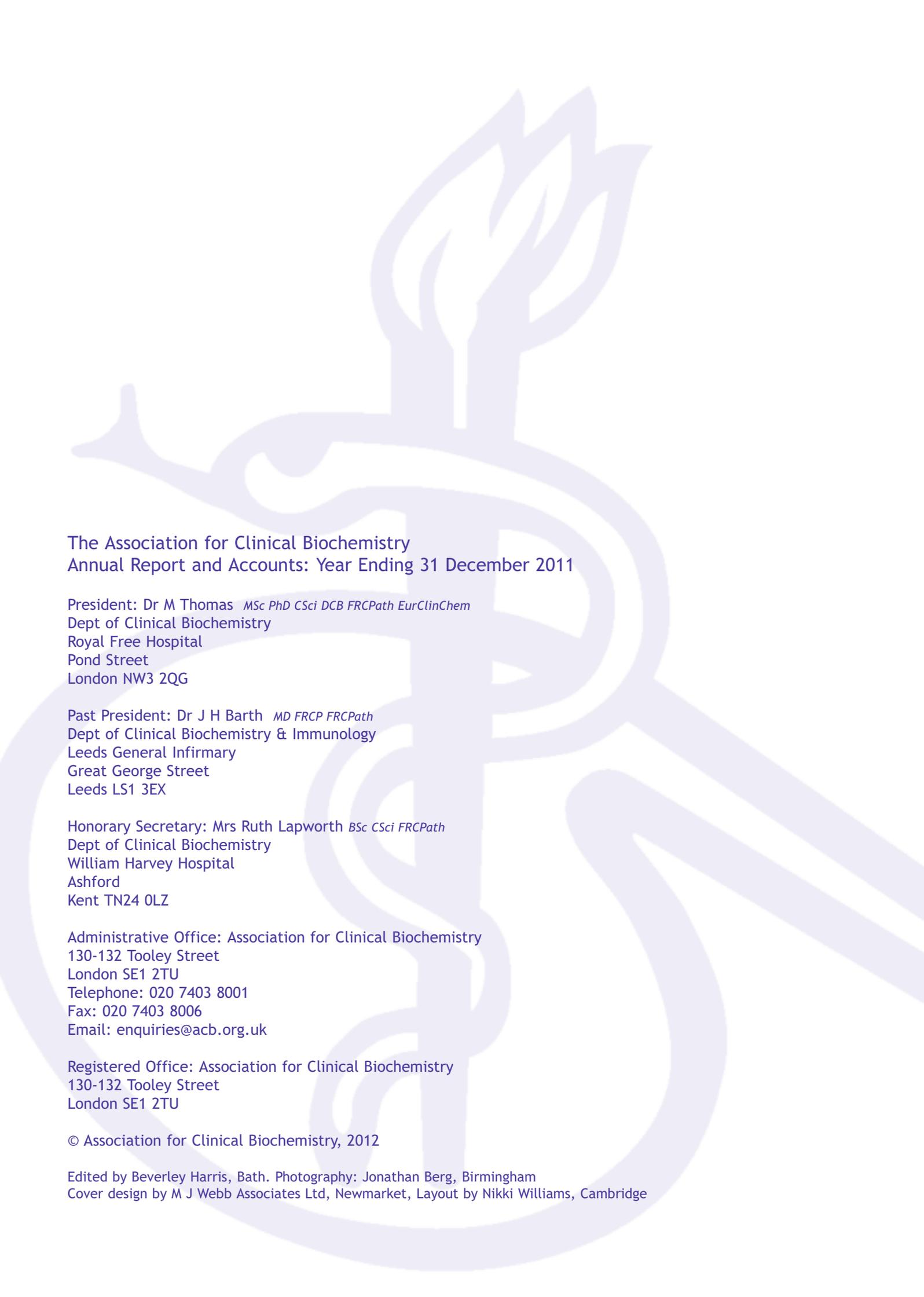


The Association for
Clinical Biochemistry

**Annual Report
& Accounts 2012**



The Association for Clinical Biochemistry
Annual Report and Accounts: Year Ending 31 December 2011

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2 Introduction

The beginning of last year saw social commentators suggesting that the latest recommendations for government reforms would signal one of the biggest upheavals for the National Health Service since it was formed 60 years ago. Your Association has been concerned that these reforms, with their relentless focus on clinical outcomes and a move to a competitive market by using any qualified provider, may impact on the continued quality of the service we offer. My predecessor, Julian Barth, has worked extensively with the Royal College of Pathologists to develop a number of 'key performance indicators'. These have attracted the attention and support of the United Kingdom Accreditation Service and the new commissioning bodies and their representatives alike. It is hoped that these indicators of quality, once agreed, can be incorporated into the CPA standards of the future, thereby offering helpful supplementary evidence covering the service as a whole and providing commissioners with a more holistic overview of laboratory diagnostics.

Concerns that under the reforms there would be a fragmentation in the planning of services and a lack of involvement of professionals, other than GPs, in commissioning, led to the government responding by introducing the concept of clinical senates, which would provide advice on the clinical aspects of commissioners' proposals for large scale service change or reconfiguration. It is essential that the Association seeks to influence these new advisory structures and to promote the central contribution of laboratory medicine to healthcare. The challenge for us is that this needs to be done locally through our regional structure. Under the auspices of the UK Labs Are Vital™ initiative, a coordinated approach has been proposed with a UK-wide network of 'Champions for Commissioning'. I am pleased to report that Regional Chairs have responded well to the challenge of identifying local champions among their members. It is anticipated that a one-day launch event in the spring will more clearly define the role and provide advice and support materials to these individuals in their task of championing laboratory medicine with NHS management, with commissioners, with politicians and with the public.

The appointment of Lead Scientists in each SHA in England by the Chief Scientific Officer (CSO), Professor Sue Hill, has prompted an increased interest in revitalising regional networks across the healthcare scientist community and offers a further opportunity for local membership engagement with the healthcare reforms and in influencing the changes. Our particular congratulations go to Fiona Carragher who has been appointed to this role for London SHA.

Much of my year as President, and indeed that as President-Elect before it, has been spent in engaging with the Department of Health and other professional colleagues over the development of Modernising Scientific



Careers. It is true to say that the process has not been without its problems and that there are many remaining challenges, especially as the process moves forward to consider Higher Specialist Scientific Training and professional regulation. However, it is to the CSO's credit that she has managed to secure an increased level of funding for training across all specialties of healthcare science in a climate where others have seen severe cutbacks.

Last September saw the first intake of the new Scientist Training Programme (STP) trainees in England under a generic Blood Sciences remit, thus offering a wider and more comprehensive training in laboratory medicine specialties, covering aspects of haematology, immunology and genetics as well as the discipline of clinical biochemistry. For microbiology, a programme of Infection Sciences was introduced, covering general microbiology and including infection control and epidemiology, mycology, virology, bacteriology and parasitology. The new schemes present challenges for both trainers and trainees. However, at a time when the technological differences between the traditional pathology specialties have become less and less distinct, it is important that we grasp the opportunity to develop these future leaders of our profession and ensure they are equipped with all the necessary skills to lead laboratory services in the future.

The National School for Healthcare Science, which is under the leadership of Val Davison and was originally developed to support the delivery of the new Genetics pilot, has now been given wider responsibilities across all STPs and PTPs (Practitioner Training Programmes). Under the auspices of the West Midlands Postgraduate Deanery, the School will establish seven themed School Boards with professional body representation. At the beginning of the year it was

Introduction

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announced that Dr Barbara Lloyd will take responsibility for the Life Sciences programmes. The Association looks forward to working closely with the School and Dr Lloyd in the future.

Over the last 12 months the Association of Clinical Scientists (ACS) has helped facilitate the development of the Academy for Healthcare Science. The Academy's objectives are: to speak with a strong, coherent and influential voice for healthcare science; to provide the healthcare science professions with a higher profile, influencing and informing a range of senior stakeholders, and to provide input and support for wider strategic initiatives requiring a healthcare science perspective. At the time of writing, the Academy is still in fledgling (shadow) form, but it is working with the ACS, the ACB, other constituent professional bodies, the Department of Health, devolved administrations and others to set out its role in education and training for healthcare scientists. By the time you read this report it is expected that the Shadow Board will have been replaced by a two-tier structure comprising a strategic policy Council, made up of major stakeholders including the professional bodies, and a unitary Management Board, both of which will be headed by a high profile substantive Chair. Recruitment of three Non-Executive Directors to sit on the Management Board and represent the broad church of healthcare science should also be complete.

At this time, the challenge for all parties is to secure statutory registration of trainees graduating from the STP, although the process by which this will happen remains uncertain. However, there is a commitment by all parties to see registration as clinical scientists through the Health Professions Council as the desired outcome.

The coming year promises to be an exciting one for our nation, with both the Olympics and the celebration of the Queen's Diamond Jubilee. However, the world of pathology will not be without its own celebrations in 2012. The Institute for Biomedical Science looks back on 100 years of history in its publication of 'Letters of Consequence', a book reflecting on their centenary celebrations through a series of letters and comments. Meanwhile, the Royal College of Pathologists began its 50th anniversary celebrations by launching National Pathology Year on the 12th January. The support provided by the ACB for National Pathology Week in previous years was recognised by Dr Suzy Lishman at the launch and I am confident that I can depend on the membership to support the College in celebrating this anniversary in a vigorous and enthusiastic manner. The Association continues to maintain effective dialogue with both of these important representative bodies of laboratory medicine in the UK as well as the many other related professional bodies and associations.

On the international scene there was the 21st Congress of Laboratory Medicine in Berlin where your Association participated in the election of a new Board of Officers for both the International Federation for Clinical Chemistry and Laboratory Medicine (IFCC) and the European Federation for Clinical Chemistry (EFCC). Both Presidents are members, and previous officers, of the ACB. Graham Beasall continues for a second term as IFCC President, while Ian Watson assumes the role of EFCC President. Ian has recently promoted the role of junior members on committees within the EFCC, and the Association has



Past President, Dr Julian Barth, hands over the reins to Dr Mike Thomas

nominated a number of our junior members for election to the EFCC's scientific committees. This proposal has been looked at in detail by Executive colleagues and it is thought that this approach might usefully be applied to our own structures.

The ACB continues its relationship with Sense About Science, which offers opportunities, especially for younger members, to develop media skills and confidence in dealing with patients and the public at large. As a vehicle for engagement, Lab Tests OnLine®UK continues to provide both the public and professionals with pertinent information on the laboratory tests performed on them or by them. Stephen Halloran has announced that he wishes to step down as Chair this year and a process to appoint his successor is underway. We acknowledge, and are extremely grateful for, the huge amount of work that Stephen has done with Lab Tests OnLine®UK. Work continues on the development of the National Laboratory Medicine Catalogue and your Association has been supporting this in a number of ways including developing vignettes as commentaries on catalogue entries. It is hoped by the time you read this that publication of the catalogue will have been achieved.

In a speech in Edinburgh in 1867, Benjamin Disraeli said, "Change is inevitable. In a progressive country, change is constant". Andy Warhol said, "They always say time changes things, but you actually have to change them yourself". Our Association has a history of always seeking to embrace, engage and influence those people and things that effect change within laboratory medicine. My thanks to all those members who seek to influence the changes and challenges we face. It is with your support that we will continue to do this in the future, for the benefit of the Association, the profession and, ultimately, our patients.

In closing, it is appropriate that I thank all the staff in the ACB office for their proficient and reliable help and support. And finally I extend my thanks and appreciation to my Executive colleagues and especially to my predecessor, Julian Barth, for his wise counsel and guidance in this rapidly changing and, at times, uncertain world.

Dr Michael Thomas
President

Association Awards

▼ ACB Foundation Award Dr Ian Watson



▼ ACB International Lecture Prof Mario Plebani



▲ President's Shield Dr David Cassidy

▼ AACC Transatlantic Lecture
Prof Robin Felder



▼ Professors' Prize Prof Rossa Chiu



▲ ACB Medal Award Mr Nicholas Unsworth

6 Education Committee

The last year has seen several changes to the committee with David Cassidy stepping down as Director at the 2011 AGM. The award of the President's Shield was a welcome recognition of all the work David has done in promoting the committee over the last nine years.

Over the past year, the Education Committee has worked with the regional tutors and other members of the profession to organise various training courses across the country. These have included the spring and autumn national training courses, the Focus 2011 training day and the Guildford management course.

At the spring training course in Birmingham, in addition to the academic content, which focused on metabolic disease, haematology and leadership, over 60 trainees practised their skills in taking histories and planning the recovery of pathology services from flood, fire, World War II bombs and IT failure; all real life scenarios that made the trainees think about entire hospital services, not just biochemistry.

Lisa Bailey ran a very successful autumn training course in Liverpool with 87 trainees attending. The course was designed with a high level of academic input, and the

particular focus on preparing for and answering FRCPath exam questions was valued by the trainees. Examples of short answer questions and essay questions were given after each lecture, which included topics such as bone metabolism, toxicology and tandem mass spectrometry. The training day at Focus 2011 gave an opportunity for trainees to develop their skills in making case presentations and to understand those needed to transform pathology services. This year's Focus training day will be a joint venture between clinical biochemistry and microbiology, with parallel sessions in the morning and all trainees working together in the afternoon. The committee has worked very hard this year at evaluating the training requirements for all of the disciplines within the Association and will continue to build on the successes of this year.

Twenty-eight trainees from clinical biochemistry, microbiology and immunology attended the five day ACB management course at the University of Surrey in 2011. The trainees learned about the organisation and finances of the NHS and the future direction of pathology services. They also had team projects running throughout the week culminating in presentations to a panel on the final day of the course. The next management course is planned for 2013.



Delegates at the ACB Management Course in Guildford

Education Committee

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The Education Committee has reviewed the affordability and future direction of the national training courses. After extensive consultation, it has been decided that the courses will continue to be held twice a year, but will be for two days and modular in design. This will give greater flexibility to the courses and make them more responsive to the training needs of all the disciplines within the ACB. Courses will continue to focus on the FRCPATH examinations but will also incorporate teaching on areas that cannot be found in textbooks, in order to equip trainees with the skills required to lead departments in the future. We will also be working closely with the Clinical Practice Section to facilitate increased learning opportunities.

During the course of 2011 the committee had the pleasure of awarding travel bursaries to the following members of the Association: Joanne Carter, Royce Vincent, Yasar Hussain, Helen Aitkenhead, Tim McDonald, Nicola Cumley, Owen Driskell and Mark Sleeman. The recipients have written articles for ACB News.

The first intake of trainees to the Modernising Scientific Careers (MSC) Scientist Training Programme (STP) took place in September 2011 after a national recruitment and interview process. Members of the Education Committee and Regional Tutors' Committee participated in numerous workshops preparing the curriculum and MSC Learning Guides. There is still considerable work to do in developing and refining the Learning Guides for years two and three of the new training programme. Within both committees we have discussed the role of regional tutors post MSC and the future assessment of trainees, and we have had many presentations on MSC, including a recent discussion with the Lead Scientist for London. These discussions will ensure that we are in a good position to support the needs of the trainees and all those involved that contribute to the high standards of training expected by the Association. The ACB will continue to be committed to the development of training programmes and monitoring of the progress of trainees through the Education and Regional Tutors' Committees.

Director of Education, Training and Workforce: Dr Frances Boa
Deputy Director of Education, Training and Workforce: Mrs Hazel Borthwick



David Cassidy, Frances Boa and Hazel Borthwick

8 Publications Committee

ACB Publications has had a successful year, with all its publications being produced on time to a consistently high standard. During 2011, the committee considered the option of changing to electronic publication only. This will happen gradually as printed versions of some publications remain highly valued by many members and also generate income for the Association. The use of social media is being explored and members with views on, and experience of using, these technologies are being encouraged to participate in their development.

ACB News

Over the past year, we have continued to produce a topical monthly magazine of interest to ACB members and the wider clinical laboratory community. Where relevant, we have looked at current areas of change in UK pathology and have tried to report on developments, both with the information coming from central Department of Health sources and also by looking at what is actually happening around the country. In this way, we have tried hard to strike a balance in this difficult time and, in general, feedback is extremely positive about the editorial line that we have been taking. We have also been working to ensure that our members in immunology and microbiology find items in ACB News that are of particular relevance to their disciplines. As always, we encourage the participation of our readers in actively submitting articles for publication.

ACB Website

Work on updating the website has now commenced and it is hoped that material from the various ACB committees will be incorporated.

Annals of Clinical Biochemistry

In the year to 30th September 2011, the Annals received 273 submissions: just under half of these were from the UK, with significant numbers also being received from Japan, Australasia, China, Egypt, India, Turkey and the Netherlands. The overall acceptance rate of the journal was 50% (121 articles published from 21 different countries).

In 2011, the average time from submission to first editorial decision for an original article was approximately 39 days, compared to approximately 49 days in 2010 and 55 days in 2009. Other article types take considerably less time. By reducing our manuscript handling times we hope to further attract high quality research. The average time from acceptance to publication has remained 12 weeks. The impact factor rose to a healthy 2.2, from 1.9 the previous year.

Working with the RSM Press, the Annals will be making all editorials freely accessible from January 2012, with other selected articles being made freely accessible for a limited period of time. It is hoped that this approach will increase the visibility of the journal without impacting on the income the Association receives. A second consensus statement

from the Consortium of Laboratory Medicine Journal Editors (CLMJE), requesting medical journal editors to ensure completeness of methodological details, will be published in early 2012.

The Annals moved to a new enhanced website at the end of 2011. Online usage continues to increase. A series of high quality clinical reviews continues to be published. The journal appears to be entering a highly successful period in which its wider status is increasing while still providing a clinically and scientifically useful service to its readers and the Association's members.

Lab Tests OnLine®UK

2011 has been a landmark year for Lab Tests OnLine®UK. The LTO concept, conceived by a few visionary members of the AACC, was launched ten years ago. Little did they, or the AACC, know that ten years later the website would have been adopted by 15 countries and reach an audience of over 30 million people each year. Our 'own' Graham Beastall, in his capacity as President of the IFCC, congratulated AACC as they celebrated their 10th anniversary of LTO at the Presidents' dinner in Atlanta this July. Graham's apposite address can be found on <http://labtestsonline.org/site-news/mnews/valuing-laboratory-medicine/> and is well worth a read.

Of the world's 2.5 million monthly LTO visitors, the UK contributes about 150,000 and has the largest web traffic after the US, with over 4 million web pages visited every year. A LTO-US mobile device 'app' was launched in July 2011 and we plan to launch the Lab Tests OnLine®UK version during 2012, National Pathology Year.

This year the LTO Board welcomed Sally Stock as its new managing editor and, with LTO administrator Dragana Landup-Horgan, Sally oversaw the introduction of a new content management system (CMS) which has brought improved site speed, search facilities and appearance. Though we have a group of very dedicated authors, do not be surprised if you are approached by Sally to contribute new or updated LTO pages.

LTO retains its public credibility by being overtly impartial and professionally led. We receive vital financial support from the RCPATH, ACB and the Department of Health, but in order to retain this popular public window into the activities of the UK clinical laboratory service, future funding of the site will require new alliances to be developed. A world future for LTO is guaranteed and the UK will remain part of that future with the commitment and support given by the profession's pathology organisations.

Venture Publications

The Venture Publications Committee has had another busy, if rather frustrating, year. The much awaited book, *Primary Care and Laboratory Medicine - Frequently Asked*

Publications Committee

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Questions, by Stuart Smellie, Clodna McNulty and Mike Galloway, was distributed to members in January 2011. Many copies have also been sold, mostly to NHS laboratories, who have been giving them to their local GP practices as a way of improving test requesting in primary care. The strength of the book lies in its being laid out as clinical topics, rather than by test, thereby removing the artificial divide between individual pathology disciplines for our GP colleagues.

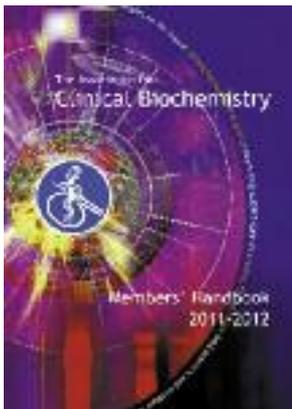
An attempt to engage our new microbiology colleagues by advertising has not yet produced any results in terms of new book proposals, but we aim to broaden the scope of VP in the coming year to include both the immunology and microbiology divisions.

A notable feature of the last couple of years has been the increasing difficulty that individual members face in taking time away from the workplace for ACB activities. Some of the pressure has been relieved by giving the option of contributing to meetings via conference call, but time pressure for both the authors and the editors of new books is becoming more apparent. The committee therefore had a wide-ranging discussion in the latter half of the year about the future of book production. Our marketing team surveyed a number of members, especially trainees, which led us to conclude that the books were very much valued and that VP should strive to continue to produce at least one book per year.

The marketing team has been very busy over the year, advertising in professional news magazines and sending out fliers for books at conferences. The start of 2012 will see a number of book promotions, with price reductions on many titles, especially the older ones. One potential new project to be discussed at executive level will be the use of Facebook and Twitter to promote the books and activities of the committee.

We are very grateful once again to Sue Ojakowa at PRC Associates for tirelessly pursuing commercial advertisers to help support production costs.

Director of Publications & Communications: Mrs Ruth Lapworth
Deputy Director of Publications & Communications: Miss Beverley Harris



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UK

The Scientific Committee has had a busy year supporting members by offering scholarships, developing the new National Handbook of Laboratory Medicine, engaging with the development of NICE guidelines, coordinating advice for members on scientific issues and helping the ACB Executive to respond to a number of consultative documents from other bodies. David Gaze, as Chair of the Clinical Sciences Reviews Committee, has an astonishing seven articles in print, with ten articles with the Editor and a further 26 published, commissioned or in progress. The committee is currently seeking authors for 20 new reviews.

It was gratifying to receive a good number of very high quality applications for scientific scholarships. It is particularly encouraging to see members involved in exciting research projects despite the challenges that running service laboratories on reducing budgets present. Topics include re-appraisal of inflammatory markers, a new enzyme assay for primary oxaluria type 3 and the application of MALDI/TOF mass spectrometry to serum thyroglobulin measurement. More details on these can be found on the Scientific Committee's section of the ACB website. We will continue to offer as many scholarships next year as resources allow, so now is a good time to start thinking about a project. We will advertise in the May 2012 ACB News for the next round. Chris Chaloner coordinates the scholarship application assessments and my thanks go to him for making the process rigorous but enjoyable. Dimitris Grammatopoulos is a committee member with a particularly strong research background, which makes him ideal for making constructive suggestions on how to improve



ACB members Douglas Thompson, Cathie Sturgeon and Ian Barnes were involved in the development of the NICE guidelines on ovarian cancer (pictured here with Sean Duffy, Chair of the NICE Guidelines Development Group)

proposed research projects. We are fortunate that our corporate members have also provided an astute scientist from the commercial sector to work with us, William Finch, who provides an industry perspective and sound advice.

It has been a pleasure to work with the newer members of the committee this year, including Douglas Thompson who responds on behalf of the Association to requests for ACB involvement in NICE guidelines and recruits appropriately experienced members to participate in guideline development groups. He was also joint organiser (along with Cathie Sturgeon) of an ACB Spotlight meeting this year, which addressed some of the more controversial aspects of using serum CA125 to detect ovarian cancer in symptomatic patients presenting to primary care. Throughout the year the Scientific Committee has suggested topics and coordinators for the Spotlight series. We are looking for more topics to tackle, so please approach one of us if you have an idea and can organise speakers.

Annette Thomas has lent her experience in point of care testing and external quality assurance to the National Audit Group and is developing an invaluable link with the Scientific Committee for developing best practice guidelines. The Cardiff axis is completed by the youngest member of the committee, Joanne Rogers, who though currently without portfolio makes valuable contributions to our work.

A major project this year has been to scale up the production of monographs for the National Handbook of Laboratory Medicine. Based on the National Laboratory Medicine Catalogue, the Handbook contains information for healthcare professionals by test. The information is commissioned by the ACB, edited by William Marshall and peer reviewed by members. Robert Beetham provides an invaluable unpaid administrative role in his active retirement for which the Association is in his debt. Advertising in ACB News produced an excellent response from members and, as of November 2011, there are 12 completed articles, with 25 in the pipeline. The Scientific Committee will be advertising for more authors to complete the first tranche of articles early in 2012. Please consider making a contribution. If there are any members who wish to become corresponding members of the Scientific Committee, please contact me or Chris Chaloner. Corresponding members take on limited projects on behalf of the committee and reflect members' opinions so that we are well informed when launching initiatives that we think may be helpful to members. I would like to thank Alex Yates for acting in this capacity for the last two years and to congratulate her on becoming a National Member on ACB Council.

Director of Scientific Affairs: Dr Robert Hill
Deputy Director of Scientific Affairs:
Dr Christopher Chaloner

Knowledge management and educational activities continued to predominate in 2011.

The metabolic medicine update series began in 2010-11 with two meetings at the Royal College of Pathologists each with two half-day topics. The first considered renal stones and inborn errors of metabolism and the second covered nutrition and IV fluids and aspects of bone pathology. Both were well attended with between 70 and 80 participants. Planned meetings for 2012 are on hypertension and subfertility (spring), a demand control showcase (summer) and liver biochemistry and paediatric biochemistry (winter).

The BMJ Masterclass series for 2011 has been completed, with five sessions delivered. Feedback again was excellent, with over 1000 GP attendees in total. We have helped expand this to include a session on laboratory haematology.

A series of 'all day breakfast workshops' was organised for Focus 2011. These covered basic trial statistics, method evaluation, new treatments in diabetes, pharmacogenomics, initiatives to improve added value in laboratory reporting, HbA1c a year on from standardisation, urinary C-peptide measurement, complex dyslipidaemias, and hypoglycaemia.

The CPS also hosted a Focus debate session to discuss proposals for harmonising laboratory test profiles and cascade screening in familial hypercholesterolaemia. The profile harmonisation work will shortly be published in the British Medical Journal.

Finally, two further best practice in primary care reviews were published at the start of 2012.

Director of Clinical Practice: Dr Stuart Smellie
Deputy Director of Clinical Practice: Dr Pat Twomey



Stuart Smellie

Clinical Practice Section

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12 Trainees' Committee

The Trainees' Committee is committed to ensuring trainees' views are heard on important subjects such as examinations and training courses. We report to the RCPATH Trainees' Committee and many ACB committees, including Council and the Education and Regional Tutors' Committees.

The committee is ensuring that the profession as a whole is aware of the difficult jobs situation for trainees and is encouraging departments to try to find positions for the current batch of excellent trainees.

Trainees' evenings

The committee successfully worked with the local organising committees for the ACB training courses in Birmingham and Liverpool to hold sessions on 'The changing role of the duty biochemist' and QIPP, respectively.

Big Bang 2011

ACB trainees, led by committee member Adrian Miller, attended Big Bang 2011, an annual science festival for children and students. Trainees collaborated with the Science Council to produce a stand that highlighted where science had contributed to everyday life, from vaccines and vacuums to ovens and ovaries (IVF). Students were encouraged to learn about the impact of science and how we have come to take for granted some of the many ingenious inventions from both the distant and recent past.

As an aside, and to introduce a highly interactive component to the stand, by far the most captivating aspect was the making of 'genetic code name bracelets'. The idea was that students, using the genetic code for the amino acids comprising their name, threaded coloured beads together representing the DNA bases, adenine, guanine, thymine and cytosine, to produce a multi-coloured bracelet.

NICE guideline reviews

Trainees have been involved in a national review of NICE guidelines, producing summaries of recent guidance with an emphasis on its impact for the laboratory. These summaries will eventually be published on the ACB website.

Communication

The appointment of the new communications officer has resulted in many initiatives to improve communication with trainees. The trainees' mailbox is being re-established to ensure trainees have an informal method of sharing information. The trainees' page on the ACB website is also being revamped.

The committee representatives work hard to keep trainees informed of all issues. We have had a number of changes on the committee this year and we would like to thank all of the members who have stepped down for their help and dedication during their tenure.

Chair: Dr Mark Sleeman

Secretary: Miss Jennifer Glaysher



Trainees enjoying some free time during the busy Birmingham training course

Trainees' Committee

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The Workforce Advisory Committee (WAC) collects and collates information on the clinical scientist workforce using the ACB database and data gathered by its regional members and the Trainees' Committee. These data can then be used by the Association to ensure that there are adequate numbers of trainees being recruited to meet future requirements.

The table below is constructed from:

1. the ACB database as of December 2011 to assess the number of retirements
2. the number of trainees entering the profession from data obtained by the Trainees' Committee and WAC committee members.

The following assumptions were made in constructing the table:

- that the average retirement age is 63 years
- that it takes a clinical scientist (a minimum of) eight years to be fully trained, i.e. to achieve FRCPath, from the time of entering a pre-registration training post
- in order for succession planning to work, the number of trainees entering the pre-registration training programme should equal the number of clinical scientists reaching the age of 63 years eight years later. In addition, there needs to be steady progression of the trainees through the career structure (see table).

The table includes estimates of the number of trainees available with 10 or 20 % attrition rates. In the past, the attrition rate has been as high as 50%. An exercise undertaken by the Workforce Advisory Committee and the Trainees' Committee in 2007 showed the attrition rate at present to be between 10 and 15%. It can be seen from the

table that from 2012-2019 there are predicted to be **206 retirements (27% of the workforce)**. In the same period the number of trained clinical scientists available will be **229 (+ 25 STP trainees)** (assuming 10% attrition), or **203 (+ 22 STP trainees)** (assuming 20% attrition). The new STP healthcare science trainees are listed separately as it is still very unclear how these trainees are to be registered and therefore which group of staff they will be replacing when they are trained. It can be seen that if we were planning for **clinical scientists only** there would need to be **substantial cuts** in the number of trainees taken on in 2012 because of the reduced number of retirements predicted eight years hence. However, the recruitment/workforce planning process for the new STP trainees has now been taken over by the Department of Health under the new MSC process. At present the workforce planning process for the new STP trainees is very unclear.

A continued concern of the Association is that individual Trusts are at present making cuts in the workforce due to short term deficit problems, budget constraints and the rationalisation/merging of services. The lack of opportunities for progression is now an extremely important and crucial issue for clinical scientists. The lack of suitable post-registration positions due to Trusts conducting workforce re-profiling exercises could mean that we lose the present trainees in whom we have invested a great deal of time and money to train to registration standard. As can be seen from the figures in the table, this in turn will have a serious effect on the replacement of the large number of people, further up the career ladder, who will retire in the next ten years as well as the development of new roles.

Chair: Mr John Kane

Commencement of training	Completion of training	Number of retirements (number of trainees required)	Number of trainees available no losses (10%, 20% loss)
Those 63 and over still to retire		38	
2004	2012	7	41 (36,32)
2005	2013	17	38 (34,30)
2006	2014	16	31 (28,25)
2007	2015	25	32 (29,26)
2008	2016	32	40 (36,32)
2009	2017	22	39 (35,31)
2010	2018	26	34 (31,27)
2011	2019	23	28 (25,22)*
2012	2020	15	
2013	2021	15	
2014	2022	10	
2015	2023	11	
2016	2024	15	
2017	2025	7	
2018	2026	11	

* NB: The 2011 intake are healthcare science trainees on the new Modernising Scientific Careers (MSC) Scientist Training Programme (STP)

The Immunology Professional Committee (IPC) continues with its core activities of representing clinical scientists in immunology within the ACB and in areas associated with pathology and medicine. The IPC has representatives on Council and on all standing committees (Education, Trainees', Workforce Advisory) and immunologists actively participate in regional ACB activities.

During the last year, there has been considerable success for clinical scientists in FRCPath examinations, with two scientists passing the Part 2 examination and others passing the Part 1 written examinations. Senior members of the IPC will be working on updating the RCPATH curriculum for clinical scientists in the first few weeks of February to feed this into the RCPATH HST curriculum committee.

The number of immunology consultants has fallen, with Don Henderson and Alistair Crookard retiring over the last year. We thank them both for their efforts in the discipline and profession. The current climate within the NHS is creating a rather harsh environment for trainees coming into the profession and there is a big challenge in finding permanent posts for our really excellent and capable trainees.

Modernising Scientific Careers continues to dominate the activities of the IPC. The first cohort of trainees in Blood Sciences was taken on in autumn 2011 and five were appointed to immunology training departments. There are

concerns about the experience that these trainees will get and whether it will be sufficient for them to practise as competent clinical scientists in immunology after their three years of broad-based, rather than dedicated, immunology training. There are also concerns about how these trainees will be able to be eligible for HPC registration, as their training will not be suitable for a single discipline ACS assessment and no 'Blood Sciences' discipline exists.

The annual training review for clinical scientists was held in December with students having both annual assessments and certificate of completion vivas. The IPC has actively encouraged immunology trainees to join the ACB and have charged trainees for their assessments if they are not ACB members.

The IPC has been asked to nominate someone to sit on the British Society for Immunology committee which is particularly involved in the clinical sessions for the BSI meeting.

I have decided to stand down from the Chair of the IPC this year; I hope that my successor will continue to work closely with the ACB.

Chair: Dr Joanna Sheldon
Secretary: Dr Berne Ferry



In the 18 months since the clinical microbiologists joined the ACB, the members of the Microbiology Professional Committee (MPC) have worked to ensure that microbiology has been represented throughout the organisation, contributing to ACB Council, Education, Trainees', Workforce Advisory, Publications, Website, National Meetings and Federation of Clinical Scientists committees. Following the departure of MPC members Heather Aird, Sheila Cameron, Heather Cubie, Kathryn Rolfe and Gemma Vanstone, three new committee members have joined us: Mark Garvey (pre-registration trainees' representative), Barry Neish (post-registration trainees' representative) and Rob Shorten. Kathryn Rolfe was co-opted back on to the MPC as workforce development representative. In addition to his role as an Associate Editor of ACB News, Derren Ready has now joined the Annals of Clinical Biochemistry team as microbiology editor.

A Microbiology Group identifier, based on the ACB logo, has been created to provide distinctive branding of documents endorsed by the MPC, such as the Health Protection Agency (HPA) National Standard Methods for microbiology. The MPC gave its endorsement to a new joint NICE and HPA guideline for the prevention and control of healthcare-associated infections and scientific advice was also provided to the Department of Health through a consultation on management of hazard group 4 haemorrhagic fevers.

Training and Modernising Scientific Careers

Eight microbiologists commenced the new MSC Scientist Training Programme (STP) in 2011, the MPC having contributed to the development of the Infection Sciences programme through participation in consultations on course content and learning outcomes. Annual appraisals for trainees are currently being introduced and sites offering training will undergo assessment and ratification. A highly successful training day for pre-registration clinical scientists and Higher Specialist Trainees was held in March.

Uncertainty still remains regarding how trainees completing the STP will achieve registration and which body will be responsible. The future role of the ACS has been under review and the MPC's position is that it should continue as the most appropriate body to maintain standards for clinical scientist registration, which should not be deregulated.

Workforce data and issues likely to impact on future recruitment and staffing levels for clinical microbiologists were highlighted in a stakeholder report to the Centre for Workforce Intelligence.

Scientific Meetings

The microbiologists participated in the ACB Spotlight series of meetings with a very well-attended programme on near patient testing, held in the new Royal College of Pathologists Education Suite. Sadly, the MPC was unable to contribute to Focus 2011 in Harrogate, but have planned an FRCPATH training day in conjunction with the clinical biochemists for the 2012 meeting in Liverpool.

A former member of the Association of Clinical Microbiologists (ACM) council (forerunner of the MPC), Prof Heather Cubie, was nominated for the ACB Roll of Honour in recognition of her contribution to virus diagnostics and especially advances in screening for human papillomavirus.

Unfortunately, 2011 also saw the departure of MPC Chair, Paul Klapper. Paul has been a guiding light for the clinical microbiologists for over five years, initially as Chair of ACM council, and was instrumental in negotiating the merging of the ACM with the ACB. Kirsty Dodgson (Consultant Clinical Scientist, Manchester Royal Infirmary) has succeeded Paul and has just returned to the MPC Chair after her maternity leave, while Steve Green (Health Protection Agency, Southampton General Hospital) has been interim Chair for the past year and now returns to the role of secretary.

Interim Chair: Dr Steve Green

2011 was a year in which the impact of the Government response to the financial crisis began to hit home for all areas of the NHS, and pathology has not been immune to its effects. Increasing 'Carterisation' has seen several mergers and acquisitions occurring between pathology services, with the ever present threat of privatisation becoming reality in several parts of the country. This has led to several large reorganisations and the FCS being called upon to provide advice and support in several cases. TUPE (Transfer of Undertakings (Protection of Employment)) transfers, maintenance of professional roles and standing, and preservation of NHS terms and conditions have been the main concerns for staff.

The pressures created by local cost improvement initiatives, and an environment of urgency to make changes (cuts), does lead some employers to take unwise actions affecting their staff. The FCS has worked hard on behalf of affected individual members. FCS officers would like to commend the work done in several areas by both regional and local representatives in respect of these reorganisations, which in some cases took a great deal of time and were not without stress. These representatives have done sterling work on your behalf.

National concerns and consultations

The NHS pay freeze continued with no cost of living increase for the majority of NHS staff; however, the FCS continued to engage with the process and to submit data for incorporation into the national Staff Side's submission to the NHS Pay Review Body. We remain active on the national NHS scene in participation at various consultation meetings with the Department of Health, both in our role in industrial relations (through negotiation meetings and sub-committees of the National Staff Council) and, together with the ACB officers, in more general forums about the place of our science in healthcare. The FCS worked closely with the Directors of Education to drive best practice during the implementation of Modernising Scientific Careers.

Over the last year, the big headline issue has been the proposal, following Lord Hutton's report, to change public sector pensions in order to make them more 'affordable'. Breakdown in the public sector wide negotiations led to a day of action on November 30th. Though the FCS could not ballot over the strike as we have a 'no strike' rule (Rule 2 of the Rules of the Federation), and so members were not entitled to withdraw their labour on that day, the FCS supports the general staff-side position. The FCS therefore provided information through the regional and local representatives' network to inform members what they could be and should not be expected to do on the day of action. At the time of writing a final agreement has still to be reached, although the immediate threat of further industrial action has receded. A 'heads of agreement', i.e. a position reached at the end of negotiation, is under consideration, but with no commitment to agree at this

stage. The whole issue is beset with positioning and media confusion. The FCS is trying to make sure you are fully informed.

Another national issue affecting many FCS members has been the bringing into effect of the reform of 'on-call' arrangements, as the Agenda for Change interim arrangements officially ended in April 2011. In practice, many Trusts have opted to continue with the interim arrangements until appropriate replacements, in line with the nationally agreed principles, are in place. In others, however, the move to a harmonised system with fixed availability payments has hit FCS members.

On both of these issues the FCS has prepared briefings for the membership and we try to remain responsive to the need for information and support. Another briefing, prepared by our case registrar and published in ACB News, dealt with professional responsibilities and the need to avoid falling foul of the HPC, pointing out that we are deemed to be professionals even when 'off duty' and the HPC codes of practice cover much more than just professional competency.

The time pressures felt by many of our representatives meant that training days in 2011 were limited to just one in the spring, rather presciently this time on TUPE transfers and reorganisation. These time pressures, along with retirements and staff movements, mean that we have had some changes to the committee and we find ourselves once again with a couple of regional vacancies. We would urge members to consider taking up this challenging, but we believe rewarding, role and help us return our committee to full strength, while protecting yourself, your colleagues and your profession.

Over the coming year we are aware that the NHS is going to see increasing challenges, including to the national Terms and Conditions enshrined in Agenda for Change. We will find more of our members transferred to the private sector and the FCS will continue to work on behalf of all its members in the interests of our profession. With your help, we will continue to be effective during these ongoing challenging times.

It wouldn't be an Annual report without the FCS officers taking the opportunity to acknowledge and thank the Tooley Street staff for their hard work and support in helping us fulfil our remit as your representatives.

Director of Regulatory Affairs/FCS Chair:

Mr Geoff Lester

Deputy Director of Regulatory Affairs/FCS Secretary:

Ms Roberta Goodall

This last year has been another busy one for meetings, with Focus, FiLM and the establishment of the ACB Spotlight meetings at the Royal College of Pathologists.

In May 2011 Focus was held in Harrogate for the first time and Steve Goodall and his team organised a fantastic meeting, with an extremely high quality scientific programme put together by Eric Kilpatrick. Highlights included the Professors' Prize award lecture by Rossa Chiu on non-invasive pre-natal diagnosis, which was very thought-provoking and received excellent feedback from delegates. From a management viewpoint, and in the current economic climate, the session 'Clinical biochemistry in an age of austerity' provided us with much food for thought as we plan services for the future, while the debates organised by the Clinical Practice Section illustrated that there are many areas we have yet to agree on within the profession. Once again, we thank the Corporate Members for their support of the Exhibition and the scientific programme; without their financial support, such a meeting would not be achievable.

The Frontiers in Laboratory Medicine (FiLM) meeting continues to be the premier cutting-edge laboratory management and innovation forum within the UK. The 2011 meeting continued this theme, and at the time of writing we are about to hold the 2012 meeting, once again at Austin Court in Birmingham. This meeting is organised in conjunction with Robert Michel, Editor-in-Chief of the Dark Report, with the UK organising committee led by Neil Anderson and Kath Brownbill. Once again, the meeting attracted many delegates from outwith clinical biochemistry, embracing the whole of laboratory medicine, and had an input from Lesley Wright and her team at NHS Improvement.



The former and current Chairs of the National Meetings Committee, Ian Hanning (left) and Ian Godber (right)



An interactive poster session at Focus 2011

2011 also saw the establishment of the aptly named 'Spotlight' meetings, utilising the facilities that are now available to us at the Royal College of Pathologists. Organised with the help of Graham Groom, the meetings covered a number of interests of the membership and highlighted the newly formed partnerships between the Association and immunologists and microbiologists. The meetings held in 2011 covered the topics of 'Near patient testing in microbiology', 'Controversies and changes in immunoglobulin assays' and 'Early detection of cancer'; all of the events were extremely well attended and several similar meetings have already been organised for 2012.

We can now look forward to Focus 2012, which will be a chance to return to Liverpool, the venue for the highly successful 2009 meeting. The local organising committee is being led by Paul Newland, with Ian Watson leading the organisation of the scientific programme. In 2013, an exciting new strategy will begin when the University of York will host Focus for the first time, and where we will endeavour to provide even more value for money for delegates.

Our thanks are due to Kath Brownbill, hard-working secretary of the committee, the ACB office staff for their support and Meeting Makers, who take on the professional organisation of our main meetings. A special thank you also needs to be extended to Ian Hanning, from whom I took over in this role last May. Ian's hard work over the last four years has ensured that the meetings this year had a firm grounding, and has made my job considerably easier.

We look forward to seeing you in Liverpool.

Chair: Dr Ian Godber
Secretary: Dr Kathryn Brownbill

During 2011, the Corporate Members' Committee continued to work alongside the ACB in two ways, firstly by participating in various committee meetings to bring the added dimension of the industry angle/expertise to the subjects under discussion and, secondly, by ensuring a two way communication channel to enable discussion on issues of concern to both parties.

Participation in the planning of Focus is at the forefront of this committee's activity during any year. In 2011, Mark Weaver once again actively contributed to the pre-meeting planning and post-meeting review to ensure that the views and suggestions of those corporate members sponsoring the Focus meeting were taken into account.

Focus 2011 also provided the venue for a meeting arranged to bring corporate members up to speed with developments in the Minimum Analytical Performance Standards pilot project. Key ACB members met with corporate members to explain the project and engage in dialogue regarding the

potential implications for companies. This was very much appreciated by the attendees and we look forward to continuing this dialogue as the project is implemented in routine practice.

Once again, the committee underwent significant change during 2011. This was a result of changes in responsibilities of committee members in their commercial roles. Notable among these changes was the loss from the committee of Judi Burdett, who was a valued contributor to the Scientific Committee as well as serving as Corporate Members' vice chair for two years. We would like to thank Judi for her contribution during her tenure.

With 2012 set to be increasingly challenging for laboratory medicine, the Corporate Members' Committee looks forward to working with the ACB to the benefit of all.

Chair: Ms Carla Deakin
Vice Chair: Mr Mark Weaver



North West

2011 was another productive and successful year for the North West region. Many events to promote clinical biochemistry were held across the region, including interactive displays and a stand at Manchester Museum during National Science Week. Trainees from the region have again been involved in promoting clinical biochemistry by acting as healthcare science ambassadors via the STEMNet (Science Technology Engineering and Maths Network) scheme, volunteering their time to act as inspiring role models to young people, visiting schools and colleges to introduce students to clinical biochemistry. We were also pleased to host one of the ACB national training courses in Liverpool this year.

Six new trainees were recruited to the region, the first to take part in the Modernising Scientific Careers (MSC) programme, and five of our existing trainees were awarded their certificate for successful completion of pre-registration training. Six pre-registration trainees progressed to Higher Specialist Trainee or Band 7 posts. The impressive record of examinations successes continued with ten members of the region achieving success in the FRCPath examinations at all stages.

Four travel grants were awarded this year to regional trainees who presented their work at a wide variety of meetings. Felicity Stokes presented her research at the 37th European Symposium on Calcified Tissues, Sarah Hatch attended the British Association of Endocrine and Thyroid Surgeons Conference, Philip Macdonald presented two very interesting paediatric cases at Focus, and Catherine Treslove attended the Waters mass spectrometry user group meeting.

Four high quality regional meetings were held in 2011. In January, at the Ian Ward Members' Papers meeting, there were eleven presentations, all of a very high standard, five focusing on method developments and seven presenting interesting cases. The junior



Andrew Wootton and Sally Hanton investigate phlebotomy at Aintree University Hospital

members of the region were all directly involved with these patients' care, contributing to the diagnoses. First prize was awarded to Phillip Monaghan (University Hospital, South Manchester) with his presentation 'Comparison of serum cortisol measurement by immunoassay and LC-MS/MS in patients receiving the 11 β -hydroxylase inhibitor,

metyrapone', and the runner up was Ed Hinchliffe (from the same establishment) with his presentation 'Simultaneous measurement of cyclosporin and tacrolimus from dried blood-spots by LC-MS/MS'.

At the AGM in April we had two very interesting speakers presenting a laboratory and surgical viewpoint of metal-on-metal hip replacements. The theme of the summer meeting was organ transplantation, and, again, laboratory and clinical aspects were presented by three speakers.

The regional audit meeting was held during October, where best practice was shared among laboratories. Eleven papers were presented, focusing mostly on the appropriate use of laboratory tests and demand management. Sally Hanton (University Hospital, Aintree), even made the front cover of ACB News in May, drawing attention to the excess number of blood samples collected in her Trust.

Northern Ireland

The joint ACBNI and ACBI spring scientific meeting was held in Belfast in early April. Topics included ketoacidosis guidelines in children, high sensitivity troponin T, Modernising Scientific Careers, measuring wear in



Prof Bernie Hannigan (Chief Scientific Adviser), Dr Mark Lynch (ACBNI Chair) and Mrs Orla Maguire (ACBI Chair) at the ACBNI meeting, April 2011

metal-on-metal hip replacements, standardisation of adjusted calcium and screening for vitamin D deficiency. The meeting was well attended and was of a high scientific quality. The annual RCPATH N Ireland regional seminar was held in June and included a wide range of presentations from the various pathology disciplines plus an update from the President of the College who expressed his real concerns regarding reform in the NHS in England. The regional audit group met several times over the year, and audits on adjusted calcium formulae, telephone limits, urine protein, iron overload and digoxin reference ranges were discussed. Ongoing audits include peritoneal and pleural fluid, NT proBNP, tumour markers, porphyrins, free light chains, CSF spectrophotometry, hs troponin T, renal stones and serum protein electrophoresis in MGUS.

Peter Sharpe has replaced Mark Lynch as regional Chair. Elinor Hanna is the new Clinical Practice Section regional representative. Lee Armstrong is the new meetings secretary and Alison Watt is now the regional workforce advisor.

The regional Biochemistry Network appears to be the most integrated of all the pathology disciplines. Biochemistry is grasping the opportunities offered by the network framework and is looked on very favourably by the Commissioner and the Health and Social Care Board as an example of what can be achieved by working together. The main outcomes to date have related to work on harmonising practice through audit and the adoption of best practice, a regional approach to new test introduction and sharing learning through incident reporting. However, the future achievements of the network are likely to be limited by the fact that the network has no independent funding and cannot really tackle any of the difficult issues such as sites of service delivery.

The Chairman has written to the new Health Minister, Mr Edwin Poots, highlighting the valuable role of pathology in health care and asking him to make contact with us if necessary.

John Compton, Chief Executive of the Health and Social Care Board, has been conducting an extensive review of health and social care services provision within N Ireland and this is

due to report in the near future. There have been numerous reports previously on re-profiling and changing health and social care delivery within the region, but, for political reasons, few of the recommendations have ever been implemented. There is now a realisation that services need to be streamlined and rationalised and that the currently available finance is being spread too thinly over numerous sites.

The N Ireland region has produced a consultation document entitled 'Back to the Future', which is proposing a managed service network for clinical biochemistry in N Ireland. We believe this will provide a considerable improvement in terms of quality, clinical effectiveness and cost efficiency over the existing federated network. The document has been circulated to all ACB members in N Ireland for consultation.

Republic of Ireland

The laboratory modernisation process is now underway as is the introduction of the extended working day from the 1st February 2011. The former will result in the centralisation of 'cold work' from GPs and this may affect the status of some hospitals as they may lose a large proportion of their work. A 'hub and spoke' model is likely. The extended working day (8am to 8pm) is part of the Croke Park agreement, which has promised no redundancies or pay cuts in return for reform of the public service. To date, its main achievements have been financial savings and industrial peace in the public sector.

The change of name of the ACB from the Association of Clinical Biochemists to the Association for Clinical Biochemistry has been discussed at committee meetings. It is likely that the newly appointed committee in 2012 will look at ways of broadening the membership to reflect the change in name.

Tutorials for the FRCPATH examinations were arranged for the region by our tutor, Ophelia Blake, assisted by Geraldine Collier, regional Chair. These tutorials were held monthly in St James's Hospital, Dublin. There was exam success for four members this year at all stages of the exam from Part 1 to finals.

The annual regional scientific meeting, which is normally held in January, had to be cancelled in 2009 and 2010 owing

to the very bad weather conditions. However, it is expected that this popular meeting will take place in January 2012. Most ACB members are also members of the Association of Clinical Biochemists in Ireland (ACBI) and attended and contributed to the national ACBI conference in October. Topics at this conference included errors in laboratory medicine, troponin, cystic fibrosis and liver disease, with speakers from Ireland, UK and Europe.

An Irish version of Lab Tests Online is now available, but cost and time commitments are proving to be an obstacle to its development. ACB members have also been actively involved in point of care testing, preparing guidelines and conducting national surveys.

Scotland

2011 was a successful year for the Scotland region. Two interesting and varied meetings were held. The first, in March, took place in the beautiful surroundings of Aviemore in the Highlands, and featured 'Renal Matters'. We were treated to a range of excellent talks that included aspects of the holistic care of patients with end stage renal failure, and the challenges of providing renal replacement therapy in the Highlands, an area the size of Belgium but with a population of only 300,000. The AGM also took place at this meeting and thanks were given to those members of the committee demitting office, for their enthusiasm and hard work. Fiona Stefanowicz won the 2010 John King award for her talk entitled 'Red blood cell selenium, red blood cell and plasma glutathione as markers of nutritional status of selenium'.



Delegates at the Scotland regional meeting

The second meeting took place over two days in October, on the outskirts of Edinburgh and we were delighted to welcome delegates to what was a really excellent event. The programme was very topical and included a workshop on key performance indicators led by Julian Barth and Bernie Croal, and sessions on prenatal and neonatal screening, and on bone metabolism and vitamin D. There were also two debates, one on the use of HbA1c in the diagnosis of diabetes and the other on POCT on the high street, both of which proved to be highly educational and entertaining. As well as the educational aspects, this meeting was also an invaluable opportunity to network. We are planning to widen the scope of our meetings to take account of the broader membership of the ACB, recognising the synergies that exist with our microbiology and immunology colleagues.

We were delighted that our regional tutor and other members were invited to take part in discussions with NHS Education Scotland (NES), in relation to the implementation of Modernising Scientific Careers in Scotland, and members of the region have also been involved in a Scottish Government Health Department working party to provide recommendations on the use and governance of point of care testing in Scotland.

We have continued our collaborative work with the Scottish Clinical Biochemistry Managed Diagnostic Network, which this year has seen agreement on both the implementation of single unit reporting for HbA1c, and the adoption of Pathology Harmony reference intervals across Scottish biochemistry laboratories. This work will become increasingly important in ensuring that clinical biochemistry has a voice in Scotland, and in further developing our opportunities to have a constructive dialogue with the Scottish Government Health Department as we continue to navigate through these very challenging times.

Finally we are delighted to congratulate Dr Bernie Croal on his election as Vice President of the Royal College of Pathologists.

South West and Wessex

Members of the region continued to face challenges this year as the pressure to improve efficiency and develop new ways of delivering



Participants in the South West and Wessex Siemens Award: Shilpa Joshi, Sara Carter, Mandy Perry, Francesca Mills, Simon Salter, Chris Stockdale and Vicki Powers

services increased. This has occupied the time and energy of senior staff. However, we have continued to deliver high quality regional meetings with good attendance. Three were held during 2011:

1. An Immunological Focus - Southampton, April
2. Cardiovascular Disease and Hot Topics - Bristol, June
3. GI Testing and Siemen's Award - Plymouth, December

The Siemen's members' papers award took place at the December meeting with seven presentations being given, reflecting the high quality work being undertaken by our trainees in the region. Entries ranged from pure research through to analytical problems and new technological developments. The award was made to Mandy Perry from Exeter for her paper entitled 'C-Peptide in routine clinical practice: analytical and practical considerations'. We would like to thank our corporate sponsors for their continued support of our meetings.

The region continues to be active in training with trainee annual reviews taking place during the year. Regional training days were held in Southampton and Bristol to support those preparing for examinations. All trainees are progressing well with a number of notable successes at different levels of examination, including completion of the Guildford MSc by the four trainees who started in 2009. Roanna George and Tanya Hart passed their Part 1 FRCPath examination in March 2011.

Two trainees were recruited to the new Modernising Scientific Careers programme this year, based at Southampton and Plymouth.

The region has seen a number of changes in personnel. Congratulations are due to Roanna George and Fiona Davidson for completing their pre-registration training and obtaining appointments outside the region, in Cardiff and Kingston respectively. Ceridwen Coulson retired after a long and distinguished career that included a number of roles within the ACB at regional and national levels.

The SWW regional audit group met in November to share results from local audits and to develop a regional audit programme around the central theme of demand management. This topical area builds on work undertaken by John O'Connor in the south west of the region. Local audit topics included high-sensitivity troponin, lithium monitoring and faecal occult blood testing. The regional committee continues to meet regularly although attendance has been an issue with many members having pressing local issues.

Southern

Clinical scientists need a good understanding of uncertainty in the work that we do in order that we can quantify the significance of changes in the tests we perform. Many in the profession may feel that 2011 has been marked by a high degree of uncertainty over many aspects of our working lives

as organisations restructure and attempt to meet the tight financial pressures.

One certainty is that there has been some seriously good science going on within the Southern region. There have been four scientific meetings on the themes of 'Laboratory aspects of neurology', 'Allergy testing and gastrointestinal disease', 'Clinical biochemistry and cardiac disease' and 'Sex, NETs (neuroendocrine tumours) and dynamic function tests'. To reflect the diversity of membership of the Association, two of our meetings included sessions devoted to microbiology and immunology and it was exciting to see the cross-fertilisation of ideas that the presentations brought about. As in previous years, the two summer meetings were held outside London (conveniently near the sea), allowing a wider range of specialised interests to be covered. Great credit goes to Angela Woods as Meetings Secretary for maintaining the high standard of interesting and stimulating sessions.

Another certainty is the quality of presentations that are made at the annual members' papers session. We were pleased this year to be able to award the winning presentations a prize in memory of Bill Richmond, an outstanding scientist who made a great contribution to science and our profession.

The region has been able to offer two sponsorship awards to enable young scientists to visit other countries, one to assist in a teaching project and the other to visit a laboratory in India. We hope that such placements will continue.



David Taylor receives the Bill Richmond Trainees' Award

Following the large demand for the ACB management training course in 2010, it was agreed to hold another course in Guildford in 2011 (normally this meeting is biannual), with a similar format to previous years. Sally Benton took over the running of the course and was successful in maintaining its high standard. The course is intentionally demanding for the participants but the feedback was that it was a great success, giving plenty of opportunity for participants to explore how management and financial processes work and to look at many other aspects of leadership and personnel management.

We were pleased that some of the region's members were able to gather for a social evening in the summer, with a medically themed walk around

part of central London and an enjoyable meal.

Uncertainty has been a good way to describe the progress of the Modernising Scientific Careers initiative. The preparation and start of the new training programme has taken great time and effort in the region. We wait with interest to see how the training works out in practice during its first year.

Just as some are embarking on the new training programme, others are coming to the end of their training and looking for substantive posts. In the current climate there are fewer posts available and there is considerable uncertainty over whether those who complete their training will be able to continue in the profession. Not only is this a tragedy for the people involved but it is also a great concern for those who have invested effort in teaching and encouraging young scientists.

If ageing is a certainty, then at the other end of the career scale there have been some notable retirements in the course of the year and we were pleased to mark the retirements of Dennis Wright and Bernie Rocks by presenting them with a small gift to acknowledge their work for the Southern region.

Trent, Northern and Yorkshire

Once again the TNY region has had a successful year. The Geoffrey Walker award was well supported, with the three candidates (Tasneem Salim, Jennifer Spencer and Sarah Glover)



Sophie Barnes receives the Bill Richmond Award



Participants in the Geoffrey Walker Award: Tasneem Salim, Jennifer Spencer and Sarah Glover

giving excellent presentations. The competition was won by Jennifer Spencer with a presentation entitled 'A service evaluation of faecal sugar TLC in Leeds'.

Three scientific meetings have also been held this year: 'Paediatric biochemistry and toxicology' in Leeds, 'Aspects of diabetes' in Hull and 'Reproductive endocrinology' in Newcastle. All three were well attended with good feedback from delegates.

Our main innovation in the last year has been the instigation of our 'Learning and Development Opportunities Scheme'. This arose from a survey of members' needs undertaken last year. Members expressed a desire for help and training in issues of service and professional development including statistics, how to do research and development, and how to market services. The first training day on statistics, which was organised by ACB members in Hull, was very successful. The programme is being integrated into our scientific meetings and we are developing a bursary scheme to help those members whose Trusts' training budgets are limited.

The lifetime achievements of a number of members of the region were recognised by the Association, with Ian Barnes being made an Honorary Member, Wendy Brown being made an Emeritus Member and Trevor Gray being made a Fellow of the

Association. We wish to congratulate these members and thank them for the outstanding contributions they have made to the profession over their careers.

The current Chair of the region, Mike Toop, is stepping down from his post in 2012. He writes: 'I would like to thank all members of the TNY committee, but in particular our secretary, Alison Jones, without whose untiring efforts little would get done! I retired last year and will be stepping down as Chair of the TNY region in February. This represents the end of my final formal link with the profession. I have enjoyed my 30 years in clinical biochemistry and I would like to thank all my colleagues for their support over the year. I wish the Association every success in the future.'

Wales

NHS reorganisation in Wales is still an ongoing process and service redesign programmes are currently underway for all pathology disciplines, including clinical biochemistry, immunology and microbiology, with the aim of finding the most effective and sustainable models for the delivery of pathology services in support of frontline patient care. The LIMS roll-out has been delayed, and is now likely to be introduced on the first site in February or March 2012.

As part of the LIMS standardisation initiative, Wales has adopted all recommendations from Pathology Harmony phases 1 and 2. The proposals

are being extended to include all reporting units, number of decimal places in results, and retesting intervals where appropriate.

Two very successful one day meetings were held in 2011. The spring meeting was held in Brecon in April, where the topic was renal stones. The autumn meeting, 'A fusion of fluids', was held in Aberdare. The Junior Members' award, kindly sponsored by Siemens, was awarded to Eleanor Burchell for her work on the establishment of an immunoassay for the amino terminal peptide of type 3 procollagen. In addition, a designated audit day was held in June and an update session was held at the autumn regional meeting.

With regard to payments for on-call and other extended service cover, the Agenda for Change interim arrangements have been extended in Wales and proposals for future service delivery are currently being considered by the Welsh Partnership Forum.

Two Higher Specialist Training clinical scientist posts have been created and filled since September. These are funded by NLIH (the funding body for trainee clinical scientists in Wales). Discussions are currently ongoing regarding future training requirements. Profession specific implementation groups are being established for the STP and HSST processes and two communication events for staff were held in December.

Joan Williams, retired Consultant Chemical Pathologist (Princess of Wales Hospital, Bridgend) was elected as an Emeritus Member of the ACB, and Rhys John, retired Consultant Clinical Biochemist (University Hospital of Wales, Cardiff) was elected as Fellow of the ACB. These awards were granted in recognition of their services to clinical biochemistry in Wales.

Scientists and pathologists across Wales are eagerly awaiting the start of National Pathology Year 2012, and we anticipate a happy 50th anniversary for the Royal College of Pathologists.

West Midlands

Three scientific meetings were held during 2011, all with excellent attendance and highly encouraging feedback. In March, a half-day meeting on 'Improving quality in laboratory medicine' was held prior to the regional AGM. The programme included reports of regional and national audits,

and presentations from local laboratories on successful approaches to improving test usage and auditing appropriateness of requesting. The exchange of ideas and best practice through discussion after the talks was appreciated by all, and was followed by a stimulating and challenging talk by the ACB President, Julian Barth, on quality in laboratory medicine.

Our summer meeting in June featured the topical subject of the 'Request-Report Cycle', including talks on end-to-end use of barcode identifiers to improve patient safety, patient and clinician-friendly reporting formats, and how to quantify and reduce errors, not only within the laboratory, but also (and importantly) in the pre-analytical and post-analytical phases.

In November, the region held a joint meeting with the Royal College of Pathologists at the Think Tank museum in Birmingham, entitled 'Multi-disciplinary approach to multiple myeloma'. An educational and stimulating day was enjoyed by all, with speakers from the disciplines of biochemistry, haematology, cytogenetics and immunology, and the diagnostics industry, on the current and future state of the art for myeloma diagnosis and monitoring. ACB members in training also gave presentations of their recent work; ranging from peptide detection by LC-MS, through investigation of viral strains in the local population at the time of the H1N1 outbreak, comparison of methods for faecal calprotectin, evaluation of the role of urine

neopterin in sarcoidosis, and study of POCT device performance in the community, to regional audit against the myeloma guidelines. The variety of work presented reflects the wide range and complexity of clinical science carried out by members of the West Midlands region and the high quality of training.

The region continues to be active in promoting laboratory medicine to the public. During the autumn half term holiday, the 'Meet the Scientist' event was held at the Think Tank museum in Birmingham city centre for the fourth year running, and was even bigger and better than previous events, with colleagues from other pathology disciplines involved and approximately 300 visitors to the interactive pathology displays over the course of the day.

Three trainees were taken on in the region under the Modernising Scientific Careers training programme in 2011, and several pathology departments in the region are early adopter sites for MSC. Our existing pre- and post-registration trainees have mostly secured permanent or fixed term contracts after training, although two are still on temporary extensions to their training contracts due to the lack of advertised positions. We celebrate the success in examinations of four clinical scientists who passed the RCPATH Part 1 written exam during the year, and five clinical scientists and one chemical pathologist who passed the Part 2 oral examination.

The region is sponsoring two new special interest groups that were set up in the past year covering the subjects of diabetes and demand management. Each group has had two meetings so far, which are open to any regional members and biomedical scientists with an interest in these areas. They are a useful forum for sharing best practice, discussing new developments, publications and guidelines, and thereby pooling expertise and encouraging standardisation of practice across the region.

Four regional audits have been successfully carried out in the past year on the topics of the use of PSA testing, compliance with Pathology Harmony reference range recommendations, testing for myeloma and plasma cell dyscrasias, and neonatal jaundice. The regional audit group has good attendance from clinical scientists and also some biomedical scientists, who together represent most laboratories in the region.

2011 has been a challenging year for the region, as it has been nationally. Budget cuts and vacancy freezes by Trusts have stretched the capacity of members to participate in regional activities and attend training courses and meetings. However, as is demonstrated by this report, the region continues to be strong and active, and has started new scientific and professional activities in this past year to help promote the excellence of clinical biochemistry now and for the future.



'Meet the Scientist' at Think Tank, Birmingham

The accounts on the following pages show how the Association has performed in 2011. I am very pleased to report a surplus, in contrast to the £25,000 loss incurred in the previous year. This improvement has been achieved by a reduction in expenditure to £1,275,385 from the 2010 figure of £1,353,740, while maintaining an income level of £1,308,525 (£1,320,173). I thank all concerned for their hard work and support in securing this turnaround.

The Association has three major income streams, namely, subscriptions, meetings and publications.

Subscription income rose by £17,504 (5.7%), and net education income including national meetings was £79,302 compared to £63,432 in 2010. Net income from publications increased to £20,686 from £9,308 in 2010.

2012 will be as equally challenging for the Association, a result of the loss of the Department of Health grant to support the running of Lab Tests Online and the high costs of holding our annual Focus meeting in a purpose built conference and exhibition centre. Despite these pressures, I propose to hold members' subscriptions at their current levels for a further twelve months.

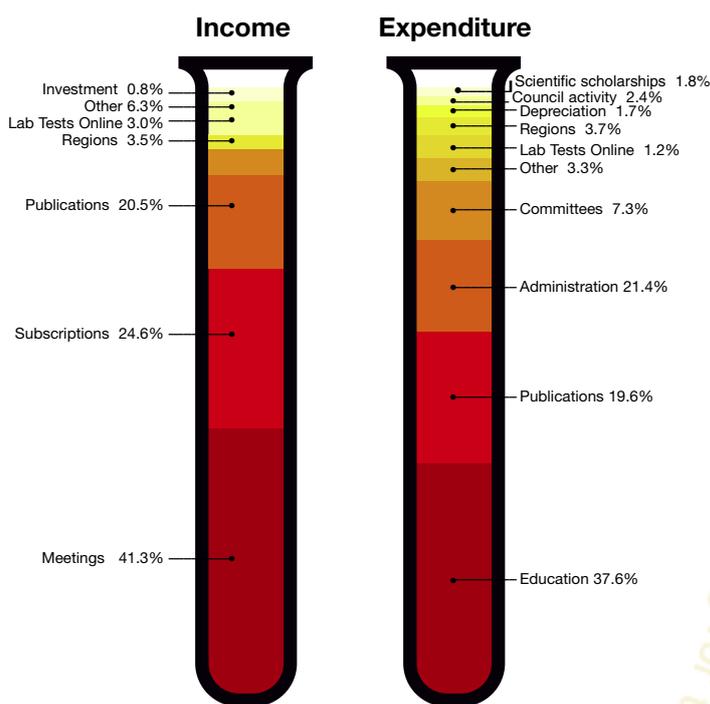
I have carried on with the Association's policy of investing monies excess to immediate requirements on the money market but the return is still low, in line with the general level of interest rates. Investment income received was £11,827 compared to £9,075 in the previous year.

Overall, I am satisfied with the ACB Regional finances where expenditure exceeded income by a modest £1,009.

This is my final report after four memorable years as your Director of Finance. I hand over to my successor with the Association's finances in a healthy position. I thank all directors and members of the Association for their support and help during my tenure of office.

The Auditors remain satisfied with the continued financial viability of the organisation and the Association will continue to pursue its policy of operating within its resources.

Director of Finance: Terry Dyer



Association Membership

The total membership at 31st December 2011 (2010) was 2,401 (2,249) and included 28 (24) Honorary Members, 30 (30) Emeritus Members, 16 (15) Fellow Members, 1,513 (1,344) Ordinary Members, 162 (171) Overseas Members, 9 (9) Student Members, 143 (209) Federation Members, with 24 (13) Temporarily Retired and 476 (434) Permanently Retired Members. Currently 267 Members of the ACB have Chartered Scientist status, of which 186 registered through the Association.

Audited Accounts and Financial Statements

Report of the Council of Management for the year ending 31 December 2011

The Council of Management submit their report and the financial statements of The Association for Clinical Biochemistry.

Principal Activities

The principal activity of the Association during the year was to promote the advancement of Clinical Biochemistry and Laboratory Medicine.

Review of the Business

The results for the year are shown on page 27 of the financial statements.

Officers of the Association

The following officers have held office since 1 January 2011:

President	Dr M Thomas	(from 23rd May 2011)		
	Dr J H Barth	(to 23rd May 2011)		
Past President	Dr J H Barth	(from 23rd May 2011)		
President-Elect	Dr M Thomas	(to 23rd May 2011)		
Company Secretary	Mrs R Lapworth			
Treasurer	Mr T F Dyer			
Other Executive Officers	Dr F G Boa	(appointed 23 May 2011)	Dr D M Cassidy	(resigned 23 May 2011)
	Dr R P Hill	Mr G H Lester	Dr W S Smellie	
Other Officers	Mr N R Anderson	(resigned 23 May 2011)	Dr C M Loughrey	(resigned 23 May 2011)
	Dr M P Bosomworth		Dr P L M Lynch	(resigned 23 May 2011)
	Dr G C Burrows	(appointed 23 May 2011)	Mr P Newland	(resigned 23 May 2011)
	Ms G Collier	(resigned 23 May 2011)	Ms M P O'Keane	(appointed 23 May 2011)
	Mr M Egerton		Dr P C Sharpe	(appointed 23 May 2011)
	Mr F D L Finlay		Dr P H Thomas	
	Dr D B Freedman	(appointed 23 May 2011)	Mrs A M Wayte	
	Dr J H Horner	(resigned 23 May 2011)	Mr C Webster	(appointed 23 May 2011)
	Prof E S Kilpatrick		Mrs A M Yates	(appointed 6 November 2011)

The Association for Clinical Biochemistry is a company limited by guarantee, therefore none of the members of the Council of Management hold any shares in the Association.

Auditors

A resolution to reappoint Baker Tilly UK Audit LLP as auditors will be put to the members at the Annual General Meeting.

Small companies' exemption

This report has been prepared in accordance with the provisions applicable to companies entitled to the small companies exemption.

Statement as to disclosure of information to auditors

The members of the Council of Management who were in office on the date of approval of these financial statements have confirmed, as far as they are aware, that there is no relevant audit information of which the auditors are unaware. Each of the members of the Council of Management have confirmed that they have taken all the steps that they ought to have taken as members of the Council of Management in order to make themselves aware of any relevant audit information and to establish that it has been communicated to the auditor.

*By order of the Council of Management
Mrs R Lapworth, Company Secretary
29 March 2012*

Statement of Responsibilities of Council of Management

The members of the Council of Management are responsible for preparing the Annual Report and the financial statements in accordance with applicable law and regulations. Company law requires the members of the Council of Management to prepare financial statements for each financial year. Under that law the members have elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law the members of the Council of Management 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 Association and of the surplus of the Association for that period. In preparing these financial statements, the members of the Council of Management are required to:

- select suitable accounting policies and then apply them consistently;
- make judgements and accounting estimates that are reasonable and prudent;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Association will continue in business.

The members of the Council of Management are responsible for keeping adequate accounting records that are sufficient to show and explain the company's transactions and disclose with reasonable accuracy at any time the financial position of the Association 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 Association and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Independent Auditors' Report to the Members of the ACB

We have audited the financial statements on pages 27 to 30. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the 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 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 Directors and Auditors

As more fully explained in the Director's Responsibilities Statement set out above, the directors are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view. 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 (APB's) Ethical Standards for Auditors.

Scope of the audit

A description of the scope of an audit of financial statements is provided on the APB's website at www.frc.org.uk/apb/scope/private.cfm

Opinion on the financial statements

In our opinion the financial statements:

- give a true and fair view of the state of the company's affairs as at 31 December 2011 and of its surplus 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.

Opinion on other matter prescribed by the Companies Act 2006

In our opinion the information given in the Directors' Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of directors' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the directors were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies exemption in preparing the directors' report.

Paul Oxtoby (Senior Statutory Auditor)
 For and on behalf of Baker Tilly UK Audit LLP, Statutory Auditor,
 Chartered Accountants, St Philips Point, Temple Row, Birmingham B2 5AF
 2012

Income and Expenditure Account

	Notes	2011 £	2010 £
Income		1,308,525	1,320,173
Administrative expenses		<u>(1,275,385)</u>	<u>(1,353,740)</u>
Operating surplus/(deficit)		33,140	(33,567)
Investment income	1	<u>11,827</u>	<u>9,075</u>
Surplus/(deficit) on ordinary activities before taxation	2	44,967	(24,492)
Taxation	4	<u>(6,199)</u>	<u>(72)</u>
Surplus/(deficit) on ordinary activities after taxation	10	<u><u>38,768</u></u>	<u><u>(24,564)</u></u>

The operating surplus/(deficit) for the year arises from the company's continuing operations.

No separate Statement of Total Recognised Gains and Losses has been presented as all such gains and losses have been dealt with in the Income and Expenditure Account.

Balance Sheet

	Notes	2011 £	2010 £
Fixed Assets			
Tangible assets	5	838,448	860,715
Investments	6	<u>1,149,929</u>	<u>1,159,287</u>
		<u>1,988,377</u>	<u>2,020,002</u>
Current Assets			
Debtors	7	158,407	170,460
Cash at bank and deposits	8	<u>656,096</u>	<u>378,463</u>
		814,503	548,923
Creditors: Amounts falling due within one year	9	<u>(661,006)</u>	<u>(465,819)</u>
Net Current Assets		<u>153,497</u>	<u>83,104</u>
		<u><u>2,141,874</u></u>	<u><u>2,103,106</u></u>
Funds of the Association			
Accumulated	10	302,241	291,837
Fixed asset fund	10	<u>1,839,633</u>	<u>1,811,269</u>
		<u>2,141,874</u>	<u>2,103,106</u>

The financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime and with the Financial Reporting Standard for Smaller Entities (effective April 2008). The financial statements on pages 27 to 30 were approved by the Council of Management and authorised for issue on 29 March 2011 and are signed on its behalf by:

Mrs R Lapworth, Company Secretary

Accounting Policies

Basis of accounting

The financial statements have been prepared under the historical cost convention and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008).

Group financial statements

In the opinion of the Council of Management, the company and its subsidiary comprise a small-sized group. The company has therefore taken advantage of the exemption provided by the Companies Act 2006 not to prepare group financial statements.

Income

Income represents the invoiced value, net of Value Added Tax, of services provided to customers.

Annual subscriptions are allocated according to their renewal date. The subscriptions relating to the year under review are included in the income and expenditure account and those relating to the following year are shown in creditors as prepaid subscriptions.

Funds

Accumulated funds are those available at the discretion of the Council in furtherance of the general activities of the Association which have not been designated for other purposes.

Designated funds compose funds set aside by the Council for particular purposes. The aim and use of these funds is set out in the notes to the financial statements.

Tangible fixed assets

Depreciation is provided on all tangible fixed assets at rates calculated to write each asset down to its estimated residual value over its expected useful life, as follows:

Long leasehold property	- 2% straight line
Office equipment	- 15% reducing balance
Computer equipment	- 20% straight line

Investments

Long term investments are valued at the lower of cost and mid-market value at the balance sheet date. Provision is made for any impairment in the value of fixed asset investments.

Impairments

Fixed assets are reviewed for impairment if events or changes in circumstances indicate that the carrying amount may not be recoverable or as otherwise required by relevant accounting standards. Shortfalls between the carrying value of fixed assets and their recoverable amounts, being the higher of net realisable value and value-in-use, are recognised as impairments. Impairments of revalued assets, except those caused by a clear consumption of economic benefit, are recognised in the statement of total recognised gains and losses until the carrying amount reaches depreciated historic cost. All other impairment losses are recognised in the income and expenditure account.

Notes to the Financial Statements

	2011	2010
1. Investment income	£	£
Bank deposit account interest	446	342
Dividend income	-	-
Gain on disposal of investments	11,381	8,733
	<u>11,827</u>	<u>9,075</u>
2. (Deficit)/Surplus on ordinary activities before taxation	£	£
Surplus on ordinary activities before taxation is stated after charging:		
Auditors remuneration - as auditors	7,750	7,750
Depreciation - owned assets	22,267	22,427
Impairment of investments	20,739	-
	<u>50,756</u>	<u>30,874</u>
3. Directors' remuneration		
No directors received any remuneration in the year.		
4. Taxation	£	£
Tax on surplus on ordinary activities	6,199	72
	<u>6,199</u>	<u>72</u>

The Association's interest received from bank deposits is liable to corporation tax at the small companies rate of 21%, subject to relief for the small companies threshold.

5. Tangible fixed assets	Long leasehold properties	Office equipment	Computer equipment	Total
	£	£	£	£
Cost				
1 January 2011 and 31 December 2011	1,068,068	27,013	42,109	1,137,190
Depreciation				
1 January 2011	213,392	20,974	42,109	276,475
Charged in the year	21,361	906	-	22,267
31 December 2011	234,753	21,880	42,109	298,742
Net book value at 31 December 2011	<u>833,315</u>	<u>5,133</u>	<u>-</u>	<u>838,448</u>
Net book value at 31 December 2010	<u>854,676</u>	<u>6,039</u>	<u>-</u>	<u>860,715</u>

6. Investments	Bonds - offshore	Share portfolios	Total
	£	£	£
Cost:			
1 January 2011	657,076	502,211	1,159,287
Additions	-	785,676	440,667
Disposals	-	(774,295)	(429,286)
Impairment	(20,739)	-	(20,739)
31 December 2011	<u>636,337</u>	<u>513,592</u>	<u>1,149,929</u>

The market value of the quoted investments is £515,700 (2010: £524,595).

The Association for Clinical Biochemistry is the parent undertaking of Clinical Biochemistry Conferences, a company limited by guarantee and a registered charity, by virtue of common control. The company was incorporated on 8 January 2003 and its principal activity is the management of conferences for the benefit of Clinical Biochemistry.

Clinical Biochemistry Conferences prepares accounts to 31 December. The latest accounts prepared for the year ended 31 December 2011 showed a surplus of £9,561 (year ended 30 June 2010: deficit £57,331) and total reserves of £151,019 (30 June 2010: £141,458).

7. Debtors	2011	2010
	£	£
Trade debtors	105,726	69,613
Other debtors	22,963	7,624
Prepayments	<u>29,718</u>	<u>93,223</u>
	<u>158,407</u>	<u>170,460</u>

8. Bank and deposits	2011	2010
	£	£
Bank current and deposit accounts	<u>656,096</u>	<u>378,463</u>

Cash surplus to daily commitments is held on bank deposit.

9. Creditors: amounts falling due within one year	Notes	2011	2010
		£	£
Trade creditors		65,111	51,715
Corporation tax		3,244	72
Other taxation and social security		54,309	6,227
Other creditors		7,888	7,818
Deferred income - income received in advance		104,316	58,814
Cash held on behalf of benevolent fund	11	8,776	8,408
Funds held on behalf of Supra Regional Assay Services		51,100	51,336
Funds held on behalf of Association of Clinical Microbiologists		25,311	37,329
Funds held on behalf of the Path Knowledge Repository		40,535	44,100
Funds held on behalf of Academy for Healthcare Science		151,672	-
Amounts due to Clinical Biochemistry Conferences		<u>148,744</u>	<u>200,000</u>
		<u>661,006</u>	<u>465,819</u>

30 Reports and Financial Statements

10. Funds		2011
	Accumulated fund	£
	Balance at 31 December 2010	291,837
	Surplus for the year	<u>38,768</u>
		330,605
	Transfer from Fixed Asset Fund	<u>(28,364)</u>
	Balance at 31 December 2011	<u>302,241</u>
	Fixed Asset Fund	
	Balance at 31 December 2010	1,811,269
	Transfer to Accumulated Fund	<u>(28,364)</u>
	Balance at 31 December 2011	<u>1,839,633</u>

Designated funds

- (i) The fixed asset fund represents the balance of the Association's funds that are invested in tangible fixed assets and investments, less the balance of the loan owed to Clinical Biochemistry Conferences.

11. Cash held on behalf of benevolent fund	2011	2010
	£	£
Donations received	<u>8,776</u>	<u>8,408</u>

12. Committees

These sums represent the cost of the meetings of the Council of the Association and all the committees.

	2011	2010
	£	£
National Meetings	1,410	107
Council and Executive	26,957	28,304
Scientific	7,367	7,848
Education	16,930	14,763
Publications	920	23
Federation of Clinical Scientists	38,338	42,285
Corporate Members	1,520	38
Clinical Practice Section	<u>460</u>	<u>903</u>
	<u>93,902</u>	<u>94,271</u>

13. Status of the Association

The Association for Clinical Biochemistry is a company limited by guarantee and has no share capital.

14. Related Party Transactions

A non-interest bearing loan provided to Clinical Biochemistry Conferences, a subsidiary of the Association, has existed throughout the year. The amount due in respect of the loan at the balance sheet date was £148,744 (2010: £200,000).

Benevolent Fund

The trustees present their annual report and financial statements for the year ended 31 December 2011. The unincorporated charity, number 254213, is registered with the Charity Commission and entered in the Central Register of Charities.

Principal Activities

The fund has been established to aid persons who are or have been clinical biochemists regardless of whether they are subscribers to the fund and the wives, children, widows or dependents of deceased or disabled clinical biochemists.

Governing Document

The charity is governed by a Deed of Trust dated 24 October 1967.

Trustees

The following were Trustees during the year under review. The Association for Clinical Biochemistry represented by the Benevolent Fund Committee comprising

President - Dr M Thomas (from 9 June 2011)	Dr J H Barth (to 9 June 2011)	Honorary Treasurer - Mr T F Dyer
Dr H G J Worth	Dr G Challand	Dr J H Horner (appointed 9th June 2011)

Reserves Policy

It is the policy of the charity to maintain unrestricted funds which are adequate to fulfil the objectives of the charity, subject to the limitations placed on the use of funds which has resulted in reserves building up to the current level. Any surplus funds are held in investments or short term deposits to help maintain the income levels for future years. Limited amounts have been paid to beneficiaries over the past few years and the trustees will endeavour to find suitable persons whom the charity can help.

Public Benefit

The trustees have given due consideration to Charity Commission published guidance on the public benefit requirement.

130-132 Tooley Street
London
SE1 2TU

By order of the Trustees
Mr T F Dyer, Honorary Treasurer
29 March 2012

Independent Examiner's Report

I report on the accounts of the charity for the year ended 31 December 2011, which are set out below.

Respective responsibilities of trustees and examiner

The charity's trustees are responsible for the preparation of the accounts. The charity's trustees consider that an audit is not required for this year under section 43(2) of the Charities Act 1993 (the 1993 Act) and that an independent examination is needed. It is my responsibility to examine the accounts under section 43 of the 1993 Act; to follow the procedures laid down in the general Directions given by the Charity Commission under section 43 (7)(b) of the 1993 Act; and to state whether particular matters have come to my attention.

Basis of independent examiner's report

My examination was carried out in accordance with the general Directions given by the Charity Commission. An examination includes a review of the accounting records kept by the charity and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts, and seeking explanations from you as trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently no opinion is given as to whether the accounts present a "true and fair view" and the report is limited to those matters set out in the statement below.

Independent examiner's statement

In connection with my examination, no matter has come to my attention: 1) which gives me reasonable cause to believe that in any material respect the requirements to keep accounting records in accordance with section 41 of the 1993 Act; and to prepare accounts which accord with the accounting records and comply with the accounting requirements of the 1993 Act; have not been met: or, 2) to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

Paul Oxtoby (FCCA) for and on behalf of Baker Tilly Tax and Accounting Ltd,
Chartered Accountants, St Philips Point, Temple Row, Birmingham B2 5AF
2012

Statement of Financial Services

	Unrestricted Funds	
	2011	2010
	£	£
Incoming resources		
Donations received	854	987
Interest receivable	<u>103</u>	<u>119</u>
	957	1,106
Resources expended		
Benevolent payments	-	-
Interest payable	<u>-</u>	<u>(24)</u>
	957	1,082
Movement in funds		
Accumulated fund at 31 December 2010	<u>49,280</u>	<u>48,198</u>
Accumulated fund at 31 December 2011	<u>50,237</u>	<u>49,280</u>
	2011	2010
Current assets		
Amount invested in money market	39,399	39,295
Funds held by The Association for Clinical Biochemistry	8,776	8,408
Balance at bank	<u>2,062</u>	<u>1,577</u>
	<u>50,237</u>	<u>49,280</u>
Current liabilities		
Amounts due to The Association for Clinical Biochemistry	-	-
	<u>50,237</u>	<u>49,280</u>
Net assets		
	<u>50,237</u>	<u>49,280</u>
Unrestricted funds		
Accumulated fund	<u>50,237</u>	<u>49,280</u>

Notes on Financial Statements

1. Principal accounting policies

Accounting convention

The financial statements are prepared under the historical cost convention.

Investment income

Investment income is accounted for in the period in which the charity is entitled to receipt.

Resources expended

Expenditure is included on an accruals basis. Grants payable are charged in the year when the offer is conveyed to the recipient, in those cases where the offer is conditional, such grants being recognised as expenditure when the conditions attaching are fulfilled.

Mr T F Dyer, Honorary Treasurer
29 March 2012

C. P. Stewart Memorial Fund

The trustees present their annual report and financial statements for the year ended 31 December 2011. The unincorporated charity, number 269345, is registered with the Charity Commission and the Office of the Scottish Charity Regulator, number SC004417.

Principal Activities

The fund has been established to fund the advancement of scientific knowledge and education by providing financial support to enable scientists to visit laboratories within the United Kingdom or elsewhere for the purposes of learning specialised techniques or to obtain first hand knowledge from a recognised expert in a field that would assist them in their studies.

Governing Document

The charity is governed by a Deed of Trust dated 29 January 1974.

Trustees

The following were Trustees during the year under review. The Association for Clinical Biochemistry represented by The C. P. Stewart Fund Committee comprising

Chairman	Dr M Thomas (from 7 July 2011)	Dr J H Barth (to 7 July 2011)
Secretary	Mrs R Lapworth	
Honorary Treasurer	Mr T F Dyer	

Reserves Policy

It is the policy of the charity to maintain unrestricted funds which are adequate to fulfil the objectives of the charity, subject to the limitations placed on the use of funds which has resulted in reserves building up to their current level. Any surplus funds are held in short term money market deposits to help maintain the income levels for future years. No amounts have been paid out in connection with the objects of the charity for the past few years so the trustees will endeavour to find suitable persons whom the charity can help.

Public Benefit

The trustees have given due consideration to Charity Commission published guidance on the public benefit requirement.

130-132 Tooley Street
London
SE1 2TU

By order of the Trustees
Mr T F Dyer, Honorary Treasurer
29 March 2012

Independent Examiner's Report

I report on the accounts of the charity for the year ended 31 December 2011, which are set out below.

Respective responsibilities of trustees and examiner

The charity's trustees are responsible for the preparation of the accounts in accordance with the terms of Charities and Trustee Investment (Scotland) Act 2005 (the 2005 Act) and the Charities Accounts (Scotland) Regulations 2006 (the 2006 Accounts Regulations). The charity trustees consider that the audit requirement of Regulation 10(1)(a) to (c) of the Accounts Regulations does not apply and that an independent examination is needed. It is my responsibility to examine the accounts as required under section 44(1) (c) of the 2005 Act and to state whether particular matters have come to my attention.

Basis of independent examiner's statement

My examination is carried out in accordance with Regulation 11 of the Charities Accounts (Scotland) Regulations 2006. An examination includes a review of the accounting records kept by the charity and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts, and seeks explanations from the trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently I do not express an audit opinion on the view given by the accounts.

Independent examiner's statement

In the course of my examination, no matter has come to my attention.

- which gives me reasonable cause to believe that in any material respect the requirements:
 - to keep accounting records in accordance with section 44(1) (a) of the 2005 Act and Regulation 4 of the 2006 Accounts Regulations; and
 - to prepare accounts which accord with the accounting records and comply with Regulation 8 of the 2006 Accounts Regulations have not been met; or
- to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

Paul Oxtoby (Chartered Certified Accountant) on behalf of Baker Tilly Tax and Accounting Ltd,
Chartered Accountants, St Philips Point, Temple Row, Birmingham B2 5AF
2012

Statement of Financial Services

	Unrestricted Funds	
	2011	2010
	£	£
Incoming resources		
Interest received on bank deposit account	67	69
Resources expended		
Bursary	—	—
Net incoming resources	67	69
Accumulated fund at 31 December 2010	22,471	22,402
Accumulated fund at 31 December 2011	22,358	22,471

Balance Sheet

	2011	2010
	£	£
Current assets		
Cash held at bank	22,689	22,622
Current liabilities		
Amounts due to The Association for Clinical Biochemistry	(151)	(151)
Unrestricted funds	22,538	22,471
Accumulated fund	22,538	22,471

Mr T F Dyer, Honorary Treasurer
29 March 2012

Notes on Financial Statements

1. Principal accounting policies

Accounting convention

The financial statements are prepared under the historical cost convention.

Investment income

Investment income is accounted for in the period in which the charity is entitled to receipt.

Resources expended

Expenditure is included on an accruals basis. Grants payable are charged in the year when the offer is conveyed to the recipient, in those cases where the offer is conditional, such grants being recognised as expenditure when the conditions attaching are fulfilled.

