriers to HIV testing and making it easier and more convenient to test. Following the legalisation of self testing in 2014, we utilised this new innovation at the earliest opportunity to get even more people testing for HIV.

Our first self testing pilot took place – where people ordered a free test online and got an instant result in their own home, no matter where in the UK they lived. Prince Harry tested for HIV live on Facebook during the pilot in May, which we publicly heralded as a 'groundbreaking moment' in the fight against HIV. This resulted in national media coverage and a fourfold increase in orders. Tests were advertised via apps, social media and our website, and over 4,900 were distributed with 24 people diagnosed with HIV and signposted into care.

The results of the self testing pilot show that we were reaching the right people with digital advertising and targeted press coverage:

- 19% had never had an HIV test before
- 37% had tested more than one year ago
- 81% reported two or more partners in the last year
- 68% reported anal sex without a condom in the previous three months.

Our website

Our website is a key way to provide high quality health information which enables people to look after their sexual health. Similarly, our Service Finder makes it easy to find out where to test for HIV and STIs locally. We had 2.2 million visits and 4.4 million page views across our websites, including 1.9 million to our main site. Friday/Monday, our website for gay and bisexual men around sex and drugs, averaged 13,000 visits per month.

Getting in the community

Making HIV and STI testing easy and accessible is a key part of what we do. That is why we have been out and about in community settings including pubs, clubs and estates. For example, our team in Suffolk screened 7,397 young people for chlamydia with 400 positive results, giving a positivity rate of 5.4%. This compares with an average detection rate in England of 1.9%, demonstrating the effectiveness of our approach. The team also trains professionals, including social workers, support workers and nurses to offer chlamydia screens as part of their work with young people.

In Buckinghamshire, the team tested every other week at a local RAF base, as well as cultivating effective relationships with local GPs, termination of pregnancy services, pharmacies, gyms and youth clubs. The team has also utilised key dates in the calendar to get young people talking about their sexual health, including *International Women's Day* and *Sexual Health Week*. Meanwhile, in Wales, we engaged with over 4,200 people around sexual health as part of our health improvement work.

Getting creative

We encourage innovation across Terrence Higgins Trust. This year our team in Suffolk utilised the popularity of smartphone app Pokemon Go to get young people testing for STIs during *Sexual Health Week*.

Dressed as Pokemon favourites Pikachu, Charmander and Charizard, the team provided information, advice, free condoms and lube, and chlamydia testing at 'lure sites'. These are locations where those playing on the app congregate to catch Pokemon.

While the Pokemon app encourages you to catch as many Pokemon as possible – we were encouraging young people not to catch STIs and look after their sexual health. The initiative was a big success and also garnered local media coverage and got people talking on social media, which helped to amplify our safer sex messages.

Condoms

Condoms remain the most effective way to prevent HIV and other STIs. That's why condom provision is a key part of our work. For example, in Norfolk alone, we gave out over 200,000 condom and lube packs through teaming up with over 500 local venues to take part in our C-Card scheme. These cards mean that young people can access condoms at a range of places including community centres, gyms and pharmacies.

Empowering people to live well

HIV can affect everything from people's employment and financial stability, through to their mental health and relationships. That is why we provide a range of services across the UK to empower people to truly live well with HIV.

From diagnosis onwards, we are here to support people living with HIV across the UK with our local and national services, including both face-to-face and digital options. The HIV community is a diverse one and our services reflect that diversity with a telephone support group for people living with HIV in rural locations in Scotland, through to our Work Positive programme, which supports people living with HIV who are unemployed back into the workplace.

This year we published *Uncharted Territory*, a report into the first generation growing older with HIV, to identify the needs of this expanding cohort of people. It is a diverse group with similarly diverse needs – some were diagnosed in the early days of the epidemic before effective treatment was available and have multiple health conditions. Others were diagnosed in their 50, 60s or older, and are struggling with the social and emotional impact of HIV.

We now have the prevention tools to end new HIV transmissions, but we cannot forget about people who are living with HIV. We need to ensure that we are responding to need and that our services – both digital and face-to-face – are fit for purpose. We want to continue to empower people living with HIV and be there to provide support if and when it is needed.

THT Direct

Our free, confidential service is there to provide support, information and signposting to local sexual health services over the phone or via email – wherever you are in the UK. In our last caller survey, 98% rated the advice or support they received as good or excellent.

The total number of enquiries for the year was 19,684 which is an increase of 12% on the previous year. Key subjects remain around risk of HIV transmission, testing and accessing services. There was also an 84% increase in questions on PrEP and a 136% increase in general questions on HIV treatment. The number of questions on general sexual health, rather than HIV, doubled.

myHIV

Another flagship national service for people living with HIV is myHIV. It continues to be the biggest online community of people living with HIV in the UK, as well as supporting people who are further afield. It provides tools for health management, as well as online counselling and advice.

In the past year myHIV has attracted more than 1,120 new users, supported 128 clients through online counselling, and provided 639 hours of support thanks to the dedication of our online peer support volunteers. This year we also updated the forums to offer a better experience for smartphone browsing.

People living with HIV providing support for others living with HIV is highly effective and key to the ongoing success of myHIV. We found:

- **76% agree peer support increases their confidence to self-manage their HIV.**
 - **83% agree peer support increases their knowledge of their own HIV treatment and care.**
 - **83% agreed peer support increases their confidence in talking about the condition with other people living with HIV.**
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Health, Wealth & Happiness

Based on research into the needs of older people living with HIV, this project provides holistic support for people aged 50 and over living with the virus. Working with many volunteers and partner projects, we support and empower older people living with HIV in terms of their finances, emotional wellbeing and physical health. This includes group sessions to address issues faced by this group, including computer and social media training, mindfulness and sessions on budgeting. Our advice workers also provide support around housing, benefits, discrimination and legal issues.

This year, the project saw 562 service users – compared to 395 last year – across Brighton, Bristol, London, Manchester and the West Midlands. Additionally, 237 clients accessed advice services, 42 accessed counselling and 264 attended workshops.

Work Positive

Work Positive, now in its sixth year, transforms the lives of those who enrol. Around one in four people living with HIV in the UK are out of work for a wide variety of reasons. The programme supports participants back to the workplace through mentoring, training and work placements – both at Terrence Higgins Trust and in other supportive environments.

One participant, who has now successfully moved into a full-time paid job, said the peer support the programme provided was invaluable. He told us: 'Sharing experiences was such a relief – hearing that people like me were in similar places made me realise that it wasn't me – I hadn't done something wrong to end up at this place in my life.'

In total 100% of this year's participants reported an improved CV against a target of 90%, while 96% reported an increased confidence in their skills, against a target of 80%.

We work in partnership with ViiV Healthcare to provide four 12-month paid work placements for graduates from Work Positive each year. So far eight graduates have worked at ViiV Healthcare, with five now in permanent employment with parent company GSK. We are grateful to the Big Lottery Fund for their support for this project and are pleased that next year's programme is funded by Barclays Spectrum, the bank's lesbian, gay, bisexual and trans (LGBT) network, which chose to support the programme at its 2016 dinner – and will do so again this year.

Hardship Fund

Our Hardship Fund, established in 1989 by Crusaid, supports people living with HIV and their families who are living in poverty across the UK. During 2016/17 the Fund made awards to 605 people and is a crucial lifeline for those struggling to fund their own basic needs. Most applicants report that funds are needed for food, clothing and travel costs and 100% report that the award made a positive impact on their health and wellbeing. We work with a range of partners to ensure the Fund is promoted across the country and have recently trained THT Direct staff to support people to make applications, increasing access further. Applicants are also directed towards other support services including back to work programmes, counselling, financial management guidance, peer support groups – including myHIV, food banks and advice around immigration and housing.

Confident Families

This project empowers people to live well with HIV in Scotland – and offers support to family and friends too. It provides both practical and emotional support, including advice on welfare rights, housing and benefits, as well as information around adherence to HIV treatment and stigma.

In 2016/17, the project supported 284 clients and held 89 peer support groupwork sessions.

Partnership working

We have increased our work with partners across the charity to make sure that we are having as great an impact as possible on beneficiaries. For example we organised a day trip, in conjunction with Lunch Positive and Positive Walks, to Arlington Reservoir in Sussex for people living with HIV in Brighton and Hove. Trips like this help to reduce isolation and loneliness, as well as providing an opportunity to build strong, independent support networks. The Living Positively project, which offers peer support for people living with HIV in West Sussex, has secured funding from our own Lighthouse Fund, which preserves the legacy of the London Lighthouse following its sale in 2015.

Amplifying the voices of people living with HIV

We work hard to put people living with and affected by HIV and poor sexual health at the heart of everything we do. Ensuring these voices are heard is a vital component of our work to ensure the services we deliver are the right ones, the matters we campaign on are those that people want changed and that we maximise the impact Terrence Higgins Trust has when challenging stigma, busting myths and changing attitudes.

Whether a young person is talking to parliamentarians about the importance of good quality, inclusive SRE, or a service user shares their experiences of growing older with HIV in the media, there is nothing more powerful than a real story. This year we have continued to work hard to keep HIV and sexual health on public and political agendas.

Similarly, we have looked for opportunities to amplify the voices of people living with HIV within the charity. In 2016/17, this included:

- **Collecting robust client feedback to inform and shape the development of future services.**
- **Training 12 people living with HIV to co-produce our HIV and ageing research.**
- **Having service user representation on some of our interview panels.**
- **Meeting with other organisations to look at how we can better 'involve' people living with HIV and those at risk of poor sexual health, including co-producing campaigns, research and services.**

People living with HIV have skills and strengths on which to build – they are not passive recipients of services.

Positive Voices

Over 11,000 people – primarily young people – heard from our Positive Voices speakers about what it is like to live with HIV. The project works across three sites in Brighton, Glasgow and London and benefits both those listening (by providing them with accurate information) and the speakers (who are provided with an opportunity to reflect on their own story and how they feel about their status). Every single one of our 22 speakers received peer support and reported feeling more confident in addressing discrimination in everyday situations.

Feedback has shown that this project has a huge impact on HIV stigma and helps to educate people about HIV and broader sexual health. Positive Voices has delivered over 270 talks in schools, at faith groups and to community organisations. We look forward to reaching even more people over the next year.

Press and social media

The volume of press coverage for Terrence Higgins Trust has been incredible over the past year. We secured 3,649 articles, which resulted in over 632 million opportunities for people to see our key messages. Altogether 237 of these included a real life case study, helping us increase visibility and amplify the voices of people living with HIV. That included working with 17 year old Aleph Ross on an open letter to Secretary of State for Education, Justine Greening, on the importance of SRE, which was featured on the front page of *i* newspaper ahead of the decision to make SRE compulsory in all schools in England.

This year the PARTNER study concluded that people living with HIV who are on effective treatment and have an undetectable viral load cannot pass on the virus. We know that people living with HIV want us to shout this from the rooftops – as it is a great way of tackling stigma. This message was featured in nearly 100 pieces of our media coverage and reached over 15 million people. We will continue to build upon this over the next 12 months with the launch of our *Can't Pass It On* campaign to get the general public's HIV knowledge up to date.

Our Facebook page grew by over 5,000 'Likes' and our Twitter following increased from 18,000 to over 22,000, with the real stories of people living with HIV central to our social media strategy. We also started to share key achievements and our favourite photos on Instagram.

Our membership

Trust Life, our monthly newsletter to stay in touch with our membership, was read over 46,000 times. The most popular topics were the election of our new Trustees, service user Thomas Lange's petition to stop HIV cuts in south London and our HIV and ageing report.

World AIDS Day

Our theme for World AIDS Day was *It's Not Over* – we have come a long way in the fight against HIV, but there is still more to do to challenge stigma. We conducted a survey into public attitudes towards HIV and, on the back of this, secured three times as many articles than in 2015. Additionally, over a third of coverage included someone living with HIV.

Once again we held a reception in Parliament to mark this significant day of remembrance. This year 36 parliamentarians, as well as key influencers and journalists, heard from Lizzie Jordan, who became a mother, widow and was diagnosed with HIV within the space of 18 months. Lizzie joined us in reinforcing the continued need for HIV and sexual health services in the UK. The Rt Hon. The Lord Fowler and Public Health Minister Nicola Blackwood MP also spoke.

HIV and ageing

People aged 50 and over are the fastest growing group of people living with HIV. This year we launched our report *Uncharted Territory* looking at the physical and emotional needs of this cohort. We utilised a peer-led research design model, meaning both researchers and participants were aged 50 or over and living with HIV. This model of research was central to the project's success.

We found that 58% of survey respondents were defined as living on or below the poverty line, while 84% were concerned about future financial difficulties. We published *Uncharted Territory* – a report into the first generation growing older with HIV in January 2017 and used it as an evidence base for championing the diverse needs of this pioneering group at a local and national level.

HIV cuts

Service user Thomas Lange was at the centre of campaigning to stop cuts to specialised HIV services in Lambeth, Lewisham and Southwark – boroughs which have the highest prevalence of HIV in the UK. Thomas launched a change.org petition, which we extensively promoted in the press and on social media, and was signed by hundreds of supporters – including service users. Unfortunately, despite the campaign, the decision was made to end all specialist support in the boroughs.

HIV remains a highly stigmatised condition and that is why we continue to champion the need for specialised services. We established the *Stop HIV Cuts Campaign* alongside charities NAT and Metro to galvanise local and national focus and action on cuts to support services.

Sex and relationships education

We had a huge win when, after 32 years of Terrence Higgins Trust campaigning for SRE to be compulsory in all schools, the UK Government announced that this would become a reality in England on 1 March 2017.

Ahead of the decision, we launched our SRE report *Shh... No Talking*, which included the views of 914 young people to amplify their voices. The report launch was featured nationally in *The Guardian*, *i* newspaper, *Daily Mail*, *The Sun*, *Metro*, *ITV News* and *Good Morning Britain*.

We also held a speed teaching drop-in session in Parliament where young people spoke to 30 parliamentarians about the importance of SRE to them. Altogether 32 young people were quoted in the report and it was mentioned 25 times in Parliament, including by Secretary of State for Education, Justine Greening MP, who we met in February. We continue to campaign to ensure compulsory SRE meaningfully includes LGBT sex and relationships, HIV and STIs, and is properly funded

Campaigning for PrEP

We firmly believe that Pre-exposure prophylaxis (PrEP) – where HIV negative people at risk take HIV medication to prevent transmission – is a game changer for HIV prevention. Progress was made on PrEP in England with a major trial announced thanks to our work as part of the United4PrEP coalition, meaning 10,000 people at risk of HIV will have access to the drug.

This announcement follows years of hard campaigning by Terrence Higgins Trust and other HIV charities. In 2016/17, we utilised Pride events across the country to call for the availability of PrEP on the NHS, and joined with other members of the United4PrEP coalition at Pride in London to galvanise the LGBT community in support of PrEP. We also led work bringing together MPs and peers of all parties to ensure pressure was kept on NHS England and the Government to make PrEP on the NHS a reality in England.

In Scotland we represented the third sector on the HIV Pre-Exposure Prophylaxis Short Life Working Group on behalf of the Sexual Health and Blood Borne Virus Executive Leads. We also worked with the PrEP4Scotland coalition to make the case for PrEP to the Scottish Medicines Consortium and were delighted to achieve a positive outcome for the provision of PrEP to people living in Scotland.

In Wales we were a member of an independent expert group which advised on the use of PrEP within Wales. We will continue to work to ensure that the PrEP trial in England is implemented properly and that it finds a long-term home on the NHS and that PrEP is available to all at risk of HIV in Wales and Scotland.

We asked young people about their SRE and found:

- 99% thought it should be compulsory
 - 97% said it should be LGBT-inclusive
 - 95% weren't taught about LGBT sex and relationships
 - one in seven did not have any SRE
 - half rated their SRE as 'poor' or 'terrible'.
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We asked the public about HIV and the findings were worrying:

- one in five thinks you can pass on HIV through kissing. You can't.
 - 30% believe HIV can be transmitted through a toothbrush. It can't.
 - only 58% believe people living with HIV can live to old age. People living with HIV who start treatment as advised can expect to live as long as if they didn't have HIV.
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Parliamentary engagement:

- 22 parliamentary champions
 - 120 parliamentarians engaged
 - 85 meetings with 65 parliamentarians
 - six events in Parliament and the Welsh Assembly
 - 37 mentions of Terrence Higgins Trust in Westminster.
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Our plans for the future

This is an exciting time for us as an organisation to look forward – using the changing landscape, with all of its challenges, to bring a fresh focus to our work and make a greater impact for beneficiaries and achieve our bold ambition.

The changing landscape

We will continue to build on the past year, which has seen some great successes, delivering a varied programme of services and activities that have changed the lives of many beneficiaries. It has been a year where we have gained greater understanding, as an organisation, on how we can use new medical advances to prevent HIV transmission through our testing and outreach programmes, and support the demand for PrEP.

The challenges, however, are significant. The reduced public sector funding, that our services rely on, is really starting to impact on our beneficiaries and staff across the UK and looks like a trend that is set to continue.

So why are we excited?

We have been working hard to think about how we can use the changing landscape to do even more than we are currently doing and be more innovative and ambitious in our approach.

We know that public sector funding often determines where we work and what we deliver. With increased evidence and growing technology we know that there are different ways that we can reach people who need our support. We also have amazing support from individual donors, trusts and corporate organisations who are enabling us to be more flexible in the work that we deliver. We think that with their support we can be more independent and more radical in what we do.

What do we want to do?

We want to increase and find new ways for beneficiaries to access the support that they need.

We are developing our digital presence to enable us to offer more services, information and support online so beneficiaries can access and offer support, whenever and wherever they are. We will be launching our new website, with enhanced digital services in 2018.

We want to target more of our work to reach those at risk of HIV and poor sexual health so that they can be tested and access treatment. To do this we need to challenge stigma more effectively, working with more of our partners, businesses and professionals across the UK to normalise testing. In the coming year, the charity will be rolling out another self testing pilot on a larger scale than it has ever done before.

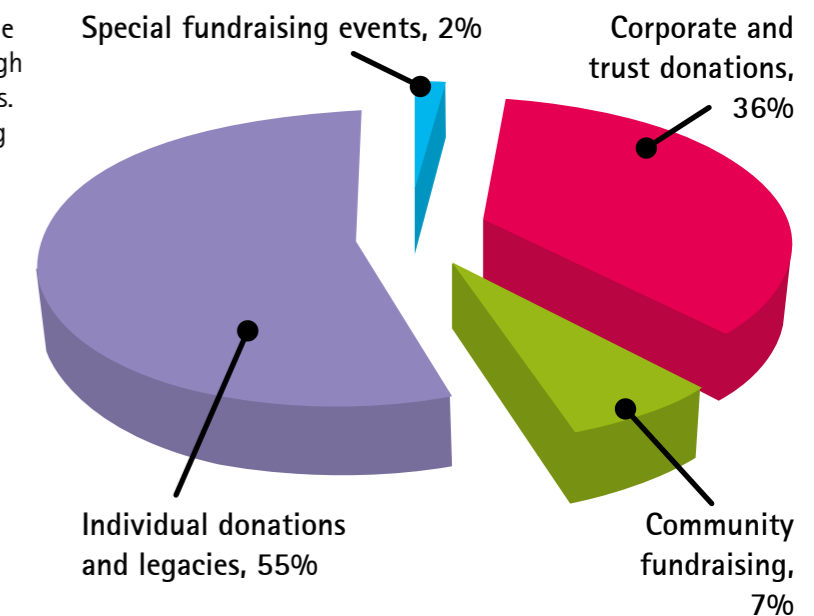
We want those who have been diagnosed with HIV to live well – by bringing greater collaboration and innovation we can encourage those newly diagnosed to move on with their lives. For the increasing ageing with HIV population, we want to continue to support those struggling with poverty, mental health problems and accessing social care.

Today, more than ever, with such competing demands, it is essential that we amplify the voices of, and help, those living with HIV. With your continued support, and with our staff, partners and beneficiaries, we can do this.

Fundraising and sustainability

We are hugely thankful to all of our fantastic supporters who helped us raise £5.6 million during 2016-17. Some of our supporters leave us a gift in their will, some give generously at our unforgettable events and others give their time and energy through volunteering, marathon running or challenge events. Our supporters ensure we are here for anyone living with HIV who needs us and that we are at the forefront of driving down new HIV transmissions. We are extremely grateful for all of your support.

How we raised our money



Individual giving and legacies

- Support from the general public, many of whom are long-term supporters, raised a phenomenal £1.4 million providing vital ongoing support for our HIV and sexual health services.
- Over the last year we received £1.3 million from people who remembered us in their will. This includes further donations to the Mark Ashton Red Ribbon Fund from Lesbians and Gays Support the Miners, which takes the Fund's total to £38,265. Mark, whose story was told in the hit film *Pride*, was honoured with a blue plaque outside Gay's The Word bookshop in London and our Chief Executive Ian Green was there for the unveiling.

Special events and Terrence Higgins Trust's Friends Network

Our special events programme this year included a very successful Supper Club thanks to the support of some of London's very best restaurants and our generous diners. We were also very proud to work with Barclays Spectrum (the bank's LGBT network) on its Gala Dinner at The Savoy Hotel, which this year benefitted Terrence Higgins Trust. We look forward to partnering with Barclays again next year.

The Friends Network is headed by our long-term supporter Stephen Fry. We are so grateful to this amazing group of people for their commitment to our work. This year's Friends Dinner was held at Banqueting House in London and Melanie Chisholm entertained our guests in some style. This year we also staged a number of Friends Talks which allowed us to update members on key policies and campaigns such as HIV and ageing and SRE.

Companies and charitable trusts

Over the last year we have received excellent support from a range of companies across the corporate sector. The MAC AIDS Fund has donated £100,000 to support our Positive Voices projects in Brighton and Glasgow, allowing us to make a significant impact on those communities. Anglo American have worked with us for the past eight years and recently funded our Faith and Communities Project, enabling us to engage some of our harder to reach communities. American Express funds our volunteer programme ensuring that the experience of volunteering for Terrence Higgins Trust is a fulfilling one.

We are also delighted to be working with Barclays Spectrum, which has raised significant funds through its Gala Dinner and World AIDS Day. Their commitment and the involvement of their staff has been both inspiring and invaluable – and like all our supporters we cannot thank them enough.

The Big Lottery Fund England has generously supported a number of our vital programmes, including our Health, Wealth and Happiness project – an innovative three year project funded by the Silver Dreams programme. The project supports the financial, emotional and physical wellbeing of over 50s living with HIV in Brighton, Bristol, London, Manchester and the West Midlands. The project has worked with over 820 people so far, helping over 400 people to feel part of a peer network and over 500 people to feel less anxious and have increased confidence in growing older with HIV.

UK-wide fundraising and challenge events

This year hundreds of people participated in a wide range of fundraising activities including active challenge events such as running, cycling and trekking where we saw individuals and groups raising thousands of pounds through individual sponsorship. We have seen an increase in the number of people taking on DIY fundraising activities including celebrity tribute nights, cocktails parties and 'bake offs' as well as hundreds of new supporters signing up to take part in our Pancake Day inspired fundraising event.

We had our most successful World AIDS Day in terms of fundraising in 2016. Individuals, companies, universities, schools and community groups all over the country got involved – from sponsored head shaves and flash mobs to red ribbon disco nights – to raise money for our flagship campaign. A massive thank you to everyone for their support.

Our approach to fundraising

The charity is committed to providing the best possible standards for all our supporters. Our fundraising activities are carried out respectfully and Terrence Higgins Trust is a member of the Fundraising Regulator and the Institute of Fundraising, working within their agreed guidelines. In January 2016 we evaluated and redressed how to collect and record consent for supporters. This was in order to improve fundraising communications and make our processes transparent.

Our supporter promise ensures we regularly ask supporters how they wish to be contacted, for example by email, letter or phone. 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.

We use third party suppliers to undertake telephone fundraising and payroll giving fundraising for us. All of these suppliers are subject to agreeing to our own Third Party Terms. Our telephone fundraising agency and payroll giving agency also supply a vulnerable person's 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 prior to 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 person's policy, in order for us to listen to the call and make a decision as to what further action should be taken. Any complaints are also given to us, along with the call recording. All call data is run through the Telephone Preference Service to ensure we have the correct permissions to call our supporters.

We also promise never to pressure anyone into giving a gift and respect a donor's decision if they decide to stop giving. We ensure all work carried out with third party fundraising organisations adheres to legal requirements and best practice guidelines.

Financial review

Introduction

During 2016/17 we launched our new five-year strategic plan. It embodies our ambition to deliver high-quality services which are both based on traditional delivery models as well as being innovative.

This strategy is being delivered in the context of the continuing economic and financial uncertainty of the sector. In the past three years Terrence Higgins Trust has experienced statutory funding cuts of over 21%. While this has been challenging, as an organisation we have worked hard to take control of the change. Our long-term financial sustainability is being achieved through careful planning and our ability to respond quickly to funding cuts through changes to ways of working and delivery models. The challenges presented by the funding environment will continue and we feel well placed to be able to respond.

The following section of the Trustees' Report summarises and explains the financial information presented in the Financial Statements from Page 38.

The overall picture

Although we were within our budget envelope of a deficit of £500,000 the year has not been without its challenges. There is still very little stability within the statutory funding environment and we have to react continually to contract cuts and uncertain budget pipelines. We are now seeing a knock-on impact to the voluntary funding market, where increased competition for funds has increased the risk in a previously relatively secure market. This deficit position has been achieved through careful budget management and operational changes across the organisation.

We have seen a year-on-year reduction in income and, therefore, a decrease in the activities we can carry out and subsequent expenditure. From 2015/16 to this year, we have seen a 13% drop in both statutory and voluntary income. In 2017/18 we are expecting a further 21% decrease in statutory income. While we are planning to relieve the impact of this through an increase in voluntary funding,

we will still see a fall in operational expenditure in 2017/18 of £1.3 million to £15.3 million.

As set out in the overall report we have achieved significant impacts on beneficiaries, the wider HIV and sexual health community and the position of HIV in policy and political frameworks. However, this is in tandem with shifts in operational practise as a result of funding cuts. As detailed in Note 12 to the accounts we have seen a notable reduction in staff numbers, the average number of full-time positions (whole-time equivalents) have decreased from 295 to 258 in the past year. We have also seen the closure of several offices and, therefore, the reduction of our presence in key areas across the country. One example is our office in Bristol which was operational for over 30 years but was closed at the end of the year due to funding constraints.

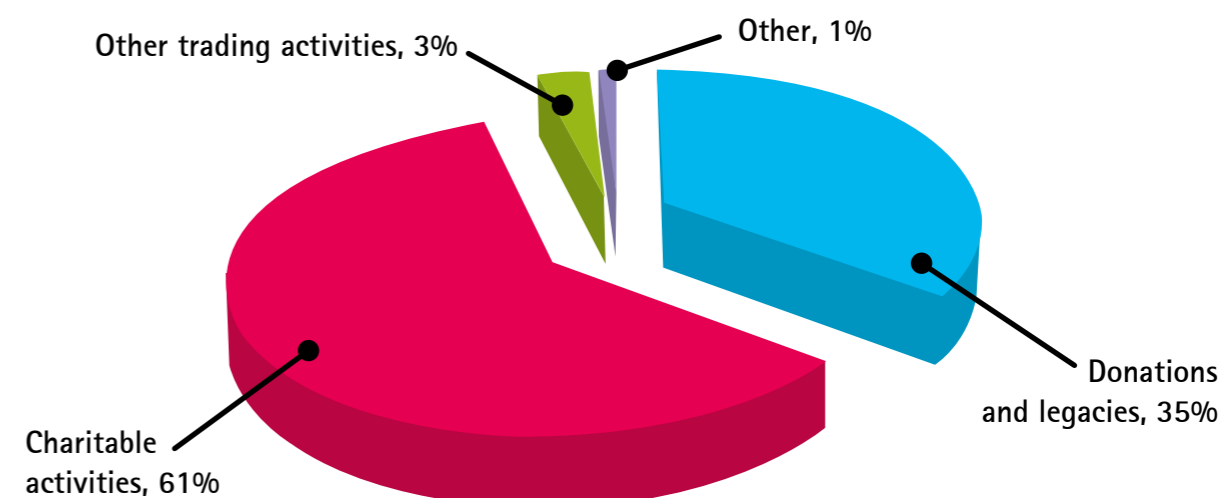
The net movement of funds for the year is a reduction of £1.6 million. This is due to the positive impact of revaluing our property at Lower Marsh in London and the revaluation of our pension deficit – both of which have been recognised in line with the requirements of Financial Reporting Standard 102 (FRS102).

Services funded to operate from Lower Marsh were decommissioned. We made the decision to create a new income stream from the building through renting it on the commercial market which will support other services. As a result, the building has been revalued from £600,000 to £1.5 million as it is now treated as an investment asset rather than an operational property. The pension scheme was revalued from a deficit of £1 million to £3.1 million in 2016/17. Therefore, an impact of £2.1 million can be seen on our overall financial position.

Our focus for 2017/18 is to review the business and operational model of the organisation. This is to ensure we take control of the impact of changes in the funding environment and take advantage of all new opportunities available to us. We see this as an exciting time to develop a sustainable organisation which is both ambitious and innovative – but grounding this within the current funding climate is essential for 2017/18.

Where our money comes from

The total income for 2016/17 was £15.6 million. Terrence Higgins Trust receives funding from a variety of sources which we categorise into the areas detailed below:



Donations and legacies

This year donations and legacies contributed £5.4 million to the overall income position. This is a fall of £0.4m from the previous year. We saw an increase in legacies this year but all other areas of donations declined. However, as an overall proportion of our total income there has been an increase of 2%, from 33% (2015/16) to 35% (2016/17).

Of the £5.4 million, 66% (£3.6 million) was unrestricted while 34% (£1.9 million) was restricted.

In total, £1.4 million of restricted funding was provided by the Big Lottery Fund, in 2015/16 this was £1.5 million. We are very grateful to the Big Lottery Fund for this level of financing as it has ensured the continuation of 17 streams of work across the country. The breadth of work has included our national Work Positive programme, our Midlands-based project Champions of Change, our Community Liaison and Participation project focused on Wales, and the Confident Families programme in Scotland. Further details of the grants provided in Note 21 to the accounts.

The level of unrestricted funds raised is essential to the organisation as it supports our sustainability and scope to shape our own programmes. These funds currently support our Hardship Fund, THT Direct and myHIV – all of which provide national access to vital services irrespective of local commissioning. We have seen a small decrease of £200,000 from the previous year for individual donations. However, we have seen a marked increase of £400,000 (50%) in legacies.

The current pipeline of £3.6 million indicates that this is trend that will continue for the next two financial years. The full details of the areas within this category are within Note 3 of the accounts.

Statutory income from Local Government and health organisations to support charitable activities

The income from this area supports programmes at both a local and national level. Statutory income for this year totalled £9.5 million, this is a fall in income from £10.9 million (13%) reported at the end of March 2016. This fall in income was expected and very much in line with our budgeted position.

Overall income to support our strategic aim of ending HIV transmission and improving sexual health has seen a drop in income of £900,000. In 2016/17 income was £7.9 million (during 2015/16 income was £8.7 million). This is a 10% reduction. We have seen a disproportionate drop of 27% in income for empowering people to live well with HIV on the previous year. This is primarily due to the withdrawal of funding from targeted and specialist HIV provision. Advice services for people living with HIV have seen budget cuts from central Government, however, this is in line with the changing needs of people with HIV. Lewisham, Lambeth and Southwark have led the way in reducing services and funding and encouraging providers to access mainstream services.

Other trading activities

Income from other trading activities is generated from fundraising events, sponsorship, rent, room hire and catering as detailed in Note 4 to the accounts. Total income for the year was £400,000. This is a 53% reduction on income in this area from the previous financial year. The main reason for this was the change of date for our key fundraising event, The Auction 2017, which was due to take place at the end of March 2017 but was moved to April 2017 due to availability of the venue. We would expect this area to increase in income in 2017/18 as we recognise the income from The Auction 2017, held in April.

Other income

Income in this area is primarily from training courses, counselling, student placements and investment income after our first full year of returns. The income in this area is £200,000 which is an increase of £100,000 from 2015/16. This is primarily due to an increase in the investment income after our first full year of returns.

Our reserves

Our reserve position on 31 March 2017 was £10 million. This is a marked change from 2015/16 when we closed the year with a position of £11.6 million. The shift of £1.6 million is primarily due to the revaluation of our pension scheme deficit. Overall our restricted reserves are broadly in line across the two years at £400,000. There has been an increase in our general funds from £12.3 million (2015/16) to £12.7 million (2016/17). However, this is offset by an increase in our pension liability of £2.1 million. FRS102 dictates how pension scheme assets and liabilities are calculated and disclosed 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 FRS102 is now at a value of £3.1 million, (£1 million in 2015/16).

In the current economic and funding environment, where continued cuts to statutory funding and increased competition for voluntary funding is having a sector-wide impact, it is essential that we maintain a strong reserve position. This is to support both the sustainability and the ongoing development of the organisation. In light of ongoing and consistent cuts to funding, which are continuing into 2017/18, the Trustees have reviewed the current reserve policy. The Trustees have agreed a change in reserve policy for 2016/17 so that the level of free reserves held should be between the equivalent of three months and six months of expenditure. Our budgeted expenditure for 2017/18 is £15.3 million. Within the framework of the reserve policy this would indicate a required reserve level of between £3.8 million and £7.7 million. The free reserve position on 31 March 2017 was £4.9 million, therefore we are within our agreed policy.

How we spend our money

The total expenditure for 2016/17 was £16.6 million. As detailed in the overall narrative of this report we have managed to achieve a breadth of service delivery which is based in traditional delivery models but also in bringing forward innovative and ambitious ways of working.

Altogether, £14.6 million (88%) of this was spent directly on our charitable activities, while £2 million (12%) was spent on generating income. We spent £9.7 million on ending HIV transmission and improving sexual health (the 2015/16 expenditure was £10.3 million). One highlight of this was the success of National HIV Testing Week. In total £4.6 million was focused on empowering people to live well with HIV, (the 2015/16 expenditure was £5.5 million), key programmes delivered include Work Positive, Health, Wealth and Happiness, THT Direct and myHIV. The overall fall in expenditure in our key strategic areas mirrors the fall in income.

We have managed to maintain expenditure at £400,000 in our key campaigning and lobbying work to fulfil our strategic aim of amplifying the voices of people living with HIV. As there is minimal scope for securing statutory funds for this work we ensure this is prioritised for our voluntary income. As the detailed narrative earlier in this report demonstrates, this minimal investment has a wide reaching and profound impact.

Support costs in 2016/17 were £2.1 million, which is a decrease of £400,000 from 2015/16. This represents 13% of total expenditure. This is a 1% decrease from last year and an overall 19% reduction in expenditure and it clearly demonstrates the moves we have made to streamline services and provide greater value for money for our stakeholders. These costs, which are made up of head office costs, IT, facilities, HR and Finance, have been allocated across all areas on the basis of staff whole-time equivalents. This is detailed fully in Note 10 to the accounts.

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. It has taken into account this impact on income and expenditure. Our planning is also taking into account key areas to invest in to ensure sustainability, for example our digital streams and increasing return on investment for voluntary income. It is also important to note that we plan to sell our head office building at 314–320 Gray's Inn Road and move to a smaller, more appropriate office and release equity that is held in the building. Therefore, ensuring our current assessment as a going concern is based upon prudent estimates.

The Trustees acknowledge our pension fund obligations and have a plan in place to eliminate the deficit over 13 years. The liability, as calculated according to FRS102 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 that 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. In June 2016 this was transferred from being managed by Schroder Unit Trust Limited to Rathbone Investment Management Limited alongside the main investment portfolio. The transfer was instigated by the closure of the capital fund by Schroder Unit Trust Limited. In 2016/17, the invested endowment made a realised return of £5,000 with an overall increase in value of £25,000. This is an 11% increase in value over 12 months.

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 2016/17,

this fund made a realised return of £86,000 with an overall increase in value of £554,000. This is a 16% increase in value over the past 12 months.

The target return outlined in our Investment Policy is Consumer Price Index (CPI) plus 4% after expenses. The CPI rose to 2.3% in March 2017. The return on both investment funds outperforms this target quite markedly and this has been key to supporting our financial position in 2016/17. As an organisation we understand this is an unprecedented level of return and have budgeted in 2017/18 for a return in line with the investment target.

The Trustees have reviewed the investment policy in 2016/17 and agreed it is still appropriate. The key points of the Policy are set out below:

Overview and objectives of the investment

Terrence Higgins Trust has around £5.5m in investments. The investments are both short term and long term in nature with £1.5m to be easily accessible and the remaining balance to be drawn down over a period of approximately 30 years.

All other cash balances held by the charity should be instantly accessible.

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 the Finance, Audit and Risk Committee (FARC). Investment decisions, within the confines of this Investment Policy Statement, are delegated by the Board to the Investment Manager.

The key contacts authorised to instruct the investment manager on behalf of the Board are the Executive Director of Finance, 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's 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	40-80
Overseas equities	37	35	
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 = CPI plus 4% after expenses.

Industry benchmark

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

The composite benchmark will comprise:

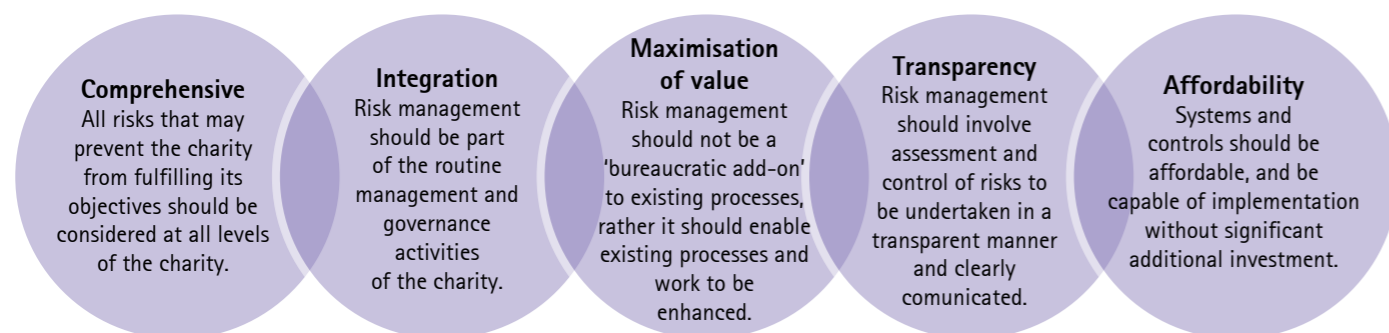
Asset class	Weight (%)	Index
UK equities	35.0	FTSE All-Share
Overseas equities	35.0	FTSE All-World (ex-UK)(£)
Property	5.0	FTSE UK Commercial Prop
Alternatives	5.0	Three-month GBP LIBOR +2%
Fixed income	18.0	FT Brit Govt All Stocks
Cash	2.0	Seven-day LIBOR
Total portfolio	100.0	Composite of the above

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:



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.

Principal risks and uncertainties

Principle Risk	Risk Management (internal controls and actions)
Changes to Government policy and reforms will reduce statutory funding and impact the resources available to achieve the charity's strategy.	<ul style="list-style-type: none"> • Development of a 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.
Incidents may occur which adversely affect service delivery, reputation or security.	<ul style="list-style-type: none"> • 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.
Fundraising may be unable to deliver the required growth in voluntary income and impact on our ability to achieve the charity's objectives.	<ul style="list-style-type: none"> • Development of a fundraising growth plan. • Appropriate investment in fundraising activities to allow the generation of the required returns. • Monitoring of performance against plans.
The charity's activities are not sufficiently focused to deliver the objectives set out in our strategy.	<ul style="list-style-type: none"> • Robust business planning aligned to the strategy. • Executive review of activities and performance against the business plan. • Development of key sub strategies (for example young people, black and minority ethnic (BME) service strategy).
Available resources are not sufficient to be able to complete key service reviews and transformation of business model.	<ul style="list-style-type: none"> • Robust business planning which clearly outlines resource requirements, key milestones and timeframes. • Phased introduction of the transformation to ensure available resource is in place. • Executive review of activities and performance against the business plan.



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. As detailed, the object of the Charity is for the public benefit, the promotion of better HIV, sexual and general health by education of the public, the provision of HIV and sexual health programmes and material, care and support services, clinical services, advice, information and advocacy. 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 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.

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 12 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 AGM and, 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 12 Trustees. Trustees who served during the year are:

Robert Glick (Chair until December 2016) ‡∞
Jonathan McShane (Chair) appointed in December 2016 †‡
Paul Jenkins (Deputy Chair) - retired June 2016 †
Gavin Wills (Deputy Chair from June 2016) †‡
Dr Bilal Ali †‡
Anthony Babajee - retired August 2017
Dr Jake Bayley (elected in December 2016) ∞
Rt Hon. Ben Bradshaw MP
Professor Rob Miller retired July 2016
William Roberts ~
Randeep Sidhu ∞‡
Dr Lisa Thorley ~‡
Dr Laura Waters (elected in December 2016) ~
Dr Samantha Westrop ~‡

‡ Member of the Finance, Audit and Risk Committee.
~ Member of the Quality and Clinical Governance Committee.
∞ Member of the Strategy and Governance Committee.
‡ Member of the Trustee Recruitment Committee.

Biographical information on the current Trustees can be found at: www.tht.org.uk/trustees

Sub-committees

Trustees meet at least four times per year as a Board and also attend two full-day strategy meetings. In addition to this they are supported through the work of four committees:

- Finance, Audit 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.
- Strategy and Governance Committee, which oversees the development of strategy, organisational development and governance.
- Quality and Clinical Governance Committee, which oversees clinical services provided by the organisation.
- Trustee Recruitment Committee, which oversees the recruitment of new Trustees, including identifying which of the applicants who apply 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, Executive Directors and lay members, often specialists, who possess a particular expertise relevant to the work of the committee. Sue Baines, Tim Gutteridge and Peter Orlov served as lay members of the Finance, Audit and Risk Committee, Eileen Means served as a lay member of the Quality and Clinical Governance Committee and Sandra Scheerer served as a lay member of the Strategy and Governance Committee.

During the year the Trustees commissioned an internal audit review by Mazars following concerns relating to a protracted HR investigation that commenced in 2015. The conclusion of this audit was that the actions taken by Trustees were appropriate, although some of the decision-making processes could have been more robust. In addition a two-part Governance Review was commissioned following the outcome of an employment tribunal case, undertaken by Bates, Well and Braithwaite. Overall the review was positive. Areas for improvement were highlighted and a time-focused action plan was approved.

Trustees' responsibilities

The Trustees are responsible for preparing the Strategic Report, the Trustees' Report and the 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.

The Trustees are aware of new Charity Code of Governance and reviewed it in detail as part of our full day strategy meeting in July 2017 shortly after it was published. Since that meeting, the Board have agreed to formally adopt the Code and are actively working to apply it to THT where applicable. As mentioned earlier in this report, a full and independent Governance Review was commissioned during the year that has now been completed. Through this review and our own reflections, we are pleased to say that we already comply with a number of areas that are recommended in the new Code particularly around the principles of integrity, diversity and board effectiveness.

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.

Crowe Clark Whitehill 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 27 September 2017, 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. In 2016/17 a detailed benchmarking/market salary review for all staff was carried out.

The Executive Team that served during the year are:

Ian Green
Chief Executive

Hannah Bodek
Executive Director of Corporate Resources
(Executive Director of Finance until August 2016)

Dr Michael Brady
Medical Director

Dominic Edwardes
Executive Director of Digital and Communications
(Executive Director of Digital and Marketing until August 2016)

Dr Shaun Griffin (up to July 2016)
Executive Director of External Affairs

Freda O'Brien (up to July 2016)
Executive Director of Human Resources and Organisational Development

Rebecca Philips (from July 2017)
Executive Director of Transformation and Operations

Sonya Trivedy (up to 9 December 2016)
Acting Executive Director of Fundraising

Biographical information on the current Executive Team can be found at: www.tht.org.uk/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 2016/17 we were lucky enough to have an average of 311 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 40,363 hours to Terrence Higgins Trust this year, equivalent to almost 25 full-time employees.

Terrence Higgins Trust also relies on the work and commitment of its 280 paid staff, which includes 124 part-time staff. We continue our commitment to equal opportunities and to good staff relations.

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

'To provide equality of opportunity and fair treatment for all; to eliminate discrimination on the grounds of gender, race, marital status, ethnic origin, colour, religion or belief, disability, sexual orientation, age or HIV status and any other unfair grounds. To promote diversity in the workplace and to ensure that all employees are aware that it is their responsibility to work in a non-discriminatory way.'

It is important to us that staff at Terrence Higgins Trust are representative of the beneficiaries we serve. This year 20% of staff are living with HIV.

In order 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 a developing intranet, staff newsletters and a media digest issued weekly to keep staff up to date with developments. These include new business successes, changes in policy, staff changes and external factors that could affect our work. Staff and teams are also encouraged to share their news with the rest of the organisation to promote achievements and best practice.

Independent Auditor's report to the members of Terrence Higgins Trust

We have audited the financial statements of The Terrence Higgins Trust for the year ended 31 March 2017 which comprise the Group Statement of Financial Activities, the Group and Company Balance Sheets, the Group Cash Flow Statement and the related notes numbered 1 to 30.

The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice)

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and to the charitable company's trustees, as a body, in accordance with section 44(1c) of the Charities and Trustee Investment (Scotland) Act 2005. 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 company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of trustees and auditor

As explained more fully in the Statement of Trustees' Responsibilities, the trustees (who are also the directors of the charitable company for the purpose of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

We have been appointed as auditor under section 44(1c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with regulations made under those Acts.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

Scope of the audit of the financial statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the charitable company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the trustees; and the overall presentation of the financial statements.

In addition, we read all the financial and non-financial information in the Strategic report and the Trustees' Annual Report and any other surround information to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

Scope of the audit of the financial statements

In our opinion the financial statements:

- give a true and fair view of the state of the group's and the charitable company's affairs as at 31 March 2017 and of the group's incoming resources and application of resources, including its 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, the Charities and Trustee Investment (Scotland) Act 2005 and Regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006 (amended).

Opinion on other matter prescribed by the Companies Act 2006

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

- the information given in the Strategic Report and the Trustees' Annual Report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Trustees' Annual Report and Strategic report have been prepared in accordance with applicable legal requirements.

N. Hashemi

Naziar Hashemi
Senior Statutory Auditor
For and on behalf of
Crowe Clark Whitehill LLP
Statutory Auditor
London

Date 7 November 2017

Matters on which we are required to report by exception

In light of the knowledge and understanding of the group and parent company and its environment obtained in the course of the audit, we have not identified material misstatements in the Strategic report or the trustees' annual report.

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

- the parent charitable company has not kept adequate accounting records; 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.

Financial statements

TERRENCE HIGGINS TRUST
CONSOLIDATED BALANCE SHEETS
As at 31 March 2017

TERRENCE HIGGINS TRUST
CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES (incorporating an income and expenditure account)
For the year ended 31 March 2017

	Note	2017			2016		
		Unrestricted £'000	Restricted £'000	Total £'000	Unrestricted £'000	Restricted £'000	Total £'000
Income and endowments from:							
Donations and legacies	3	3,570	1,863	5,433	3,370	2,472	5,842
Other trading activities	4	440	-	440	927	-	927
Investments	5	104	-	104	36	-	36
Charitable activities							
Ending HIV transmission and improving sexual health	6	7,895	43	7,938	8,732	-	8,732
Empowering people to live well with HIV	6	1,556	7	1,563	2,136	-	2,136
Other	7	110	-	110	76	-	76
Total		13,675	1,913	15,588	15,277	2,472	17,749
Expenditure on:							
Raising funds	8	1,925	-	1,925	1,907	-	1,907
Charitable activities							
Ending HIV transmission and improving sexual health	9	9,174	478	9,652	9,555	695	10,250
Empowering people to live well with HIV	9	3,176	1,403	4,579	3,696	1,829	5,525
Amplifying the voices of people living with HIV	9	346	45	391	396	-	396
Total		14,621	1,926	16,547	15,554	2,524	18,078
Net gains/(losses) on investments	16	554	25	579	68	(24)	44
Net income/(expenditure)		(392)	12	(380)	(209)	(76)	(285)
Other recognised gains and losses							
Gains/(losses) on revaluation of fixed assets		909	-	909	-	-	-
Actuarial gains/(losses) on defined benefit pension schemes	13	(2,137)	-	(2,137)	1,224	-	1,224
Net movement in funds		(1,620)	12	(1,608)	1,015	(76)	939
Reconciliation of funds:							
Total funds brought forward	21	11,220	405	11,625	10,205	481	10,686
Total funds carried forward	21	9,600	417	10,017	11,220	405	11,625

The restricted funds column includes an endowment fund as follows: Opening balance of £233,000, net gain on investment for the year £25,000 and a closing balance of £258,000.

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

The notes on pages 41 to 65 form part of these financial statements.

	Note	Group		Charity	
		2017 £'000	2016 £'000	2017 £'000	2016 £'000
Fixed assets					
Intangible fixed assets	14	441	536	441	536
Tangible fixed assets	15	5,934	6,712	5,934	6,712
Investments	16	7,249	5,101	7,249	5,101
		13,624	12,349	13,624	12,349
Current assets					
Debtors	17	1,438	1,091	1,413	1,059
Cash held as short term deposits		1,254	2,662	1,245	2,660
Cash at bank and in hand		754	727	754	727
Stock		-	28	-	28
		3,446	4,508	3,412	4,474
Creditors: amounts due within 1 year	18	(2,597)	(2,569)	(2,569)	(2,541)
Net current assets		849	1,939	843	1,933
Total assets less current liabilities		14,473	14,288	14,467	14,282
Creditors: amounts falling due after 1 year	20	(1,317)	(1,592)	(1,317)	(1,592)
Net assets excluding pension liability		13,156	12,696	13,150	12,690
Pension liability	13	(3,139)	(1,071)	(3,139)	(1,071)
Net assets including pension liability		10,017	11,625	10,011	11,619
Funds					
Permanent endowment funds	21	258	233	258	233
Restricted funds	21	159	172	159	172
Total		417	405	417	405
Unrestricted funds					
General funds	21	12,733	12,285	12,733	12,285
Subsidiary companies' non-charitable funds	21	6	6	-	-
Pension fund	21	(3,139)	(1,071)	(3,139)	(1,071)
Total unrestricted funds		9,600	11,220	9,594	11,214
Total funds		10,017	11,625	10,011	11,619

The Charity's net loss for the year was £1.6m (2016: profit of £0.9m)

The notes on pages 41 to 65 form part of these accounts.

The financial statements were approved and authorised for issue by the trustees on 27 September 2017 and signed on their behalf by



Jonathan McShane - Chair

TERRENCE HIGGINS TRUST
CONSOLIDATED CASH FLOW STATEMENT
For the year ended 31 March 2017

	Note	2017 £'000	2016 £'000
Cash flows from operating activities:			
Net cash provided by (used in) operating activities	29	(1,153)	393
Cash flows from investing activities:			
Dividends, interest and rents from investments		91	13
Proceeds from the sale of property, plant and equipment		-	6,000
Purchase of property, plant and equipment		(9)	(133)
Purchase of investments		(69)	(4,800)
Net cash provided by (used in) investing activities		(1,140)	1,473
Cash flows from financing activities:			
Repayments of borrowing		(241)	(255)
Net cash provided by (used in) financing activities		(241)	(255)
Change in cash and cash equivalents in the reporting period		(1,381)	1,218
Cash equivalents at the beginning of the reporting period		3,389	2,171
Cash and cash equivalents at the end of the reporting period		2,008	3,389

TERRENCE HIGGINS TRUST
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
For the year ended 31 March 2017

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 (FRS102) applicable to charities preparing their accounts in accordance with FRS102 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 cash outflow of £1,381,000 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 their receipt, it is probable that they 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.

g) 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, usually for our Auction, 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

THT 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 the life of the project if shorter)
Management information system	10% on cost
Databases and other software	25% on cost (or over the 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 £1.5m. The Trustees have approved the valuation which is based upon an independent Estate Agents market valuation. This valuation was confirmed by three independent offers of purchase in excess of £1.5m.

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 £4,674,000 (2016 £4,190,000) and Financial liabilities at amortised cost of £2,719,000 (2016 £3,282,000)

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 THT, 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 THT.

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

	Unrestricted £'000	Restricted £'000	2017 £'000	2016 £'000
Corporate donations	241	223	464	600
Trust donations	50	145	195	585
Big Lottery Fund	-	1,381	1,381	1,532
Community fundraising	307	-	307	261
Individual donations	1,720	114	1,834	2,038
Legacies	1,252	-	1,252	826
Total donations and legacies	3,570	1,863	5,433	5,842

4. Other trading activities

	2017 £'000	2016 £'000
Fundraising events	97	520
Shop sales	93	131
Rental income from operating leases	229	237
Room hire and catering	9	23
Sponsorship, sales and cause related marketing	12	16
Total other trading activities	440	927

5. Investment income

	2017 £'000	2016 £'000
Investment income	91	13
Bank interest	13	23
Total investment income	104	36

6. Income from charitable activities	Unrestricted	Restricted	2017	2016
	£'000	£'000	£'000	£'000
Ending HIV transmission and improving sexual health				
Public Health England	1,211	14	1,225	1,200
Health authorities	520	-	520	856
Local authorities and other statutory bodies	6,164	29	6,193	6,676
Total Ending HIV transmission and improving sexual health	7,895	43	7,938	8,732
Empowering people to live well with HIV				
Health authorities	166	-	166	84
Local authorities and other statutory bodies	1,390	7	1,397	2,052
Total Empowering people to live well with HIV	1,556	7	1,563	2,136
Total income for charitable activities	9,451	50	9,501	10,868
7. Other income			2017	2016
			£'000	£'000
Training and conferences			23	6
Counselling and therapy fees			43	29
Student placements			5	6
Other			39	35
Total other income			110	76
8. Expenditure on raising funds				
		Fundraising & trading	2017	2016
Cost of raising funds	£'000	£'000	£'000	£'000
Salaried staff costs	702	111	813	843
Non-salaried staff costs	88	16	104	50
Printing costs	229	40	269	208
Event costs	144	25	169	165
Other direct costs	275	43	318	341
Premises costs	39	7	46	52
Support costs (note 10)	195	11	206	248
Total	1,672	253	1,925	1,907

9. Charitable activities	Ending HIV transmission and improving sexual health	Empowering people to live well with HIV	Amplifying the voices of people living with HIV	Total	Total
	£'000	£'000	£'000	£'000	£'000
Salaried staff costs	4,945	2,813	264	8,022	8,417
Non-salaried staff costs	21	18	-	39	136
Subcontractors and partners	609	187	-	796	996
Clinical supplies	654	15	-	669	921
Hardship grants	-	68	-	68	143
Website	40	19	7	66	121
Volunteer costs	10	47	4	61	60
Print and design costs	410	29	4	443	320
Condoms & materials	134	8	-	142	152
Event costs	64	67	1	132	137
Campaign/service advertising	350	4	1	355	339
Research & evaluation	4	2	1	7	133
Staff travel and subsistence	176	83	8	267	347
Other direct costs	497	248	59	804	813
Premises costs	588	302	1	891	910
Support costs (note 10)	1,150	669	41	1,860	2,226
Total	9,652	4,579	391	14,622	16,171
10. Support costs				Fundraising & trading	Total
	Ending HIV transmission and improving sexual health	Empowering people to live well with HIV	Amplifying the voices of people living with HIV	£'000	2017
	£'000	£'000	£'000	£'000	£'000
Salaried staff costs	481	279	16	86	862
Non-salaried staff costs	33	20	1	6	60
Staff travel and subsistence	3	2	-	1	6
IT costs	262	153	8	47	470
Other direct costs	244	141	11	43	439
Premises costs	127	74	5	23	229
Total support costs	1,150	669	41	206	2,066

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 within each activity.

11. Net income	2017	2016
	£'000	£'000
This is stated after charging:		
Depreciation and amortisation	283	299
Rental costs relating to operating leases	402	357
Trustees' indemnity insurance	7	3
Auditors' remuneration: audit	30	30
Auditors' remuneration: pension	7	7
Actuarial fee for FRS 17 valuation	3	3

None of the Trustees received any remuneration from the Charity (2016: £nil). No trustees (2016: 2) were reimbursed for travel expenses during the year (2016: £261). Catering costs for the committee and other meetings, amounted to £137 in the year (2016: £117). Travel and accommodation was also booked and paid for directly by the charity for Trustees with total costs amounting to £978. The auditors' remuneration stated above are exclusive of irrecoverable VAT that is an additional cost the the charity.

12. Staff costs

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

	2017 £'000	2016 £'000
Salaries and wages	8,406	9,116
Social security costs	731	817
Pension contributions	290	359
Agency staff	203	255
Redundancy costs	270	203
Total staff costs	9,900	10,750

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 2017 £6,000 of redundancy payments were outstanding and are included in the accounts as a creditor.

	Notes	2017 £'000	2016 £'000
Staff costs are categorised as:			
Cost of raising funds	8	790	770
Fundraising trading	8	127	123
Ending HIV transmission and improving sexual health	9	4,966	5,102
Empowering people to live well with HIV	9	2,831	3,182
Amplifying the voices of people living with HIV	9	263	269
Support staff	10	922	1,304
Total staff costs		9,899	10,750

The average head count of staff employed during the year was as follows:

	2017 No.	2016 No.
Salaried staff	317	336

The average weekly number of whole time equivalent employees during the year was as follows:

	2017 No.	2016 No.
Salaried staff	238	273
Sessional staff	20	22
	258	295

The number of higher paid employees was:

	2017 No.	2016 No.
£60,000 to £69,999	2	2
£70,000 to £79,999	1	1
£100,000 to £109,999	1	-

Of the higher paid employees, all received employer contributions totalling £23,000 (2016: £11,298) paid into a defined contribution pension scheme. The total benefits received by the Executive team during the year ending 31 March 2017 was £511,000 (2016: £521,000) with salaries ranging from £45,190 to £100,000 in the current year. Due to a restructure during the year and some Executive posts being paid through agencies on an interim basis, four members of the five executive posts fall into the bands above. Total amount paid during the year in relation to executive agency staff was £16,500.

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 2017, THT contributed £237,000 (2016: £254,000) and employees contributed £183,000 (2016: £168,411).

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);

plus

A special lump sum of £1million 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.

The next full valuation is in progress and has an effective date of 31 July 2018.

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

- i. 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.

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.

13. Staff pension (continued)

Effective Date	At 31/03/17	At 31/03/16
Principal Actuarial Assumptions		
Discount rate	2.90%	3.80%
Pension increases (RPI up to 5%)	3.20%	3.00%
Revaluation in deferment (CPI up to 5 %)	2.20%	1.80%
Mortality		
- Base Table	S2PXA YOB	S2PXA YOB
- Allowance for future improvements	CMI 2015	CMI 2015
	1.25%	1.25%
Scheme's assets	3.50%	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	80%	80%
Bonds	14%	15%
Other (cash etc)	6%	5%

The actuarial loss on the Scheme's assets over the year to the review date was £2,137,000

The assets do not include any investment in the Trust.

13. Staff pension (continued)

Balance sheet position	31/03/17 £'000	31/03/16 £'000
Present value of defined benefit obligation	18,893	14,088
Fair value of plan assets	15,754	13,017
Excess / (Deficit)	(3,139)	(1,071)
Net Defined Benefit Liability	<u>(3,139)</u>	<u>(1,071)</u>
Net assets available for benefits	<u>15,754</u>	<u>13,017</u>
Profit and loss		
Interest on net liability	(38)	(78)
Past service cost	-	-
	<u>(38)</u>	<u>(78)</u>
Actual return on plan assets	<u>2,791</u>	<u>(243)</u>
Other comprehensive income (OCI)		
Actual less expected return on plan assets	2,297	(709)
Experience gains and losses on liabilities	135	644
Change in assumptions	(4,569)	1,289
Actuarial gain / (loss) recognised in OCE	<u>(2,137)</u>	<u>1,224</u>
Changes in fair value of plan assets:		
	31/03/17	31/03/16
	£'000	£'000
Opening fair value of plan assets	13,017	13,347
Employer contributions	107	60
Benefit payments	(161)	(147)
Expected return on plan assets	494	466
Actuarial gains / (losses)	2,297	(709)
	<u>15,754</u>	<u>13,017</u>
Changes in present value of defined benefit obligation:		
	31/03/17	31/03/16
	£'000	£'000
Opening defined benefit obligation	14,088	15,624
Interest cost	532	544
Benefits paid	(161)	(147)
Actuarial losses / (gains)	4,434	(1,933)
Closing defined benefit obligation	<u>18,893</u>	<u>14,088</u>

14. Intangible fixed assets – group and charity

	Website £'000	Software & systems £'000	Total £'000
Cost			
At the start of the year	598	1,502	2,100
Disposals/write offs in year	(36)	-	(36)
At the end of the year	<u>562</u>	<u>1,502</u>	<u>2,064</u>
Amortisation			
At the start of the year	598	966	1,564
Charge for the year	-	95	95
Disposals/write offs in year	(36)	-	(36)
At the end of the year	<u>562</u>	<u>1,061</u>	<u>1,623</u>
Net book value			
At the end of the year	<u>-</u>	<u>441</u>	<u>441</u>
At the start of the year	<u>-</u>	<u>536</u>	<u>536</u>

15. Tangible fixed assets – group and charity

	Freehold property £'000	Leasehold improvements £'000	Fixtures & fittings £'000	Computer equipment £'000	Motor vehicles £'000	Total £'000
Cost						
At the start of the year	7,312	151	513	539	78	8,593
Additions in year	-	-	8	-	-	8
Disposals/write offs in year	-	(17)	(20)	(6)	(30)	(73)
Reclassification/Revaluation	(701)	-	(19)	-	-	(720)
At the end of the year	<u>6,611</u>	<u>134</u>	<u>482</u>	<u>533</u>	<u>48</u>	<u>7,808</u>
Depreciation and impairment provisions						
At the start of the year	876	82	432	417	74	1,881
Charge for the year	85	20	39	42	2	188
Disposals/write offs in year	-	(13)	(17)	(6)	(30)	(66)
Reclassification/Revaluation	(114)	-	(15)	-	-	(129)
At the end of the year	<u>847</u>	<u>89</u>	<u>439</u>	<u>453</u>	<u>46</u>	<u>1,874</u>
Net book value						
At the end of the year	<u>5,764</u>	<u>45</u>	<u>43</u>	<u>80</u>	<u>2</u>	<u>5,934</u>
At the start of the year	<u>6,436</u>	<u>69</u>	<u>81</u>	<u>122</u>	<u>4</u>	<u>6,712</u>

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 has been revalued as an Investment Property. This property is now classified within investments.

Details of charges over properties are given in note 20.

16. Fixed asset investments – group and charity

	Investment Property £'000	Unrestricted £'000	Endowment £'000	2017 £'000	2016 £'000
Market value at the start of the year		4,868	233	5,101	257
Reclassification	1,500			1,500	
Additions		69	-	69	4,800
Unrealised gain/(loss)		554	25	579	44
Market value at the end of the year	<u>1,500</u>	<u>5,491</u>	<u>258</u>	<u>7,249</u>	<u>5,101</u>
Historic cost at the end of the year	<u>1,500</u>	<u>4,800</u>	<u>207</u>	<u>6,507</u>	<u>5,007</u>
Unrealised investment gain based on historical cost	<u>-</u>	<u>691</u>	<u>51</u>	<u>742</u>	<u>94</u>

Fixed asset investments comprise of an endowment fund and unrestricted investments. The endowment fund at £0.2m and £3.9m of the unrestricted investments are managed by Rathbones and are invested as detailed in the split below. £1.5m of unrestricted investments is cash held in long term deposit. The investment property, at the value of £1.5m, 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:

UK Equities	32.9%
Overseas Equities	35.7%
Cash	3.5%
Alternatives	15.1%
Fixed Interest	12.7%

17. Debtors

	Group 2017 £'000	2016 £'000	Charity 2017 £'000	2016 £'000
Grant and contract funding receivable and similar debtors	839	418	809	383
Other debtors	106	65	106	65
Amounts due from subsidiary undertakings	-	-	7	3
Prepayments	234	277	234	277
Accrued income	259	331	257	331
Total debtors	<u>1,438</u>	<u>1,091</u>	<u>1,413</u>	<u>1,059</u>

18. Creditors: amounts due within 1 year

	Group 2017 £'000	2016 £'000	Charity 2017 £'000	2016 £'000
Loan repayable (note 20)	263	229	263	229
Trade creditors	239	398	239	398
Social security, pension contributions and other taxes	313	337	313	337
Other creditors	31	8	14	-
Accruals	1,135	1,213	1,135	1,213
Deferred income (note 19)	616	384	605	364
Total creditors due within 1 year	<u>2,597</u>	<u>2,569</u>	<u>2,569</u>	<u>2,541</u>

19. Deferred income reconciliation

	At 1 April 2016 £'000	Released to income £'000	Deferred during the year £'000	At 31 March 2017 £'000
Donations and legacies	263	(263)	516	516
Charitable activities	93	(93)	83	83
Other income	28	(28)	17	17
	384	(384)	616	616

Income is deferred when cash is received in advance of the charity being entitled to it, for example when funding is given a specific future date or for a specific activity that hasn't yet been performed.

20. Creditors: amounts due after 1 year

	Group 2017 £'000	2016 £'000	Charity 2017 £'000	2016 £'000
Loan	<u>1,317</u>	<u>1,592</u>	<u>1,317</u>	<u>1,592</u>

The loans which THT currently has outstanding are summarised below:

Repayment term Years	Payments due in < 1 year £'000	Payments due in 2-5 years £'000	Payments due in > 5 years £'000	Total
Gray's Inn Road 1	20	174	696	960
Gray's Inn Road 2	20	89	357	620

Two loans were taken out to assist THT in the move to the Charity's current headquarters. A loan of £3,000,000 was taken out in respect of the purchase of the building and a further loan of £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.

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 2017

	Opening balance £'000	Income £'000	Expenditure £'000	Other movement in funds £'000	At the end of 2017 £'000
Unrestricted funds:					
General fund	12,291	13,675	(14,690)	1,463	12,739
Pension fund	(1,071)	-	69	(2,137)	(3,139)
Total unrestricted funds	11,220	13,675	(14,621)	(674)	9,600
Restricted funds					
American Express Volunteer Programme	17	44	(44)	-	17
Anglo American African Health Promotion Faith and Communities Project	24	53	(53)	-	24
Barclays SWISH placement service	8	-	(1)	-	7
Big Lottery Fund Investing in Communities: Confident Families	-	235	(235)	-	-
Big Lottery Fund People & Places: Community Liaison and Participation Project	-	67	(67)	-	-
Big Lottery Fund Reaching Communities: Health Navigators	-	66	(66)	-	-
Big Lottery Fund Reaching Communities: Informed Passions	-	48	(48)	-	-
Big Lottery Fund Reaching Communities: Living positively in West Sussex	-	18	(18)	-	-
Big Lottery Fund Reaching Communities: Talk Safe 2	-	23	(23)	-	-
Big Lottery Fund Silver Dreams: Health, Wealth and Happiness	28	287	(315)	-	-
Big Lottery Fund: Investing in Financial Futures	-	102	(102)	-	-
Big Lottery Fund: Life Positive Nottingham	-	40	(40)	-	-
Big Lottery Fund: SWISH -Supporting people involved in sex work	-	22	(22)	-	-
BLF - PASH	-	24	(24)	-	-
BLF - Work Positive (Back to Work)	-	69	(69)	-	-
BLF Awards for all - Living Positively	-	2	(2)	-	-
BLF Champions of Change (African HP Midlands)	12	163	(168)	-	7
BLF Children & Families project Nottingham	-	26	(26)	-	-
BLF People for People Peer Volunteering Coventry & Wirral	-	45	(45)	-	-
BLF Wales: Positive Action Wales 2 - Gweithredu HIV a Hepatitis Action Wales	-	145	(145)	-	-
CHAFEA - EMIS European MSM Survey & Training Esticom	-	10	(10)	-	-
Church of Scotland Fastest/Health Promotion Programme	1	-	-	-	1
City Bridge Trust Young People's Counselling	10	4	(10)	-	4
Clinical Services Scotland	1	79	(51)	-	29
Comic Relief - Positive Balance (Advice)	-	60	(60)	-	-
ECDC -Developing European HIV & STI Testing Directory	-	19	(19)	-	-
Fastest Direct Scotland	-	62	(62)	-	-
Friday/Monday Innovation - MSM Online therapeutic change	-	14	(14)	-	-
Comic Relief:SWISH	5	-	-	-	5
Gilead - Lost to Follow up (C&T)	-	2	(2)	-	-
Garfield Weston - Positive voices	-	18	(18)	-	-
Gilead - HIV testing in Primary Care	-	5	(5)	-	-
Helping Hands - BLF Awards for All Scotland	1	-	-	-	1
Henry smith Welfare Rights Advice	-	23	(23)	-	-
John Lyons - Women at risk of sexual exploitation	-	5	(5)	-	-
Lambeth Law Centre BLF Advice	4	-	-	-	4
MAC - Positive Voices	-	77	(77)	-	-
MSD HIV and Ageing Peer Researchers - Merck & Co	-	10	(10)	-	-
NOISE - MyHIV(EJAF)	-	2	(2)	-	-
Soho Estates - SWISH	-	22	(22)	-	-
ViiV Healthcare -Modelling integrated HIV services in Primary care	5	12	(13)	-	4
Other Restricted Funds	56	10	(10)	-	56
Restricted income funds	172	1,913	(1,926)	-	159
Permanent endowment	233	-	-	25	258
Total restricted funds	405	1,913	(1,926)	25	417
Total funds	11,625	15,588	(16,547)	(649)	10,017

21. Movements in funds (continued)

Prior year comparative
As at 31st March 2016

	Opening balance £'000	Income £'000	Expenditure £'000	Other movement in funds £'000	At the end of 2016 £'000
Unrestricted funds:					
General fund	12,482	15,277	(15,536)	68	12,291
Pension fund	(2,277)	-	(18)	1,224	(1,071)
Total unrestricted funds	10,205	15,277	(15,554)	1,292	11,220
Restricted funds					
American Express volunteer programme	15	45	(43)		17
Anglo American Group Foundation African health promotion	13	60	(49)		24
Barclays SWISH placement service	-	75	(67)		8
BLF Investing in Communities: Confident Families	-	201	(201)		-
BLF People & Places: Community Liaison and Participation Project	3	76	(79)		-
BLF Investing in Financial Futures	8	98	(106)		-
BLF Silver Dreams: Health, Wealth and Happiness	46	327	(345)		28
BLF Reaching Communities: Informed Passions	-	47	(47)		-
BLF Life Positive Nottingham	4	39	(43)		-
BLF Reaching Communities: Living positively in West Sussex	1	43	(44)		-
BLF PASH	11	119	(130)		-
BLF Work Positive (Back to Work)	-	65	(65)		-
BLF LGBT Wirral	2	13	(15)		-
BLF Awards for All Scotland Volunteer Coordinator	-	-	-		-
BLF Awards for All Wales Community Workshops	1	1	(2)		-
BLF Champions of Change Midlands	-	81	(69)		12
BLF Children & Families project Nottingham	4	30	(34)		-
BLF Reaching Communities Health Navigators	16	95	(111)		-
BLF People for People Peer Volunteering Coventry & Wirral	-	39	(39)		-
BLF Reaching Communities Talk Safe 2	-	91	(91)		-
BLF Wales: Positive Action Wales 2 - Gweithredu HIV & Hepatitis Action	5	163	(168)		-
BLF SWISH -Supporting people involved in sex work	-	86	(86)		-
Burdett Trust - Integrated Care	-	5	(5)		-
Children in Need Nottingham & Coventry	-	21	(21)		-
Church of Scotland Fastest/Health Promotion Programme	-	6	(5)		1
City Bridge Trust Young People's Counselling	5	49	(44)		10
Clinical Services Scotland	12	46	(57)		1
Comic Relief - Positive Balance	1	61	(62)		-
European Aids Treatment - EmERGE project leader	-	3	(3)		-
Fastest Direct Scotland	11	46	(57)		-
Gilead Lost to Follow up	-	8	(8)		-
BLF Awards for All Helping Hands Scotland	-	3	(2)		1
Henry Smith Welfare Rights Advice	-	28	(28)		-
John Lyons - Women at risk of sexual exploitation	-	21	(21)		-
BLF Lambeth Law Centre Advice	3	1	-		4
MAC Hardship Fund	-	100	(100)		-
EJAF NOISE (MyHIV)	7	231	(238)		-
Soho Estates - SWISH	-	4	(4)		-
Elizabeth Taylor AIDS Foundation THT Direct	10	-	(10)		-
Comic Relief SWISH	5	-	-		5
ViiV Healthcare Modelling integrated HIV services in Primary care	-	26	(21)		5
Other Restricted Funds	41	19	(4)		56
Restricted income funds	224	2,472	(2,524)	-	172
Permanent endowment	257	-	-	(24)	233
Total restricted funds	481	2,472	(2,524)	(24)	405
Total funds	10,686	17,749	(18,078)	1,268	11,625

21. Movement in funds (continued)

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

The pension fund represents the value of the defined benefit scheme at 31st March 2017. 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 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 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 Reaching Communities: Health Navigators - Long term condition management support for people living with HIV in Bristol, Midlands and Wirral.

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 Reaching Communities: Living positively in West Sussex - This project aims to improve the mental and physical wellbeing of people living with HIV in West Sussex through the creation of a peer support network.

Big Lottery Fund Reaching Communities: Talksafe 2 - A young person's counselling and online mentoring service in London.

Big Lottery Fund Silver Dreams: Health, Wealth and Happiness - Innovative project for people 50+ living with HIV in London, Brighton, Bristol, Manchester and the Midlands.

Big Lottery Fund Scotland: Financial Futures – Advice and support to people living with HIV and Hepatitis C to increase their financial resilience skills.

Big Lottery Fund Reaching Communities: Life Positive – Advice and support project for people living with HIV in Nottingham addressing issues such as stigma and isolation.

Big Lottery Fund: SWISH – Advice and support for people involved in sex work.

Big Lottery Fund Reaching Communities: PASH (Peer Ambassadors in Sexual Health) – Training young people as peer deliverers of sexual health and relationship education in Bristol, Wirral and the Midlands.

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

Big Lottery Fund: Awards for All – Living Positively – This project aims to improve the mental and physical wellbeing of people living with HIV in West Sussex through the creation of peer support network.

Big Lottery Fund Awards for All Scotland volunteer coordinator – Recruits and trains volunteers to assist in the delivery of health promotion activities to support those at risk of HIV and other STI's.

Big Lottery Fund Awards for All Wales: Community Workshops Project – Supports people living with HIV and/or Hepatitis C in Powys and North Wales.

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

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

Big Lottery Fund People for People Peer volunteering – Training and recruitment of volunteers to provide a peer led service supporting PLHIV in West Midlands and the Wirral.

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

Big Lottery Fund Lambeth Law Centre – Partnership project providing advice and training for mainstream organisations on HIV.

Big Lottery Fund Reaching Communities: LGBT Wirral – Community network and peer support for LGBT people living in Wirral.

Burdett Trust Integrated Care – To deliver and evaluate 'One Clinic' a service for people living with HIV who are stable and well. To empower nurses to work independently and deliver integrated healthcare provision for PLHIV in South London.

Children in Need: Children & Families Nottingham and Coventry – Project for children and families living with and affected by HIV.

Church of Scotland: HIV testing in Glasgow – a specialised opportunity for people to test for HIV & other sexually transmitted infections, with the aim to reduce undiagnosed HIV in the Glasgow area and reduce the rates of onward transmission.

CHAFFEA – 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.

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

Elton John Aids Foundation: NOISE – National online long term condition management service for people, providing a package of online support services including website MyHIV, advice and counselling.

Elizabeth Taylor Aids Foundation Hardship Fund – Disbursement of small grants for vulnerable people living with HIV in financial crisis.

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 groupwork 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 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.

Gilead lost to follow up – A project to re-engage with and provide support services for HIV patients who are no longer accessing treatment in Chelsea and Westminster.

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

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.

MAC Hardship Fund – Disbursement of small grants for vulnerable people living with HIV in financial crisis.

MSD – HIV and Ageing Peer Researchers project. This project sought to pilot an innovative methodology – training up older people living with HIV to co-produce the updated HIV and ageing research to ensure that people living with and affected by HIV are meaningfully involved in designing and delivering THT's work.

John Lyon's Charity: SWISH – Support for young women at risk of sexual exploitation or those involved in sex work in Hammersmith & Fulham, Kensington & Chelsea and Westminster.

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.

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.

22. Analysis of group net assets between funds

As at 31st March 2017

	Intangible and Tangible Fixed Assets	Investments	Net current assets	Long-term liabilities	Total funds 2017
	£'000	£'000	£'000	£'000	£'000
General Funds	6,375	5,491	684	(4,456)	8,094
Subsidiary company	-	-	6	-	6
Total unrestricted funds	6,375	5,491	690	(4,456)	8,100
Restricted funds	-	-	159	-	159
Permanent endowment	-	258	-	-	258
Total restricted funds	-	258	159	-	417
Total funds	6,375	5,749	849	(4,456)	8,517

Prior year comparative

As at 31st March 2016

	Intangible and Tangible Fixed Assets	Investments	Net current assets	Long-term liabilities	Total funds 2016
	£'000	£'000	£'000	£'000	£'000
General Funds	7,248	4,868	1,761	(2,663)	11,214
Subsidiary company	-	-	6	-	6
Total unrestricted funds	7,248	4,868	1,767	(2,663)	11,220
Restricted funds	-	-	172	-	172
Permanent endowment	-	233	-	-	233
Total restricted funds	-	233	172	-	405
Total funds	7,248	5,101	1,939	(2,663)	11,625

23. Lease commitments

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

	2017 £'000	2016 £'000
Not later than 1 year	242	304
Later than one year and not later than 5 years	295	521
Later than 5 years	<u>9</u>	<u>24</u>

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

	2017 £'000	2016 £'000
Not later than 1 year	196	214
Later than one year and not later than 5 years	295	145
Later than 5 years	<u>6</u>	<u>-</u>

24. Legacies Receivable

At the year end the Charity had been notified of an estimated £3.6m (2016: £876,000) 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, THT is entitled to the exemptions granted by sections 466 to 493 Corporation Tax Act 2010.

THT 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 THT on its expenditure during the year was £430,873 (2016: 483,268).

26. Subsidiary companies

The Charity has investments costing £100 (2016: £100) in two companies (2016: 2). The shareholding comprises ordinary shares. Details of the subsidiary companies at 31st March 2017, which were incorporated in England and Wales and are wholly owned or controlled directly by THT, 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

	2017 £'000	2016 £'000
Profit and loss account		
Turnover	522	680
Cost of sales	(291)	(382)
Administrative expenses	(1)	(2)
Profit on trading activities	<u>230</u>	<u>296</u>
Interest	-	-
Profit for the financial year	230	296
Profit donated through gift aid	(230)	(296)
Profit for the financial year after gift aid	-	-
Retained profit brought forward	6	6
Retained profit carried forward	<u>6</u>	<u>6</u>
Balance sheet		
Cash	8	2
Debtors	33	35
Amounts owed to parent undertaking	(7)	(3)
Other creditors	(28)	(28)
Net assets	<u>6</u>	<u>6</u>

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 (2016: none):

In 2017 the charity charged Terrence Higgins Enterprise Limited management fees totalling £131,000 (2016: £147,000)

In 2017 Terrence Higgins Enterprise Limited subcontracted the provision of certain long term condition management services to the charity with fees totalling £186,200 (2016: £221,000)

All profits made by Terrence Higgins Enterprise Limited are gifted to the charity. Profits in 2017 were £230,000 (2016: £296,000)

During the year Trustees have made donations to the Charity with a total value of £4,500 (2016: £2,980). No conditions were attached to these donations.

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29. Notes to the consolidated cash flow statement

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

	2017	2016
	£'000	£'000
Net (expenditure) / income for the reporting period (as per the Statement of Financial Activities)	(380)	(285)
Adjustments for:		
Net (gain) / loss on investments	(579)	(44)
Pension adjustment	(69)	18
Investment income	(91)	(13)
Bank interest received	(13)	(23)
Interest paid	13	23
Depreciation and amortisation charge	283	360
Loss on disposal of fixed assets	7	50
(Increase) / decrease in debtors	(347)	750
(Increase) / decrease in stock	28	(28)
(Decrease) / increase in creditors	(5)	(415)
Net cash provided by (used in) operating activities	<u>(1,153)</u>	<u>393</u>

(b) Analysis of cash and cash equivalents

	2017	2016
	£'000	£'000
Cash held at bank and in hand	754	727
Liquid resources - cash held on short term deposits	<u>1,254</u>	<u>2,662</u>
	2,008	3,389
Mortgages due within one year	(263)	(229)
Mortgages due after one year	<u>(1,317)</u>	<u>(1,592)</u>
Total	<u>428</u>	<u>1,568</u>

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30. Terrence Higgins Trust Scotland

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

	Unrestricted	Restricted	2017	2016
	£'000	£'000	Total	Total
			£'000	£'000
Income:				
Donations and Legacies	7	532	539	437
Charitable Activities				
Statutory income for charitable activities	295	-	295	267
Other incoming resources from charitable activities	22	-	22	10
Total	<u>324</u>	<u>532</u>	<u>856</u>	<u>714</u>
Expenditure on:				
Charitable expenditure				
Clinical	-	123	123	120
Health Improvement	295	35	330	245
Long Term Condition Management	-	439	439	422
Premises	21	-	21	10
Support Costs	17	-	17	(11)
Total	<u>333</u>	<u>597</u>	<u>930</u>	<u>786</u>
Net income (expenditure)	<u>(9)</u>	<u>(65)</u>	<u>(74)</u>	<u>(72)</u>

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.

BLF – Big Lottery Fund.

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.

CD4 cells – important immune system cells which help co-ordinate your immune response. A 'CD4 count' looks at the number of CD4 cells in a sample of blood and is a determination of the strength of someone's immune system.

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.

Hepatitis – an inflammation of the liver. There are three main types: A, B and C being increasingly common among people living with HIV. Hepatitis can be acute or chronic. Acute hepatitis happens after initial infection and is short term. It can lead to chronic hepatitis which is long term. Some types of hepatitis can be vaccinated against. Co-infection with hepatitis B and hepatitis C is increasingly becoming a major cause of illness in people with HIV. Both viruses affect the liver and in some cases can be fatal. Treatments are available and these can work well in people with HIV.

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.

HPV – 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.

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.

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.

SRE – sex and relationships education, also referred to as RSE (relationships and sex 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.

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 yous

Terrence Higgins Trust would like to thank the following:

- Abertawe Bro Morgannwg University Health Board
- Aneurin Bevan Health Board
- Ayrshire & Arran Health Board
- Barking Havering Redbridge University Hospital NHS Trust
- Bedford Borough Council
- Birmingham City Council
- Bracknell Forest Council on behalf of West Berkshire
- Brighton & Hove City Council
- Bristol City Council
- Buckinghamshire County Council
- Cambridgeshire Community Services NHS Trust
- Cardiff & Vale University Health Board
- Chelsea & Westminster NHS Foundation Trust
- City of London
- Central London Community Healthcare NHS Trust
- Coventry City Council
- Croydon Health Services NHS Trust
- Cumbria Partnership NHS Foundation Trust
- Department for Business Energy and Industrial Strategy
- Department for Energy and Climate Change
- Dorset Healthcare University NHS Foundation Trust
- Dumfries & Galloway Health Board
- East Sussex County Council
- European Centre for Disease Prevention Control
- Freshwinds
- G4S Facilities Management
- Hammersmith & Fulham Council
- Harrow Council
- Hertfordshire County Council
- Kent Community Health NHS Foundation Trust
- Lincolnshire Community Health Services
- Living Well CIC
- London Borough of Brent
- London Borough of Croydon
- London Borough of Hackney
- London Borough of Havering
- London Borough of Hillingdon
- London Borough of Lambeth
- London Borough of Redbridge
- London Borough of Richmond upon Thames
- London Borough of Waltham Forest
- Metropolitan Borough of Wirral
- NHS Fife
- NHS Forth Valley
- NHS Lanarkshire
- NHS Oxfordshire CCG
- NHS Tayside
- North Somerset Council
- Nottingham University Hospitals NHS Trust
- Preventx Limited
- Provide CIC
- Public Health England
- ROSA
- Royal Borough of Kensington and Chelsea
- Royal Borough of Kingston
- Royal Free London NHS Foundation Trust
- Royal Wolverhampton NHS Trust
- Sandwell Metropolitan Borough Council
- Source BioScience UK Ltd
- South Staffordshire and Shropshire Healthcare NHS Foundation Trust
- Southend on Sea Borough Council
- Spectrum Community Health CIC
- St Helens and Knowsley Teaching Hospitals NHS Trust
- Suffolk County Council
- Surrey County Council
- Sussex Community NHS Foundation Trust
- Swindon Borough Council
- University Hospitals Birmingham NHS Foundation Trust
- Virgin Care Services Ltd
- Wandsworth Local Authority
- Warrington Borough Council
- Westminster City Council
- Wiltshire County Council
- Wolverhampton City Council

Patrons and legal admin

Patrons include

Lord Black of Brentwood
Sir Richard Branson
Simon Callow CBE
Lord Cashman CBE
Julian Clary
Martin Clunes
Dame Judi Dench
Tracey Emin CBE
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TRUST



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