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**TRUSTEES' ANNUAL REPORT  
AND  
AUDITED FINANCIAL STATEMENTS FOR THE YEAR ENDED  
31 DECEMBER 2009  
FOR  
BRISTOL UROLOGICAL INSTITUTE**

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**BRISTOL UROLOGICAL INSTITUTE**

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& FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER**

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**Report of the Trustees and Financial Statements**  
**For the Period 1st January 2009 to 31st December 2009**

**Reference and Administrative Details of the Charity, its Trustees and Advisors**

**Vice-President**

Mr David Frank

**Executive Director**

Ms Adele Long

**Medical Director**

Mr David Gillatt

**Director**

Professor Paul Abrams

**Members of the Board of Trustees**

Mr Tim Pearce (Chairman)

Professor Paul Abrams

Mr Tony Bates

Mr Philip Davey

Mrs Patricia Davis

Mr Tony England (appointed Feb 09)

Mr Roger Feneley (resigned Oct 09)

Mr David Frank

Mr David Gillatt

Mr Richard Kinder

Professor Peter Mathieson

Mr John Miles

Mr Raj Persad

Professor Steven West

Mr Stephen Webster (appointed Sept 09)

**Administration Manager**

Mrs Karen Evely

Bristol Urological Institute,

Southmead Hospital,

Bristol

BS10 5NB

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Fax +44 (0)117 950 2229 www.bui.ac.uk

Registered in England and Wales No 2845363

Registered as a Charity No 1025402

Registered Office Narrow Quay House,

Narrow Quay, Bristol, BS1 4AH

Company Secretary

QUAYSECO LTD

**Auditors**

Goldwyns (Bristol) Limited,

9 Portland Square,

Bristol BS2 8ST

**Solicitors**

Burges Salmon,

Prince Street,

Bristol BS1 4AH

**Bankers**

NatWest Bank

Filton Bristol Branch,

PO Box 182,

4 Church Road,

Filton, Bristol BS99 5AA

**CAF Bank Ltd**

25 Kings Hill Avenue

Kings Hill

West Malling

Kent ME19 4JQ

**Objectives and Activities for the Public Benefit**

The trustees confirm that they have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the charity's aims and objectives and in planning future activities

The current and ongoing objectives being pursued by the charity are

- to improve the treatment and care of people with urological disorders
- to provide a high standard of undergraduate and postgraduate teaching and continued training for nurses, medical students, doctors and surgeons
- to support and develop urological research, with particular emphasis on urological cancers and the problems of urinary function

The BUI is located in a purpose-built building on the Southmead site of the North Bristol NHS Trust. There are four clinical assessment/consultation rooms, education and conference facilities, office accommodation and a basic science suite comprising bladder laboratories for neurophysiology, engineering and evaluation and microbiology, and an analytical laboratory housing an atomic absorption spectrophotometer. There is also a surgical skills training facility.

The BUI aimed to meet its objectives during 2009 through the delivery of established training courses and the development of new courses, and the continuation of its collaborative research programmes. Fundraising activities were planned for the period to ensure continuity and development of research.

The BioMed Centre and the Prostate Cancer Care and Research Centre come under the umbrella of the BUI and are housed within the building. The BioMed Centre is the co-coordinating partner for the BioMed Healthcare Technology Cooperative (HTC).

### **Structure, Governance and Management**

The Bristol Urological Institute (BUI) is a registered charity and a company limited by guarantee. It was incorporated on 17th August 1993, is governed by a Memorandum and Articles of Association, and is a non-government, non-political, non-religious organisation.

The Board of Trustees met, with a quorum of three. Meetings were held on 12<sup>th</sup> January, 18th May and 14<sup>th</sup> September. New trustees are nominated by the Board, based on the particular experience and skills they can bring to the BUI. They are eligible to be re-elected, pursuant to Article 7.3 of the Charity's Articles of Association, and are subsequently reappointed by the membership of the charity, unless at the meeting it is resolved not to fill the vacancy, or unless a resolution for the reappointment of a retiring trustee is put to the meeting and lost. Upon resignation of a trustee, the Board nominates a successor to fill the resulting vacancy and all new appointments are ratified by the members of the charity at the following AGM.

New trustees are briefed of their legal obligations, responsibilities and their role in the charity. Copies of recent financial statements and trustee annual reports are also provided upon appointment. Trustees are encouraged to review the Charity Commission publications for further guidance.

In 2009 the Medical Advisory Committee (MAC) met on a monthly basis with a quorum of four members to oversee and approve the BUI research and education programmes. A BUI Management Committee (BMC) had regular meetings to oversee the day-to-day running of the BUI. A weekly informal Executive Committee meeting was established to deal with day to day matters of an executive nature with a formal meeting of the group meeting once a month.

Improvements to BUI governance were a priority for 2009 with the implementation of a new financial and management system. This comprised of the transfer of the accounting system into Sage and the implementation of a new budgeting system along with the development of a new research projects database. The database is still in development but hopes to be fully implemented in 2010.

#### **Trustees**

During 2009 2 new trustees were appointed. These were Mr Anthony England and Mr Stephen Webster. Mr Roger Feneley resigned as a Trustee in October in order to spend more time on personal endeavours. He has been a Trustee for over 10 years and was integral in the implementation of the BioMed Centre and many financial grants obtained to fund the BUI building and its equipment.

#### **Risk Management**

During the year the charity, as required by the Standards of Recommended Practice (SORP), has identified risks and set out actions or systems to counter them. The task of monitoring the charity's financial control systems and procedures and of identifying risks with any financial issues is undertaken by the Executive Director with the Administration Manager. The Administration Manager reports any issues for concern to the Trustees who also receive quarterly financial reports. The Trustees approve the forthcoming year's budget.

### **Achievements and Performance**

#### **How our activities delivered public benefit:**

The benefits of the charity's work are the improvement of treatment and care, the provision of teaching and training and to support and develop on-going research with the goal being to assist sufferers, their carers and families. The trustees are pleased that the achievements and performance of the charity, as set out below, demonstrate significant progress.

## RESEARCH

The BUI carries out research ranging from basic science laboratory-based research to clinical trials and evaluations of new treatments and technologies. The BUI encourages and supports wide participation in research. Dissemination included the submission of MD theses, publications in scientific journals, trade and popular press and presentations at both national and international meetings.

### Research Projects

The BUI had a portfolio of over 50 active research projects in 2009. Many studies are collaborative and around half were contracted through North Bristol NHS Trust (NBT).

### Functional Urology

- International Consultation on Incontinence Modular Questionnaire. The development of a series of symptom and quality of life assessment questionnaires for pelvic dysfunction and lower urinary tract symptoms.
- Ultrasound estimated bladder weight for diagnosing bladder outlet obstruction in men.
- Long-term outcome for men with lower urinary tract symptoms recruited to the CLasP randomised trial comparing transurethral resection of the prostate, conservative management and laser therapy.
- A randomised, double-blind, parallel group, placebo and active controlled, multicentre study to assess the efficacy and safety of the Beta-3 agonist in subjects with symptoms of overactive bladder.
- Impact & severity of overactive bladder syndrome (OAB) in younger women.
- Neural control of bladder function: validation of an in situ model. Examining the neural control of lower urinary tract physiology and pathophysiology, including overactive bladder and bladder pain syndromes.
- Development of a model to allow bladder function to be studied.
- Urinary tract disease associated with chronic ketamine use.
- The comparison of different techniques for the diversion of urine after bladder removal using a segment of small bowel.

### BioMed

- Smart Port – Development of a new suprapubic urinary drainage system.
- Ultrasound image processing during urodynamics, with a view to non-invasive assessment of the bladder.
- Role of citrate in catheter encrustation in patients with long-term indwelling catheters.
- Evaluation of urodynamic system devices (UDS) for the Centre of Evidence-Based Purchasing.
- Quality Control of UDS signals: a computerised method for measuring the quality of a UDS trace.
- Adoption of CT3000 (Urodynamics cuff test) into service delivery for National Centre for Technology Adoption.
- Use of the pelvic toner as a device to aid pelvic floor muscle training in the treatment of stress urinary incontinence in women.
- Living with a long-term catheter: examining needs, impact on quality of life and associated costs.
- Development of a catheter patient database and a network for BioMed.
- In vitro & clinical trials of a pH sensor to detect the early stages of catheter encrustation.
- Tackling Ageing Continence through Theory, Tools & Technology (TACT3): a collaborative study to reduce the impact of continence difficulties for older people, including the development of devices to detect urine odour and leakage.
- Study to evaluate a novel hydrophilic intermittent catheter.
- Construction & use of lux gene-expressing *Proteus mirabilis* strains to investigate the pathogenesis of urinary catheters & the bladder.
- Decision making criteria employed by healthcare professionals in choice of intermittent catheter.
- Categorising the change of shape of the functioning bladder.
- An investigation of the activity of electrochemically activated solution (ECAS) on urinary tract pathogens.
- Audit to assess patient satisfaction of the catheter clinic at Southmead Hospital.
- Development of a fluid dispenser for elderly & disabled people.
- An exploration of the experiences of older people living with a long-term urinary catheter.
- Evaluations of novel catheter coatings.
- Effect of long term catheterisation on caregivers.
- Bladder Information secondary to catheterisation: a possible role for local and systemic pro-inflammatory mediators.
- Catheter Response Tests - comparison of frequency response of catheters used in urodynamics.

### Uro-oncology

- An Investigation of methods for the detection of urinary tract cancers using volatile analyses.
- New prognostic biomarkers in prostate cancer.
- ProTect – study evaluating the effectiveness of 3 different treatments for prostate cancer.

- Does VEGF165b have an inhibitory effect on angiogenesis in transitional cell carcinoma of the bladder?
- Investigating a novel urine-based non-invasive screening test for prostate cancer based on an early morning urine sample
- Investigation on the genetics of prostate disease
- OTIS Outcome of Transposed Intestinal Segments Study for bladder replacement
- Mass spectrometry of urine to identify markers of prostate cancer
- Retrospective analysis of the outcomes of prostate cancer treatment
- Oncological outcome for locally advanced (pT3a) prostate cancer following radical prostatectomy alone with at least 5 years follow up
- Outcome of clinically localised prostate cancer managed with active surveillance
- Familial Prostate Cancer Epidemiology & Molecular Studies
- RADICALS - Radiotherapy & Androgen Deprivation in Combination after Local Surgery radical prostatectomy
- SORCE - Randomised phase 3 double-blind placebo controlled study examining the efficacy & tolerability of sorafenib in pts with resected primary renal cell carcinoma
- BOXIT - Bladder COX-2 Inhibition Trial
- Are metabolic factors and related regulators important determinants of prostate cancer progression
- An Investigation of Methods for the Detection of urinary tract cancers using volatile analyses
- Volatile organic compounds in the rapid diagnosis of bladder cancer

### Endourology

- Bipolar transurethral resection of prostate using saline - TURIS
- Randomised, controlled trial comparing spontaneous ureteric stone passage rates with tamsulosin versus placebo in the management of acute renal colic

### **Other Research**

**The Pelvic Floor Clinical Studies Group** is a multi-disciplinary collaboration of urology, gynaecology, care of the elderly, nursing and other professions relating to continence, aiming to achieve dialogue for consensus on research needs and clinical practice. It is aiming to drive the portfolio of research activity being run by the NIHR. Current initiatives are pump priming grants for clinical management of nocturia and another grant for mixed urinary incontinence. The latest initiative is a consensus statement of recurrent urinary tract infection, more such statements are planned for obstetric anal sphincter injury and use of bowel segments in the urinary tract.

**The 1<sup>st</sup> International Consultation on Incontinence Research Society (ICI-RS)** was held in Bristol in May 2009. ICI-RS was born out of discussion at the time of the 4<sup>th</sup> ICI (Paris, July 2008), which highlighted the need for a forum for expert discussion by research active individuals on the research and other needs in our fields of interest. A Steering Group was formed and in early 2009 experts were invited to become members and attend the meeting in May. In 2010 a series of review articles written as a direct output from this meeting will be published in a special edition of the *Neurology and Urodynamics Journal*. The 2<sup>nd</sup> ICI-RS meeting was held in Bristol in June 2010.

### **The BioMed Healthcare Technology Co-operative (HTC)**

The BioMed HTC is a Department of Health initiative, now in its 5<sup>th</sup> year. During the first 4 years a programme of specific projects were defined including the development of devices and products in the field of intractable urinary incontinence. The BioMed HTC now has a portfolio of over 30 collaborators grant funded and commercial projects designed to understand and improve the lives of patients with continence problems. A bid for further funding was submitted to the Department of Health and was successful in securing a further award of £175,000 for 2010.

In 2009 the Institute was in receipt of research grants from a number of bodies (listed on page 7 & 8 of the accounts). The BUI collaborates with a large number of organizations including local, national and international universities, commercial companies and other hospital departments both locally and nationally.

### Research Highlights

#### **ProTect Study**

This study which started in 1999, funded by the NIHR Health Technology Assessment programme, is an evaluation of the benefit of the early detection and comparison between 3 different treatments for prostate cancer. It is the largest randomised controlled trial for prostate cancer in the world, and Bristol is one of the largest of nine participating centres within the UK. 2008 marked the end of the recruitment stage of which approximately 485 men had been diagnosed with prostate cancer in Bristol alone. These patients will be followed-up until at least 2013.

### **International Consultation on Incontinence Modular Questionnaire (ICIQ)**

The ICIQ project, which started in 1998, has three primary aims for the assessment of lower pelvic dysfunction

- to promote wider use of questionnaires to standardise assessment of lower pelvic dysfunction and its impact on quality of life,
- to achieve this through the use of recommended high quality self-completion questionnaires according to evidence of validation,
- to facilitate communication in different patient settings and different patient groups

Fourteen questionnaires have been developed and validated so far. We have supplied over 2500 questionnaires for use in clinical practice and research throughout the world. We have eleven further questionnaires in development, including the development of a standardised urinary diary which will be available during 2011. We are now beginning to explore the electronic capability of the ICIQ. This is an exciting new direction for the study which we hope will increase its versatility and make it more accessible to clinicians and patients themselves.

### **Living with a Long Term Catheter (LTC); users' needs, quality of life and costs**

This study, which started in 2006, is designed to develop tools to assess quality of life and cost of LTC. The results will also be used to inform the design of new medical devices, and service provision. The study is due to finish in late 2010.

### **Quality Control of UDS signals: a computerised method for measuring the quality of a UDS trace.**

Urodynamics is a globally accepted and verified clinical test, the use of which is increasing as populations age. Clinical governance requires that quality control of this practice is regularly carried. However, protocols to assess and quantify this clinical practice do not currently exist. The aim of this project is to develop agreement across the urodynamic community on acceptable quality control indicators, automating the recognition of these. The project will lay the foundation for international standards in quality control of urodynamic traces and the scoring of that quality.

### **Development of a model to allow bladder function to be studied**

Using the large animal whole bladder organ bath, the aim is to establish an experimental set-up for the simultaneous assessment of afferent return from the isolated bladder, in addition to the current ability to detect changes in intravesical pressure. The new novel experimental whole bladder organ model could be applied for a wide range of Biomedical and Technology Development Research (including Biosensors development). The organ model can also be utilised in microbiological research looking at the progression of urinary tract infection (UTI) and the testing of newly identified pathophysiological compounds to further explore their role in generation of bladder pathology.

### **BUI Presentations, Publications and Awards**

Over 60 presentations were made at national and international meetings during the period. More than 40 papers were published in peer reviewed journals, together with editorials, letters, case reports and web publications. Other publications included a popular press article, production of an information booklet and contributions to various review publications.

## **EDUCATION, COURSES AND MEETINGS**

During the year the BUI ran both regular and new courses and meetings designed for postgraduate education and professional development in clinical and non-clinical disciplines. 18 courses were planned for the year, many forming part of our ongoing programme of training. 23 courses, seminars and meetings were run during the period. These included successful practical and lecture-based training courses in urodynamics, the management of the overactive bladder, female urology, robotic procedures and botox treatment in female urology devices. Delegates to these courses were primarily doctors and other health professionals.

### **Urodynamics Training Courses**

The BUI offers a variety of courses in Urodynamics. This procedure is a test that is done to assess bladder function, and plays an important part in the diagnosis and subsequent management of patients bladder dysfunction. The tests are performed within a urology outpatient department by nurses, technicians and doctors. Training courses offered by the BUI combine the knowledge and experience of the specialists from our own Urodynamics Unit with new developments and procedures. Nearly 60 delegates attended the 26th Basic Urodynamics course, (49 in 2008). The Certificate courses, run in Bristol and other hospitals within the UK, are tailored to individuals' needs, and a certificate of competence is awarded after successful completion of a multiple choice questionnaire exam. Places are limited and most courses run to full capacity. 130 attended the Certificate in Urodynamics Courses in 2009 (132 in 2008) and it continues to attract delegates nationally and internationally who want to enhance their practical knowledge. The Consolidation UDS course is aimed at Healthcare Professionals regularly undertaking urodynamics studies who have already attended either the Basic or any of the Certificate courses affiliated to the Bristol Urological Institute. This was the 3<sup>rd</sup> course which had been designed to address the needs expressed in the Certificate course feedback. The course includes "hands on" sessions and delegates were able to choose 3 workshops to attend. 9 delegates attended the course.

The Expert in UDS course successfully ran in November. There was no course in 2008 due to clinical commitments of the faculty hence was attended by 24 delegates who had eagerly awaited this intensive course. The Institute will aim to run all of these courses in 2010.

#### **Other Courses included:**

**Botulinum Toxin Masterclass** This first masterclass introduced delegates to the history of Botulinum, the mechanism of action and types of Botulinum Toxin, its use in OAB, LUTS and method of delivery. The course included live demonstrations from theatres and hands-on workshops on dummies. 10 delegates attended the day. It is likely that this course will be run again in the future.

The Urogynaecology & Female Urology 3-day course (held once a year) was attended by 14 delegates. The days consisted of live operative demonstrations, video presentations and lectures/tutorials. The course placed the surgical treatments in the context of the spectrum of management of stress incontinence, pelvic organ prolapse and functional ano-rectal conditions. Feedback received from delegates was very positive.

Three groups of Scandinavian Urology Specialists came to Bristol in Sept, October and December for a 2-day meeting on the current surgical procedures and drugs available for the treatment of stress incontinence and overactive bladder. These were led by Professors Paul Abrams and Marcus Drake and sponsored by Pfizer Ltd. Three further courses are planned for the 6 months of 2010.

The BUI ran a Medical Devices Clinical Study Day. The Aim of the Course was to lead delegates through the regulatory and clinical aspects of conducting device studies with particular emphasis on the difference between device and drug studies. The course was aimed at anyone involved or interested in the development, evaluation and adoption of medical devices, including clinical research professionals, NHS R&D staff, NHS Innovations hubs, university researchers, medical device company representatives and product development staff. Tuition was provided by the Institute of Clinical Research, who through a blend of trainer input, group exercise and practical workshops guided delegates through the fascinating world of medical devices. 21 delegates attended the course 17 of whom were NBT staff.

The 15<sup>th</sup> Annual Scientific Meeting, entitled Robotics, Recertification and the Real World, was held in January 2009 and reported in the 2008 Trustees Report.

16<sup>th</sup> annual meeting was held in for November, entitled Innovations in Urology and its aim was to be a showcase of the various research activities of the Institute within the core themes of bladder function, uro-oncology and endourology. A successful meeting that was held off the hospital site for the first time, took on a new format inviting delegates to contribute to a poster session. The Annual meeting was preceded by 2 days of surgical demonstrations held in the BUI. This included 2 live robotic cases, one performed in the hospital and the second via video link in Florida.

The 17<sup>th</sup> Annual meeting planned for November 2010 will incorporate the Autumn meeting of the SW Urologists which should encourage many from the region to attend.

#### **FUNDRAISING**

The BUI continues to grow with support from individual, companies and organisations. Fundraising events such as a sponsored bike ride from Bristol to Cornwall, a 24 hour golf marathon, rugby match and many others raised over £25,000 for the BUI Prostate Cancer Appeal. Some of these funds will be specifically used for the purchase of much needed medical equipment.

The BUI continues to be adopted by various organizations as their charity of the year.

The BUI secured 5 places in the 2009 Flora London Marathon and had 6 runners in total raising funds. A team of 3 took part in the Bristol Half Marathon on behalf of the BUI.

A full time Fundraising and Marketing Manager was appointed at the beginning of September, a new fundraising committee group of volunteers was established. A fundraising strategy has been implemented, BUI logos and branding have been improved and the website improvements are ongoing.

Run for the Future, organised by Bristol Rotary continues to grow with more runners than before, approximately 1000 runners took part in this year's run. Carol Vorderman a well known celebrity led the countdown to the start of the race, creating greater media exposure for the need for more research into prostate cancer and awareness.

The funds raised from this event support 2 research studies, Analysis of Volatiles from urine and New prognostic markers in prostate cancer, both of which are collaborations between BUI and UWE.

John Baylis Limited donated £10,000 towards BUI Prostate Cancer Appeal. The Coutts Charitable Trust made a donation to the BUI along with others charitable trusts. Many other companies, individuals and patients fundraised throughout the year with parachute jumps, anniversaries, birthdays and other special events.



## **Fundraising Plans for the Future**

Fundraising events shall increase throughout next year with an annual BUI Ball, a corporate golf event, rugby match as well as Run for the Future, ensuring the BUI has a mixture of funding from a number of sources. The Fundraising and Marketing Manager will approach more charitable trusts for funding. A fundraising leaflet will be introduced which will explain why the BUI needs support, what the BUI does, ways to be involved and information on awareness and support. Recycling fundraising will also be introduced into the BUI, the recycling envelopes are a good resource for awareness and at the same time helping the environment. The Fundraising and Marketing Manager will approach, network and engage with more local business and organisations within the South West of England for support.

## **Plans for Future Periods**

The BUI has a close association with North Bristol NHS Trust (NBT), with a majority of staff employed through the Trust and patient-based research projects contracted and administered through the Trust. The plans for the new hospital on the Southmead site will impact on the BUI building and activities. With this in mind, NBT commissioned an initial report late in 2009 to assess the financial viability of BUI as a stand alone operation independent of the NBT and to determine the most appropriate structure for the BUI in the future. The findings of this report were presented to the Trustees in January 2010. The BUI recognises it needs a clear strategy to place itself within the proposed hospital redevelopment and the Trust has already committed itself to incorporating the BUI into the new hospital and associated facilities. BUI activity itself is developing, and the current charitable status of the organisation limits its potential commercial activity. Therefore it was agreed in principle that an outline proposal for incorporation into North Bristol NHS be put to the Trust Board.

On 27<sup>th</sup> May 2010 the Trust Board reviewed and approved the proposal of integration of the BUI into NBT.

On 1<sup>st</sup> June 2010 all BUI interests were transferred into mainstream NBT NHS business, together with fundraising activities, which are to be managed as a charitable funds portfolio within the overall NBT Charitable Funds.

It is important to preserve and build on its name and identity and, to this end, the BUI will retain and develop its brand within the NBT management structure. The present BUI building and other assets will be donated to NBT under a legally binding Deed of Gift, and the NBT will honour a previous agreement to re-provide BUI facilities within the new hospital and associated facilities.

## **Financial Review**

During the year the principle funding sources of the charity were from educational courses, research projects and fundraising.

The charity ran a series of successful training courses throughout the year which raised gross income of £165,346 (2008 £188,394). Associated course costs were £198,593 (2008 £179,551), resulting in a deficit of £33,247 (2008 surplus £8,843).

Research activities generated income of £725,291 (2008 £587,677), including £668,431 (2008 £586,250) relating to research and salary grants for specific projects which is analysed in note 4 to the financial statements. Research expenditure was £552,454 (2008 £405,531), resulting in a surplus of £172,837 (2008 £182,146).

Fundraising activities generated income of £79,683 (2008 £58,732). Associated costs were £67,733 (2008 £52,681), which resulted in a surplus of £11,950 (2008 £6,051). The Rotary Club of Bristol organised the third Run for the Future in September in Bristol, in aid of the BUI Prostate Cancer Care and Research Appeal, which raised income of £72,617 (2008 £50,473). In April, a team of 7 runners participated in the Flora London Marathon and raised £5,836 (2008 £6,829).

Voluntary income donated during the year amounted to £77,298 (2008 £77,940) and Investment income amounted to £12,297 (2008 £41,207).

Net surplus funds for the year amount to £176,979 (2008 £272,220) which, when added to the fund balances brought forward as at 1 January 2009 of £2,957,277 gives funds balances carried forward at 31 December 2009 of £3,134,256.

### **Reserves policy**

The Trustees have established the level of reserves (funds that are freely available) required to allow the charity to continue operating for 12 months, if for any reason expected income is not forthcoming. In determining the level of reserves, the trustees have taken into account the annual operating costs as shown in the Statement of Financial Activities, after adjusting for depreciation and exceptional items. All other unrestricted operating costs, including course costs, research and fundraising costs have been incorporated within the reserves calculation on the assumption that these will be required for the courses and activities scheduled within the subsequent 12 month period. The trustees therefore consider the ideal level of reserves to be £225,000.

The actual reserves at 31 December 2009 were £6,455, which is significantly lower than the target level.

The Trustees are aware of the shortfall in reserves at the year end and are currently reviewing all unrestricted income streams, concentrating on maximising the surplus of the educational courses and general fundraising. The trustees are also reviewing restricted reserve fund surpluses which contain an element which can be used for administration and general overhead purposes and funds will be utilised where available

#### **Statement of Disclosure of Information to Auditors**

In so far as the trustees are aware

- there is no relevant audit information of which the charitable company's auditor is unaware, and
- the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information

#### **Statement of Trustees' Responsibilities**

The trustees (who are also directors of BUI for the purposes of company law) are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice)

Company law requires the trustees to prepare financial statements for each financial year, which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for the year. In preparing these financial statements, the trustees are required to

- select suitable accounting policies and then apply them consistently,
- observe the methods and principles in the Charities SORP,
- make judgments and 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 operation

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company 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 charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

#### **Voluntary help**

The trustees recognize and acknowledge the many individuals who have voluntarily assisted the Charity in achieving its aims. Particular thanks go to the patient and carers who give their time and expertise on research advisory groups and who help with the production of communication materials. The Trustees also appreciate the contribution the Rotarians of Bristol make towards the organization and running of the Run for the Future.

#### **Auditors**

A resolution proposing that Goldwyns (Bristol) Limited be reappointed as auditors of the charity will be put to the Annual General Meeting.

#### **BY ORDER OF THE TRUSTEES**



Mr T Pearce-Trustee

20<sup>th</sup> September 2010

## **REPORT OF THE INDEPENDENT AUDITORS TO THE MEMBERS OF THE BRISTOL UROLOGICAL INSTITUTE**

We have audited the financial statements of The Bristol Urological Institute for the year ended 31 December 2009, which comprise of the Statement of Financial Activities (including Summary Income and Expenditure Account), the Balance Sheet, and the related notes. These financial statements have been prepared under the historical cost convention and the accounting policies set out therein and the requirements of the Financial Reporting Standard for Smaller Entities (effective April 2008).

This report is made solely to the charitable company's members, as a body, in accordance with Section 495 and 496 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditors' 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 its members as a body, for our audit work, for this report, or for the opinions we have formed.

### **Respective responsibilities of trustees and auditors**

The Trustees' (who are also the directors of The Bristol Urological Institute for the purpose of company law) are responsible for the preparation of the Trustees' Annual Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Principles) and for being satisfied that the financial statements give a true and fair view as set out in the Statement of Trustees' Responsibilities.

Our responsibility is to audit the financial statements in accordance with relevant legal and regulatory requirements and International Standards on Auditing (UK and Ireland).

We report to you our opinion as to whether the financial statements give a true and fair view, have been properly prepared in accordance with United Kingdom Generally Accepted Accountancy Practice (UK GAAP) and have been prepared in accordance with the Companies Act 2006. We also report to you if, in our opinion, the information given in the Trustees' Annual Report is consistent with the financial statements.

In addition, we report to you if in our opinion the charity has not kept adequate accounting records and returns, if the charity's financial statements are not in agreement with the accountancy records and returns, if we have not received all the information and explanations we require for our audit, or if certain disclosures of trustees' remuneration specified by law are not made.

We read the Trustees' Annual Report and consider the implications for our report if we become aware of any apparent misstatements within it.

### **Basis of audit opinion**

We conducted our audit in accordance with International Standards on Auditing (UK and Ireland) issued by the Auditing Practices Board. An audit includes examination, on a test basis, of evidence relevant to the amounts and disclosures in the financial statements. It also includes an assessment of the significant estimates and judgements made by the trustees in the preparation of the financial statements, and of whether the accounting policies are appropriate to the charitable company's circumstances, consistently applied and adequately disclosed.

We planned and performed our audit so as to obtain all the information and explanations which we considered necessary in order to provide us with sufficient evidence to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or other irregularity or error. In forming our opinion we also evaluated the overall adequacy of the presentation of information in the financial statements.

**REPORT OF THE INDEPENDENT AUDITORS TO THE MEMBERS OF  
THE BRISTOL UROLOGICAL INSTITUTE**

**Opinion**

In our opinion

- The financial statements give a true and fair view of the state of the charitable company's affairs as at 31 December 2009, and of its incoming resources and application of resources, including its income and expenditure, in the year then ended,
- The financial statements have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice applicable to Smaller Entities, and
- The financial statements have been prepared in accordance with the Companies Act 2006, and
- The information given in the Trustees' Annual Report is consistent with the financial statements



**Christopher Brown FCA  
Senior Statutory Auditor**

For and on behalf of  
Goldwyns (Bristol) Limited  
Registered Auditor  
Chartered Accountants  
9 Portland Square  
BRISTOL  
BS2 8ST

Dated 21/09/2010

**BRISTOL UROLOGICAL INSTITUTE**

**STATEMENT OF FINANCIAL ACTIVITIES  
(INCLUDING INCOME & EXPENDITURE ACCOUNT)  
FOR THE YEAR ENDED 31 DECEMBER 2009**

	Notes	Unrestricted Year ended 31 12 09 £	Restricted Year ended 31 12 09 £	Total Year ended 31 12 09 £	Total Year ended 31 12 08 £
<b>Incoming resources</b>					
<i>Incoming resources from generated funds</i>					
Voluntary income	2	11,159	66,139	77,298	77,940
Activities for generating funds	2	7,066	72,617	79,683	58,732
Investment income	2	12,294	3	12,297	41,207
<i>Incoming resources from charitable activities</i>					
Education and courses	3	147,675	17,671	165,346	188,394
Research and trials	3	7,285	718,006	725,291	587,677
<i>Other incoming resources</i>		-	-	-	-
<b>Total incoming resources</b>		<u>185,479</u>	<u>874,436</u>	<u>1,059,915</u>	<u>953,950</u>
<b>Resources expended</b>					
<i>Costs of generating funds</i>					
Fundraising	5	34,352	33,381	67,733	52,681
<i>Costs of charitable activities</i>					
Education and courses	6	167,537	31,056	198,593	179,551
Research and trials	6	107,917	444,537	552,454	405,531
<i>Governance</i>	7	64,156	-	64,156	43,967
<b>Total resources expended</b>		<u>373,962</u>	<u>508,974</u>	<u>882,936</u>	<u>681,730</u>
<b>Net incoming/(outgoing) resources before transfers</b>		<u>(188,483)</u>	<u>365,462</u>	<u>176,979</u>	<u>272,220</u>
<b>Net movement in funds and net income for the year</b>		(188,483)	365,462	176,979	272,220
Fund balances brought forward at 1 January 2009		194,938	2,762,339	2,957,277	2,685,057
<b>Fund balances carried forward at 31 December 2009</b>		<u>6,455</u>	<u>3,127,801</u>	<u>3,134,256</u>	<u>2,957,277</u>

**BRISTOL UROLOGICAL INSTITUTE**

**BALANCE SHEET AS AT  
31 DECEMBER 2009**

		2009		2008 As restated	
	Notes	£	£	£	£
<b>FIXED ASSETS:</b>					
Tangible assets	12		1,759,248		1,779,839
<b>CURRENT ASSETS:</b>					
Debtors	13	301,949		125,347	
Cash at bank and in hand		<u>1,393,090</u>		<u>1,156,024</u>	
			1,695,039		1,281,371
<b>CREDITORS:</b> Amounts falling due within one year	14	<u>240,031</u>		<u>103,933</u>	
<b>NET CURRENT ASSETS:</b>			<u>1,455,008</u>		<u>1,177,438</u>
<b>TOTAL ASSETS LESS CURRENT LIABILITIES:</b>			3,214,256		2,957,277
Provisions for liabilities	15		(80,000)		-
Net assets			<u>3,134,256</u>		<u>2,957,277</u>
<b>FUNDS:</b>					
Unrestricted funds	16		6,455		194,938
Restricted funds	16		<u>3,127,801</u>		<u>2,762,339</u>
			<u>3,134,256</u>		<u>2,957,277</u>

These financial statements have been prepared in accordance with the special provisions of Part VII of the Companies Act 2006 relating to small companies and with the Financial Reporting Standard for Smaller Entities (effective April 2008)

**ON BEHALF OF THE TRUSTEES:**

Mr T Pearce-Trustee

Mr A England- Trustee

Approved by the Trustees on 20 09 2010

## **BRISTOL UROLOGICAL INSTITUTE**

### **NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2009**

#### **1. ACCOUNTING POLICIES**

##### **Basis of Preparation**

The financial statements have been prepared under the historical cost convention, in accordance with the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities" issued in 2005 applicable accounting standards and the Companies Act 2006

##### **Company Status**

The charity is a company limited by guarantee. The members of the charity are the trustees named on page 1. In the event of the charity being wound up the liability in respect of the guarantee is limited to £1 per member of the charity.

##### **Fund Accounting**

Unrestricted funds are general funds which are available for use at the discretion of the trustees in furtherance of the general objectives of the charity, and which have not been designated for other purposes.

Restricted funds are funds that are to be used in accordance with specific restrictions imposed by donors or which have been raised by the charity for particular purposes. The cost of raising and administering such funds are charged against the specific fund. The aims and uses of the restricted funds are set out in note 16 of the financial statements. Investment income is allocated to the appropriate fund.

##### **Foreign Currencies**

Transactions in foreign currencies are recorded at the rate ruling at the date of transaction. Monetary assets and liabilities are retranslated at the rate of exchange ruling at the balance sheet date. All differences are taken to the Statement of Financial Activities.

##### **Pension costs**

The charity contributes to a defined contribution pension scheme. Contributions payable for the year are charged in the Statement of Financial Activities.

##### **Incoming Resources**

Voluntary income is recognised in the statement of Financial Activities where there is entitlement, certainty of receipt and the amount can be measured with sufficient reliability.

Income from generated activities is recognised as earned. Investment income is recognised on a receivable basis. Income from charitable activities includes grant income receivable and course fees and sponsorship income. Grant income included in this category provides funding to support research and trial activities and is recognised where there is entitlement, certainty of receipt and the amount can be measured with sufficient reliability. Course fees and sponsorship income are recognised when the courses are held.

Where equipment is provided to the charity as a donation that would normally be purchased from our suppliers, this contribution is included in the financial statements at an estimate based on the value of the contribution to the charity. Donated services and facilities are analysed in note 2.

##### **Resources Expended**

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the activity. Where costs cannot be directly attributed to particular headings and activities they have been allocated to activities on a basis consistent with use of the resources.

Fundraising costs are those incurred in seeking voluntary contributions and do not include the costs of disseminating information in support of the charitable activities.

Charitable activities include expenditure associated with the education and courses and research and trials and includes both the direct costs and the support costs relating to these activities.

Governance costs include those incurred in the governance of the charity and its assets and are primarily associated with constitutional and statutory requirements.

Support costs include central functions that have been allocated to activity cost categories on a basis consistent with the use of resources, e.g. staff costs by their time spent and other costs by their usage.

**Continued...**

# BRISTOL UROLOGICAL INSTITUTE

## NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2009

### 1. ACCOUNTING POLICIES continued.....

#### Taxation

The charity is exempt from income tax and corporation tax on its charitable activities. The charity is not registered for VAT and is unable to recover VAT on its purchases. All irrecoverable VAT is included within the appropriate headings.

#### Tangible fixed assets and depreciation

Tangible fixed assets are capitalised and included at cost including any incidental expenses of acquisition. Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life.

Buildings	- 5% on cost
Office equipment	- 15% on reducing balance
Plant and equipment	- 25% on reducing balance

Included within leasehold interest in buildings is the new purpose-built building, from which the charity operates. The total cost of this building as at 31 December 2009 is £1,639,488. Depreciation has not been provided in respect of the interest in this leasehold building. This is a departure from the Financial Reporting Standards for Smaller Entities. In the opinion of the trustees, the buildings useful economic life is so long that the depreciation charge would be immaterial.

### 2. ANALYSIS OF INCOMING RESOURCES FROM GENERATED FUNDS

	Year ended 31 12 09	Year ended 31 12 08
<b>Voluntary income</b>		
Individual donors	58,525	37,010
Corporate donors	18,773	30,930
Donated equipment	-	10,000
	-----	-----
<b>Total voluntary income</b>	<b>77,298</b>	<b>77,940</b>
	=====	=====
<b>Activities for generating funds</b>		
London Marathon	5,836	6,829
Run for the Future	72,617	50,473
Subscriptions	1,230	1,430
	-----	-----
<b>Total activities for generating funds</b>	<b>79,683</b>	<b>58,732</b>
	=====	=====
<b>Investment income</b>		
Interest receivable	12,297	41,207
	-----	-----
<b>Total investment income</b>	<b>12,297</b>	<b>41,207</b>
	=====	=====

### 3. ANALYSIS OF INCOMING RESOURCES FROM CHARITABLE ACTIVITIES

	Note	Education and Courses	Research and Trials	Year ended 31 12 09	Year ended 31 12 08
<b>Grant funding receivable</b>					
Research, study and salary grants	4	-	668,431	668,431	586,250
<b>Other income receivable for charitable activities</b>					
Course and meeting fees and sponsorship income		153,903	2,195	156,098	181,048
Course, travel and subsistence grants for researchers		11,443	-	11,443	7,346
Private patient receipts		-	-	-	1,427
Fund overhead recharges		-	54,665	54,665	-
		-----	-----	-----	-----
		<b>165,346</b>	<b>725,291</b>	<b>890,637</b>	<b>826,071</b>
		=====	=====	=====	=====



**BRISTOL UROLOGICAL INSTITUTE**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2009**

**4. ANALYSIS OF RESEARCH, SALARY AND STUDY GRANTS RECEIVABLE**

	Functional Urology £	Urological Cancers £	BioMed £	Total 2009 £	Total 2008 £
Aarhus University	-	-	-	-	135,317
Albyn Medical SL	3,150	-	-	3,150	-
Allergan	15,000	-	-	15,000	14,350
AMS Lockbox	-	-	-	-	54,483
Andromeda Medizinische	3,150	-	-	3,150	321
Astellas Pharma	167,808	-	-	167,808	10,000
Astra Zeneca	-	2,400	-	2,400	-
Bain Consulting	-	-	-	-	350
Bard Limited	-	-	-	-	500
Bath Institute Medical Engineering	822	-	-	822	12,800
BioXell	-	-	-	-	500
Charles Hayward Foundation	-	-	-	-	10,130
CliniMed Limited	-	-	-	-	7,300
Contura International	-	-	-	-	1,993
Coloplast Limited	1,000	-	-	1,000	5,343
Department of Health	20,000	-	-	20,000	-
DSM Biomedical materials	-	-	-	-	8,889
European Technology for Business Ltd	-	-	-	-	1,000
Exomedica Limited	-	-	-	-	250
Ferring Pharmaceuticals	40,000	-	-	40,000	-
GlaxoSmithKline	5,000	29,539	-	34,539	-
GT Urological LLC	993	-	-	993	-
Health Servs Research Unit	-	-	-	-	5,146
Healthy Aims	-	-	-	-	10,650
Hollister	-	-	13,203	13,203	243
Icon	-	-	-	-	3,000
Ispen Pharmaceuticals	500	-	-	500	-
J Hughes Enterprises	-	-	-	-	20,000
James Tudor Foundation	-	-	10,000	10,000	-
Laborie	16,382	-	-	16,382	-
MAPS	-	-	-	-	5,454
MediPlus	-	-	-	-	75
Medi Watch Plc	3,150	-	-	3,150	-
MediWales	-	-	-	-	1,500
Medical Measurement Systems	3,150	-	-	3,150	4,928
MDTi	-	-	-	-	2,250
NBT NHS Trust	6,232	-	191,298	197,530	140,011
Neotec Medical Equipment	-	-	-	-	-
Novartis	19,998	-	-	19,998	-
Ono Pharma	5,947	-	-	5,947	48,207
Pfizer	60,000	-	-	60,000	12,117
Principality Medical	-	-	-	-	500
Prostate Cancer Foundation	-	-	-	-	20,500
Rochester Medical	-	-	14,615	14,615	8,915
Rosetrees Trust	-	-	-	-	5,000
Royal College of Surgeons	-	-	-	-	10,940
Schwartz Pharma	-	-	-	-	990
Serenity Pharma	1,000	-	-	1,000	-
Smiths Medical International	-	-	-	-	250
Solution Project Management	-	-	2,083	2,083	1,914

**Continued...**

**BRISTOL UROLOGICAL INSTITUTE**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 DECEMBER 2009**

**4. ANALYSIS OF RESEARCH SALARY AND STUDY GRANTS RECEIVABLE continued.....**

	Functional Urology £	Urological Cancers £	BioMed £	Total 2009 £	Total 2008 £
Technology Strategy Board	-	-	-	-	2,084
True North Innovation	-	-	-	-	50
Tyco Healthcare Group	-	-	-	-	5,500
University of Bristol	1,060	-	-	1,060	-
University of Southampton	-	-	330	330	-
University of Warwick	-	-	456	456	-
Vantia Limited	1,000	-	-	1,000	-
Verathon Medical (UK) Limited	29,165	-	-	29,165	12,500
	<u>404,507</u>	<u>31,939</u>	<u>231,985</u>	<u>668,431</u>	<u>586,250</u>

**5. ANALYSIS OF COSTS OF GENERATING FUNDS**

	Year ended 31 12 09 £	Year ended 31 12 08 £
London Marathon costs	1,567	1,468
Prostate Cancer Care appeal including Run for the Future	32,963	25,176
Support costs (note 7)	15,933	3,169
Marketing and consultancy costs	16,288	22,581
Other costs	982	287
	<u>67,733</u>	<u>52,681</u>

**6. ANALYSIS OF COSTS OF CHARITABLE ACTIVITIES**

	Education and courses £	Research and trials £	Total Year ended 31 12 09 £	Total Year ended 31 12 08 £
Direct course and conference expenses	82,620	-	82,620	81,931
Advertising of courses	921	-	921	1,841
Research costs	31,056	416,063	447,119	372,363
Depreciation	9,875	27,381	37,256	39,014
Support costs (note 7)	74,121	109,010	183,131	89,933
	<u>198,593</u>	<u>552,454</u>	<u>751,047</u>	<u>585,082</u>

# BRISTOL UROLOGICAL INSTITUTE

## NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2009

### 7. ANALYSIS OF SUPPORT COSTS

	Education and Courses £	Research and Trials £	Fundraising £	Governance £	Total Year ended 31 12 09 £	Total Year ended 31 12 08 £
Archiving	-	1,274	-	-	1,274	-
Business rates	1,597	1,597	-	1,598	4,792	16,755
Administration salaries	36,532	52,132	10,462	18,715	117,841	53,634
Secretarial costs	-	7,310	-	-	7,310	16,073
Recruitment costs	-	573	832	-	1,405	-
Telephone	64	1,872	-	-	1,936	1,731
Printing, postage & stationery	2,243	6,721	2,015	533	11,512	11,829
Information technology	1,593	2,253	2,205	695	6,746	6,283
External audit	-	-	-	13,179	13,179	14,377
Legal and professional fees	-	-	-	1,982	1,982	2,342
Insurance	3,039	3,039	-	788	6,866	6,854
Sundry	428	565	-	-	993	2,250
Finance charges	1,414	1,045	419	-	2,878	2,217
Repairs and maintenance	-	456	-	-	456	1,703
Training costs	544	-	-	-	544	1,021
Catering	-	3,506	-	-	3,506	-
NBT service charge	26,667	26,667	-	26,666	80,000	-
	<u>74,121</u>	<u>109,010</u>	<u>15,933</u>	<u>64,156</u>	<u>263,220</u>	<u>137,069</u>

### 8. TRUSTEES' REMUNERATION

Out of pocket expenses were reimbursed to trustees in their capacities as researchers for the charity as follows

	Total year ended 31 12 09 Number	Total year ended 31 12 09 £	Total year ended 31 12 08 Number	Total year ended 31 12 08 £
Course, travel and accommodation costs	1	3,566	2	1,772
		<u>3,566</u>		<u>1,772</u>

The trustees neither received nor waived any emoluments during the period (2008 £nil)

### 9. AUDITORS REMUNERATION

The auditors' remuneration consists of the following

	Total year ended 31 12 09 £	Total year ended 31 12 08 £
For audit services	8,597	9,080
For accounting services	2,539	4,653
For provision of accounting software & support	2,043	2,406
	<u>13,179</u>	<u>16,139</u>

**BRISTOL UROLOGICAL INSTITUTE**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 DECEMBER 2009**

**10. STAFF COSTS (INCLUDING RESEARCHERS SALARIES)**

	Total year ended 31 12 09 £	Total year ended 31 12 08 £
Salaries	153,694	188,122
Social security costs	11,335	14,795
Pension costs	19,897	21,419
Researcher and technician salary grants	199,905	101,916
	----- 384,831 =====	----- 326,252 =====

No employee earned more than £60,000 during the year

The number of employees, analysed by function, was

	Total year ended 31 12 09 Number	Total year ended 31 12 08 Number
Researchers (full and part time)	5	11
Management and administration of the charity	3	3
	----- 8 =====	----- 14 =====

The average number of full time equivalent employees during the year was 5 (2008 6)

**11. PENSION COSTS**

The charity contributes to a defined contribution pension scheme and contributions are charged in the statement of financial activities as they accrue. The charge for the period was £19,897 (2008 £21,419)

**12. TANGIBLE FIXED ASSETS**

	Leasehold Interest in Buildings £	Office Equipment £	Plant & Equipment £	Total £
<b>COST</b>				
At 1 January 2009	1,670,051	91,432	254,482	2,015,965
Additions	-	9,229	7,433	16,662
Disposals	-	(10,797)	-	(10,797)
	-----	-----	-----	-----
At 31 December 2009	1,670,051	89,864	261,915	2,021,830
	=====	=====	=====	=====
<b>DEPRECIATION</b>				
At 1 January 2009	19,461	49,924	166,741	236,126
Charge for year	1,528	6,848	23,793	32,169
Eliminated on Disposals	-	(5,713)	-	(5,713)
	-----	-----	-----	-----
At 31 December 2009	20,989	51,059	190,534	262,582
	=====	=====	=====	=====
<b>NET BOOK VALUE</b>				
At 31 December 2009	1,649,062	38,805	71,381	1,759,248
	=====	=====	=====	=====
At 31 December 2008	1,650,590	41,508	87,741	1,779,839
	=====	=====	=====	=====

**BRISTOL UROLOGICAL INSTITUTE**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 DECEMBER 2009**

**13. DEBTORS**

Amounts falling due within one year

	2009	2008
	£	£
Other debtors	290,543	119,249
Prepayments	11,406	6,098
	<u>301,949</u>	<u>125,347</u>

**14. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR**

	2009	2008
	£	£
Other creditors	156,878	69,546
Accruals and deferred income	83,153	34,387
	<u>240,031</u>	<u>103,933</u>

**15. PROVISIONS FOR LIABILITIES**

	2009	2008
	£	£
Other provision - North Bristol NHS Trust Estates Services Charges	80,000	-

**16. STATEMENT OF FUNDS**

	At 31 December 08	Income	Expenditure	Transfers	At 31 December 09
	£	£	£	£	£
<b>Unrestricted funds:</b>					
General fund	194,938	185,479	373,962	-	6,455
<b>Total unrestricted funds</b>	<u>194,938</u>	<u>185,479</u>	<u>373,962</u>	<u>-</u>	<u>6,454</u>
<b>Restricted funds:</b>					
BioMed	241,863	286,878	93,013	-	435,728
Building	1,639,488	-	-	-	1,639,488
Endourology	22,117	100	5,917	10,057	26,357
Functional Urology	566,467	417,582	326,088	(10,057)	647,904
Urological Cancers	292,404	169,876	83,956	-	378,324
<b>Total restricted funds</b>	<u>2,762,339</u>	<u>874,436</u>	<u>508,974</u>	<u>-</u>	<u>3,127,801</u>
<b>Total funds</b>	<u>2,957,277</u>	<u>1,059,915</u>	<u>882,936</u>	<u>-</u>	<u>3,134,256</u>

**Continued...**

**BRISTOL UROLOGICAL INSTITUTE**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 DECEMBER 2009**

**16. STATEMENT OF FUNDS continued.....**

The General fund represents the free funds of the charity, which are not designated for particular purposes

The building fund represents the construction and equipping costs of the purpose built building, from which the charity operates

The Endourology Fund provides support for research staff within this speciality and facilitates their attendance at national and international meetings to further their education

The BioMed fund supports research and the development of new technologies and devices for the management of urinary continence

The Urological Cancers fund provides resources to assist with the research into the effective treatment of prostate cancer

The Functional Urology fund provides support for research staff working in the field of benign prostate disease, lower urinary tract dysfunction, andrology and all aspects of female reconstructive urology

**Transfers between funds**

It was identified during the year that research income of £10,057 received and banked by the PA Fund (which is now part of Functional Urology) in the year ended 30 June 1999 was in fact income due to the Endourology Fund. A transfer has been made as shown above, to update the closing fund balances for this adjustment. The total restricted fund balance has not changed as a result.

**17. ANALYSIS OF NET ASSETS BETWEEN FUNDS**

	Unrestricted Funds £	Restricted Funds £	Total Funds £
<b>Fund Balances at 31 December 2009 are represented by:</b>			
Tangible fixed assets	72,148	1,687,100	1,759,248
Current assets	95,541	1,599,498	1,695,039
Current liabilities	(161,234)	(158,797)	(320,031)
	-----	-----	-----
<b>Total Net Assets</b>	<b>6,455</b>	<b>3,127,801</b>	<b>3,134,256</b>
	=====	=====	=====

**18. RELATED PARTY TRANSACTIONS**

The charity paid legal fees of £1,903 (2008 £2,292) to Burges Salmon LLP, a firm in which P C Davey, a trustee, is a partner. These fees related to company secretarial work, and were incurred on an arm's length basis, with appropriate safeguards in place to avoid conflicts of interest.

**19. CONTROLLING PARTY**

The charity is under the joint control of the trustees.

**20. POST BALANCE SHEET EVENTS**

With effect from 01 June 2010 the activities of the charity have been incorporated into the North Bristol NHS Trust, as detailed in the Deed of Gift dated 06 July 2010. The charity has therefore ceased to operate with effect from 01 June 2010 and has transferred its charitable business and charitable assets to the Trust in order for the Trust to continue with its charitable business and activities.