### Bundle Charitable Funds Committee 17 March 2020

1	09:30 - GOVERNANCE
1.1	Introductions and Apologies for Absence
	Presenter: Chair
1.2	Declarations of Interest All
1.3	Minutes of the Previous Meeting held on 20th September 2019
	Presenter: Chair
	CFC Minutes 20.09.19
1.4	Table of Actions and Matters Arising from the Meeting held on 20th September 2019
	Presenter: Chair
4.5	TOA CFC 20.09.19
1.5	Chair's Actions & Decisions taken outside of CFC meetings Presenter: Chair
	None to report
1.6	Review of Charitable Funds Committee Terms of Reference
	Presenter: Chair
	Charitable Funds Committee Terms of Reference 2020-21
1.7	Self Assessment of Effectiveness Questionnaire
	Presenter: Chair
	CFC Self Assessment Report 2019-20
_	
2	09:55 - RISK & ASSURANCE
2.1	Charitable Funds Operations Sub-Committee Update Report Presenter: Gareth Rees
	Charitable Funds Sub-Com Update Report SBAR (17.03.20)
	Charitable Funds Sub-Com Update Report (March 2020)
	Appendix 1 Request for Charitable Funds Expenditure: RITA Digial Reminiscence Therapy Software
	Appendix 2 Request for Charitable Funds Expenditure: Ultrasound Scanners x2 Breast Unit PPH.pdf
2.2	Charitable Funds Operations Sub Committee Annual Report
2.2	Presenter: Gareth Rees
	Charitable Funds Sub Committee Annual Report 2019-20
2.3	Charitable Funds Committee Risk Register
	Presenter: Sarah Jennings
	Charitable Funds Risk Register
	Copy of CFC March 2020
2.4	Approve Charitable Funds Committee Annual Report 2019/20 for Onward Submission to the Board
	Presenter: Sarah Jennings
	CFC Annual Report 2019-20
3	10:40 - PERFORMANCE
3.1	Investment Advisor Performance Update
	Presenter: Alexander True, Sarasin & Partners Verbal Item
3.2	Integrated Hywel Dda Health Charities Performance Report
	Presenter: Sarah Jennings/Huw Thomas
	Integrated Performance Report SBAR
	Integrated Performance Report
3.3	Aberaeron Integrated Care Centre - Impact of Charitable Contribution Deferred to June 2020 Meeting

3.4	Psychological Support for Cancer Patients Update Report
	Presenter: Sarah Jennings
	Charitable Funds SBAR Children
3.5	Update on the Impact of the Utilisation of IT Devices (Microsoft Surface Pros) to Support Patient Centred Care and Service Improvement
	Presenter: Mandy Rayani
	IT Equipment for Patients with Learning Disabilities SBAR
4	11:10 - STRATEGIC ISSUES FOR DECISION
4.1	Hywel Dda Health Charities 3 Year Plan 2020-2023
	Presenter: Sarah Jennings
	Hywel Dda Health Charities 3 Year Plan SBAR
	Hywel Dda Health Charities 3 Year Plan 2020-23
4.2	Charitable Funds Investment Property
	Presenter: Sarah Jennings
	Charitable Funds Investment Property
5	11:35 - FOR INFORMATION
5.1	Charitable Funds Committee Work Programme 2019/20 & 2020/21
	Presenter: Chair
	CFC Work Programme 2019-20
	CFC Work Programme 2020-21
6	11:45 - ANY OTHER BUSINESS
	All
7	11:50 - REFLECTIVE SUMMARY OF THE MEETING
	Presenter: Sarah Jennings
8	11:55 - DATE & TIME OF NEXT MEETING
	16th June 2020 1.30 p.m 4.30 p.m. The Board Room, Ystwyth Building, Hafan Derwen, Carmarthen
9	12:00 - COMMITTEE MEMBERS VISIT TO WARD 10, WITHYBUSH GENERAL HOSPITAL
	Members to undertake a tour of Ward 10, Withybush General Hospital



#### COFNODION Y CYFARFOD PWYLLGOR CRONFA ELUSENNOL HEB EU CYMERADWYO/ UNAPPROVED MINUTES OF THE CHARITABLE FUNDS COMMITTEE MEETING

Date and Time of Meeting:		Friday September 20 <sup>th</sup> 2019 9.30 a.m.
Venue:		Room F19, Building 3, St David's Park, Carmarthen SA31 3BB
Present:	Ms Sarah . Ms Anna L Mrs Delyth	Hancock, Independent Board Member (Committee Chair) Jennings, Director of Partnerships and Corporate Services ewis, Independent Board Member Raynsford, Independent Board Member (Committee Vice-Chair) Burt, Independent Board Member
In Attendance:	Mrs Nicola Mrs Elen M (Minutes) Miss Maria Mrs Yvonn	v Willis, Head of Service Development and Integration (Ceredigion) Llewelyn, Head of Hywel Dda Health Charities larks, PA to Director of Partnerships and Corporate Services Battle, Chair e Burson, Head of Communications (part of meeting) Saunders, Wales Audit Office (part of meeting)

Agenda Item	INTRODUCTIONS AND APOLOGIES FOR ABSENCE	Action
CF(19)038	The Chair, Cllr. Simon Hancock, welcomed all to the meeting.	
	<ul> <li>Apologies were received from:</li> <li>Mr Steve Moore, Chief Executive</li> <li>Mr Huw Thomas, Director of Finance</li> <li>Mr Gareth Rees, Deputy Director of Operations</li> <li>Mrs Jennifer Thomas, Senior Finance Business Partner</li> <li>Mr Mike Lewis, Independent Member</li> </ul> The Chair welcomed Miss Maria Battle to her first Charitable Funds	
	Committee meeting.	
CF(19)039	DECLARATIONS OF INTEREST	

No declarations of interest were received.

CF(19)040	CHARITABLE FUNDS STORY – MARKETING & PROMOTION – OUR NEW APPROACH	
	Mrs Nicola Llewelyn thanked Mrs Yvonne Burson for attending the meeting to support the delivery of the presentation.	
	Mrs Llewelyn introduced the Charitable Funds Story for this quarter which focused on the charity's approach to marketing and promotion and plans for future development of the charity's image and printed materials. During recent discussions on identifying the most appropriate ways to increase the charity's visibility across the Health Board's estate, it was agreed that the time was right to refresh the charity's image and re-look at how the charity's imagery could be modernised and aligned with the UHB's corporate brand. The charity's current image and printed materials are aligned with a corporate brand that was developed when Hywel Dda UHB was formed 10 years ago. Mrs Llewelyn drew Members' attention to the charity's current imagery and materials as well as examples that are currently in the process of being developed with a design agency that has been supporting the UHB's communications team.	NLI
	Mrs Burson added that this work is being undertaken in conjunction with the UHB's communications team and that any new imagery would be accessible and meet the needs of all service users.	
	Mrs Delyth Raynsford enquired how service users are involved in the current discussions. Mrs Llewelyn responded that service user feedback on the current charity imagery and materials has been fed into the design process however further engagement would take place when more final working drafts are available.	
	Mrs Llewelyn advised that updates on this key piece of work will be fed back to the Committee on a quarterly basis through the Integrated Performance Report.	
	Miss Battle and the Chair thanked Mrs Llewelyn and her team for all their work.	
	Mrs Yvonne Burson left the Committee meeting	
	The Committee <b>NOTED</b> the Charitable Funds Story.	
CF(19)041	MINUTES OF THE MEETING HELD ON 18 <sup>TH</sup> JUNE 2019	

<b>RESOLVED</b> - that the minutes of the Charitable Funds Committee	
meeting held on 18 <sup>th</sup> June 2019 be approved as a correct record, subject	
to the following addition:	

• Page 6 – add 'representation' – Charitable Funds *representation* **EM** in future.

	MATTERS ARISING NOT ON THE AGENDA 18 <sup>TH</sup> JUNE 2019
	No matters arising were discussed.

# CF(19)043 TABLE OF ACTIONS FROM THE MEETING HELD ON THE 18<sup>TH</sup> JUNE 2019

c ł	An update was provided on the Table of Actions from the meeting held on 18 <sup>th</sup> June 2019 and confirmation received that all outstanding actions have been progressed other than those that had been deferred until a later meeting as noted on the Table of Actions.	
	<ul> <li>Discussion was held on the following:</li> <li>CF(19)028 - Charitable Funds Committee Risk Register - guidance on the operations of external charities on UHB premises is being included in the revised 'Charitable Funds: Financial Administration and Governance Policy (420)' rather than developing a new standalone corporate policy. The revised policy is being presented to the October 2019 Finance Committee meeting. It was noted that as part of the targeted consultation process, CFC members will be invited to contribute to the policy.</li> <li>CF(19)034 - Monitoring of Previously Agreed Expenditure – Members agreed that an impact report should come back to the Committee in March 2020 and also to defer the 6 month impact report on the LD care bundle to March 2020.</li> <li>CF(19)036 Any Other Business – It was suggested reducing the length of meetings in order to incorporate an hour's visit. It was agreed to hold the March 2020 meeting at Withybush General Hospital.</li> </ul>	SD/ CC CW
· · ·	HYWEL DDA HEALTH CHARITIES ANNUAL ACCOUNTS & REPORT	
	2018-19 Mr. Joromy Soundars undeted the Committee on the recent sudit of the	
ļ	Mr Jeremy Saunders updated the Committee on the recent audit of the Annual Accounts & Report for 2018-19, advising that this work had been undertaken a quarter earlier than the previous year.	
t a	The WAO Audit of Financial Statements report sets out for consideration the matters arising from the audit that require reporting under ISA620 and other issues raised in the audit of a less significant nature. Following the audit for the year ending 31 <sup>st</sup> March 2019, it is the Auditor General's intention to issue an unqualified audit report.	
	<ul> <li>Typographical error on SBAR – should read 2020 and not 2019 in SITUATION section.</li> </ul>	ЕМ
	The Chair warmly welcomed the report and the following matters were brought to the Committee's attention:	
	<ul> <li>There were no concerns in respect of the qualitative aspects of the Health Charities' practices and financial reporting.</li> </ul>	
	• There were no significant issues arising during the audit.	
	<ul> <li>There were no significant matters discussed and corresponded on with management or any matters significant to the oversight of the financial reporting process that needed reporting.</li> </ul>	
	• There were no material weaknesses in the Health Charities'	
	costs.	

Charity Commission and that WAO audits the accounts and Annual Report based on the Charity SORP (Statements of Recommended Practice) and as part of charity reporting arrangements when there is also a requirement to report on the charity's public benefit. It was noted that the CFC had previously approved eligibility criteria for charitable expenditure which is used to determine the eligibility of items of expenditure.	
Miss Battle suggested that an expert in charity law could be invited to attend a future Board Seminar Session for all Corporate Trustees to discuss best practice in order that the charity is assured that charitable donations are supporting purchases which get the best results for our patients.	NLI/AG
Mr Owen Burt noted a number of incorrect arrival and departure dates of Hywel Dda UHB Board Members on page 36 of the report. It was recommended that the table of dates is reviewed with the governance team.	GOV TEAM
<i>Mr Jeremy Saunders left the Committee meeting</i> The Committee <b>APPROVED</b> the Hywel Dda Health Charities Annual Accounts & Report for 2018-19.	

CF(19)045	CHAIR'S ACTIONS & DECISIONS TAKEN OUTSIDE OF CFC MEETINGS	
	There were no actions or decisions taken outside of Charitable Funds Committee meetings.	

#### CF(19)046 CHARITABLE FUNDS OPERATIONS SUB-COMMITTEE UPDATE REPORT

Mr Matthew Willis provided an update report from the Charitable Funds Operations Sub-Committee meeting held on the 3<sup>rd</sup> September 2019. Mr Willis provided assurance to the Committee that recent changes to the nature and structure of the Sub-Committee meetings had resulted in improved attendance.

Mr Willis provided the following highlights:

- The Sub-Committee had met on 3 occasions and was quorate at each meeting.
- 14 requests valued at £73,562 have been approved.
- 5 requests are presently on hold whilst further information is obtained.
- 0 requests were approved through Chair's action.
- 2 requests were rejected.
- 1 request was recommended for Executive Director approval value £32,915.
- No requests have been considered and recommended for Charitable Funds Committee approval.
- There were no departures from Health Board Policy to highlight.

Mr Willis presented two items for consideration by the Committee: 1. A proposal from the Director of Operations on the principle of using charitable monies as a gesture to support staff working beyond expectations during the winter months. 2. Internal design fees for charitable funded projects – this matter was highlighted by the Sub-Committee following the recent approval of a garden development for dementia patients at Prince Philip Hospital. The Sub-Committee had noted the level of internal estates fees relating to the scheme and associated works which follows the arrangements for discretionary capital funded schemes. The Sub-Committee felt that it was not appropriate for charitable funded projects to be managed in the same way and the Sub-Committee had agreed to commission a review of the situation. In relation to the staff recognition proposal, whilst Members endorsing the charity's role in supporting staff wellbeing, Members felt that it was not possible to approve a proposal without additional information on the scale and nature of charitable expenditure. Members agreed that any proposals around staff wellbeing and recognition should be developed in conjunction with front line staff, as well as with community services staff. Mr Willis confirmed that a summary of discussions would be fed back to the next meeting of the Sub-Committee on 4<sup>th</sup> October where a **MW/GR** request to develop a more in-depth proposal would be made to Operations colleagues with the support of Mrs Llewelyn advising on eligibility and accessing charitable funds for the proposal and reported back to the Committee. It was also acknowledged that the annual Christmas expenditure mechanism is already in place for accessing charitable funds and that this could potentially be considered for this request. It was agreed that once a formal proposal had been developed. Mrs Llewelyn would support colleagues on the most appropriate way forward to access charitable funds for this purpose. **GR/RE** In relation to the second proposal, Mrs Llewelyn advised that the Sub-Committee Chair would be discussing this matter with the Director of Estates and that a further update would follow. Further discussions were held on a number of the items within the update report; Tilt-in space shower chair – clarity was provided that patients would still be able to attend to their personal hygiene without this specific chair, but that this chair would enhance their experience. > A discussion on funding of shared and integrated community equipment stores would be presented to the Board at some point in the near future. Applications are being sent to the

Charity to purchase specialist equipment for community

equipment stores that they do not have the ability to purchase

	themselves.	
	The Committee <b>DISCUSSED</b> and <b>APPROVED</b> the Charitable Funds Operations Sub-Committee Update Report, including items recommended for approval, Sub-Committee decisions and other decisions taken.	
CF(19)047	CHARITABLE FUNDS COMMITTEE RISK REGISTER	
	Ms Sarah Jennings updated the Committee on the ongoing risk and reputational damage by default due to association with external charities. Ms Jennings confirmed that the HDdUHB's Standards of Behaviour policy has undergone a full review and been assessed against similar policies across Wales. The policy was approved at the Business Planning & Performance Assurance Committee on 29 <sup>th</sup> August 2019 and would be linked to the revised 'Charitable Funds: Financial Administration and Governance Policy' once approved. The Communications Plan will involve the use of team brief, payslip information advice section and the intranet. Global emails will be used to remind employees and Independent Members of the policy and their responsibility to comply with it. Awareness of the policy will be raised at specific groups/forums for example the Local Partnership Forum and	
	other key meetings. The Assistant Director of the Medical Directorate has commenced meetings with key clinicians to discuss the importance of declaring all external interests. A presentation was delivered at the May 2019 Operations Business meeting on the revised policy as part of targeted consultation.	
	Guidance on the operation of external charities on UHB premises is being included in the revised 'Charitable Funds: Financial Administration and Governance Policy (420)' rather than developing a new corporate policy.	
	A brief discussion ensued on the tolerance level for this risk due to the nature of the risk and whether the target risk score of 4 would be achievable. Following discussion it was agreed that a target risk of 8 would be more achievable within the tolerance level of the Committee's risk register.	
	A further update will be provided at the next Committee meeting as part of the standard agenda item.	SJ
	<ul> <li>The Committee:</li> <li>REVIEWED and SCRUTINISED the risk register to seek assurance that all relevant controls and mitigating actions are in place.</li> <li>DISCUSSED whether the planned actions will reduce the risk further and/or mitigate the impact if the risk materialises.</li> <li>APPROVED an increased tolerance level above 8 for the Charitable Funds Committee's risks.</li> </ul>	

	REPORT	
	Ms Jennings and Mrs Llewelyn provided a summary of the Hywel Dda Health Charities' performance as at 31 <sup>st</sup> July 2019.	
	A decline of 12% in voluntary income across Carmarthenshire was noted by the Chair and following discussion on the possible reasons for this, Mrs Llewelyn agreed to bring an in-depth analysis and evidence of recent donation trends to the planned December workshop.	JT/ NLI
	<ul> <li>A brief discussion was held on the following items:</li> <li>New fundraising database is now online and training scheduled to allow the fundraising team to begin to use the system.</li> <li>An online application form for charitable funds requests is being considered as an area of service improvement.</li> <li>The Charity has exceeded its target in fundraising during this quarter in a number of areas.</li> <li>Independent Members being champions during their walkrounds across the Health Board.</li> <li>To consider the staff lottery scheme in March 2020 and how this could be implemented and the income utilised to support workforce.</li> <li>Trends in social media messages and how this is affecting the charitable sector.</li> <li>To keep challenging our investors</li> </ul>	
-	The Committee <b>APPROVED</b> the content of the Integrated Hywel Dda Health Charities Performance Report and received assurance on the charity's performance.	
CF(19)049	PEMBROKESHIRE CANCER SERVICES	
	Members noted that the purpose of this report is to request the approval of charitable funds held by the University Health Board to support enhancements to the Ward 10 refurbishment scheme at Withybush General Hospital (WGH) to improve the patient experience, above and beyond what the NHS can provide. Members noted that the Business Justification Case was approved in	
	September 2017 with refurbishment works on Ward 9 at WGH completed in Spring 2019. The anticipated date of Ward 10 completion is December 2019. During the refurbishment, there would be an opportunity to revisit the ward to explore additional enhancements that could be made above and beyond what the NHS can provide.	
	The paper identified items that would be included in order to provide additional patient comforts, to improve the ward environment, some specialist equipment, technology and some enhanced staff training.	
	Following Mrs Llewelyn's update, Miss Battle suggested additional areas for consideration based on her experiences in Cardiff & Vale Health Board – coloured crockery, garden areas (with probation pay back teams to maintain these) and gym facilities.	
	The breakdown of the charitable funds contribution is set out below:	

	<ul> <li>£196,070 from the Elly's Ward 10 Flag Appeal charitable fund (T928) and any subsequent donations received for the scheme until the closure of the appeal fund.</li> </ul>	
	• £31,348 from the WGH Ward 10 legacy fund (T517).	
	<ul> <li>£31,796 from Pembrokeshire Cancer Services charitable fund (T905).</li> </ul>	
	The Committee <b>CONSIDERED</b> and <b>APPROVED</b> the request to contribute £259,214 of charitable funds to support an enhanced scheme which will improve the experience for patients using Ward 10 at Withybush General Hospital.	
05(40)050		
CF(19)050	CEREDIGION PROPERTY OPTIONS	
	Ms Jennings provided on behalf of the Director of Finance a brief update on the options and recommendations of the property bequeathed in Ceredigion:	
	Option 1 - Do nothing and continue to receive rental from the Health Board	
	Option 2 - Sell at market value Option 3 - Sell at District Valuation (DV) rate to the Health Board Option 4 - 'Donate it' to the Health Board and transfer ownership from Hywel Dda Charities to Hywel Dda Health Board.	
	<ul> <li>Discussion was held on the following:</li> <li>The Committee was reminded that it needed to act in the best interests of the charity.</li> <li>It was agreed that the paper needed to reflect this responsibility to avoid any potential conflict of interest between the UHB and the</li> </ul>	
	<ul> <li>charity.</li> <li>The Committee requested that the pros and cons table be rewritten to reflect this responsibility and to include further detail, before being presented back to the Committee in March 2020.</li> <li>The Committee asked that Finance and Estates colleagues hold further discussions on the history, the costs of each option, how and why this property came into the possession of the charity and to obtain a site map of the property.</li> </ul>	JT JT/RE
	It was suggested that Mr Stephen Forster, Strategic Change Finance Director, would have more information in this regard.	
	It was suggested that this item could be taken to the planned December 2019 workshop for discussion and that a final paper be brought back to the March 2020 meeting for decision.	JT
	The Committee <b>DISCUSSED</b> the options available and agreed the principles. For further discussion at the planned December workshop with a final decision at the March 2020 Committee meeting.	
05/40)054	FUNDRAISING APPEAL FOR THE DEVELOPMENT OF A NEW	

#### CF(19)051 FUNDRAISING APPEAL FOR THE DEVELOPMENT OF A NEW CHEMOTHERAPY DAY UNIT AT BRONGLAIS GENERAL HOSPITAL

Members were reminded of the visit to the Chemotherapy Day Unit at Bronglais General Hospital in June 2019 and that a business case relating to the development of a new Chemotherapy Day Unit is due to be presented at a forthcoming Public Board meeting. An element of the business case will discuss the capital investment requirements for the development and the status of funding available. The business case will also propose that a fundraising appeal is developed under the umbrella of Hywel Dda Health Charities to meet the shortfall in funds required for the development.

Members noted that following approval of the development, it is proposed that a fundraising appeal is launched to support the development and this paper presents a summary of areas for the Charitable Funds Committee's consideration in respect of a fundraising appeal under the umbrella of Hywel Dda Health Charities in line with Charity Commission guidance.

Members further noted that significant funds are committed to the appeal with positive discussions currently taking place. Members were informed that the project requires funding to the tune of  $\pounds$ 1,822,306 and that an estimated  $\pounds$ 0.594m is required to meet the shortfall in funds.

Members were asked to consider the public benefit requirements, the application of funds raised, the fundraising target, the approach to fundraising and the governance arrangements herewith.

It was proposed that a Fundraising Sub-Committee of the Project Group would be established to oversee the development and implementation of a fundraising appeal. The Sub-Committee would then report to the Charitable Funds Committee on a quarterly basis.

Mrs Llewelyn asked the Committee to formally approve this appeal to meet the shortfall subject to the recommendations noted at the end of the report. Ms Jennings asked for the below amendment in italics and bold to the first recommendation to read:

EM

"APPROVE the development of a fundraising appeal under the umbrella of Hywel Dda Health Charities for a new Chemotherapy Day Unit at Bronglais General Hospital, *subject to confirmation of the availability of the proposed location for the development (following the pilot of the shared care model with Y Banwy and Enlli Ward)*"

#### The Committee

- **APPROVED** the development of a fundraising appeal under the umbrella of Hywel Dda Health Charities for a new Chemotherapy Day Unit at Bronglais Hospital, subject to confirmation of the availability of the proposed location for the development (following the pilot of the shared care model with y Banwy and Enlli Ward)
- **CONSIDERED** and **AGREED** the most appropriate purpose(s) for

	the charitable appeal.	
	• <b>REAFFIRMED ITS COMMITMENT</b> to the £250,000 of charitable funds committed to the scheme in 2015 and <b>APPROVED</b> the additional sum of £9,977 of current and any future interest growth to the scheme.	
	• <b>APPROVED</b> the contribution of £287,496 from the Ceredigion Cancer Services charitable fund (T865) to the development.	
	NOTED the governance arrangements for the fundraising appeal.	
	<ul> <li>ENDORSED the secondary purpose recommendation of the fundraising appeal for the development of a new Chemotherapy Day Unit at Bronglais General Hospital.</li> </ul>	
CF(19)052	CHARITABLE FUNDS COMMITTEE WORK PROGRAMME 2019/20	
	It was agreed that a number of items on the work plan for December 2019 would be stood down due to the focus of this meeting being a workshop.	CW
	The Committee <b>NOTED</b> the CFC Work Programme for 2019/20.	
CF(19)053	ANY OTHER BUSINESS Wales for Africa – following the 2018 Internal Audit Report, Ms Jennings confirmed that the recommendation for the Committee was now closed. Ms Jennings advised that correspondence has been sent to all grant funders associated with the T607 fund to confirm that the funded projects are considered to be completed and the grants closed. The T607 charitable fund is now being closed and this process will be completed by 20 <sup>th</sup> September 2019. Any future projects requesting support of this nature will be required to follow the UHB's International Health Partnership Governance Framework and the guidance specifically relating to the management of grants.	
	<ul> <li>Reflective Summary – Ms Jennings provided a brief summary of the meeting:</li> <li>Hywel Dda Health Charities brand refresh</li> <li>Withybush General Hospital visit – to consider future visits</li> <li>Received and welcomed Wales Audit Office Annual Report &amp; Accounts – to review the terms of trustees prior to approval</li> <li>Sub-Committee Update Report – suggestion to use the Christmas monies approach to support proposals from the Operations directorate around staff wellbeing and recognition. Estate costs of capital schemes relating to charitable funds also discussed.</li> <li>Risk Register scoring to be changed to an 8 – expect to remove this risk by the March 2020 Committee meeting.</li> <li>IPR – 12% decrease in Carmarthenshire donations. Staff ideas/Ironman/Long Course Weekend/Maria's Marvels.</li> </ul>	

	<ul> <li>Ceredigion property options – report to be rewritten and presented to the Committee in March 2020.</li> <li>CDU at Bronglais – to amend the recommended risk pending Board approval of the development</li> <li>Wales for Africa internal audit report – action for the Committee has now been closed</li> </ul>	
CF(19)054	DATE AND TIME OF NEXT MEETING	
	Monday 16 <sup>th</sup> December 2019, 9.00am – 4.30 p.m. Boardroom, Ystwyth, St David's Park, Carmarthen.	



## TABLE OF ACTIONS FROM CHARITABLE FUNDS COMMITTEE MEETING HELD ON 20<sup>TH</sup> SEPTEMBER 2019

MINUTE REFERENCE	MEETING DATE	ACTION	LEAD	TIMESCALE	PROGRESS
CF(19)040	20.09.2019	<ul> <li>Charitable Funds Story</li> <li>To re-look at how the charity's imagery could be modernised and aligned with the UHB's corporate brand and report back to the Committee.</li> </ul>	NLI	March 2020	Complete - Refresh of imagery complete, new materials currently in production
CF(19)041	20.09.2019	<ul> <li>Minutes of the Meeting Held on 18<sup>th</sup> June 2019</li> <li>Page 6 – add the word 'representation' to read – Charitable Funds representation in future</li> </ul>	EM	Sept 2019	Complete
CF(19)034 CF(19)043	18.06.2019 20.09.2019	<ul> <li>Table of Actions from the Meeting Held on 14<sup>th</sup> March 2019</li> <li>To produce an update report on the effectiveness of the visual aid boxes from Psychological Support Services</li> <li>Table of Actions from the Meeting Held on 18<sup>th</sup> June 2019</li> </ul>	GB	March 2020	Forward planned for inclusion on the March 2020 CFC agenda

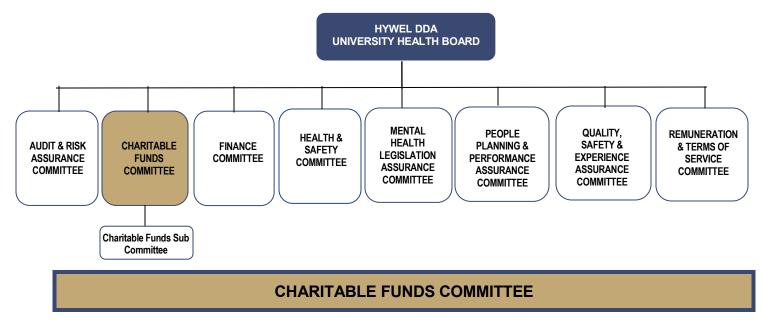
MINUTE REFERENCE	MEETING DATE	ACTION	LEAD	TIMESCALE	PROGRESS
		• CF (19)034 - Monitoring of Previously Agreed Expenditure - to produce a 6- month impact report on the LD care bundle.	SD/CC	March 2020	Forward planned for inclusion on the March 2020 CFC agenda
		<ul> <li>CF (19)036 Any Other Business – to hold the March 2020 meeting at Withybush General Hospital to incorporate an hour's visit to Ward 10.</li> </ul>	CW	Oct 2019	Complete
CF(19)044	20.09.2019	Hywel Dda Health Charities Annual Accounts & Report 2018-19			
		<ul> <li>Typo on SBAR – should read 2020 and not 2019 in SITUATION section.</li> <li>To arrange a future board seminar session for all Corporate Trustees on the role of Corporate Trustees</li> </ul>	EM NLI/AG	Oct 2019 June 2020	Complete
		• To review the table of arrival/departure dates within the Final Report – Section 7 Structure, governance and management.	GOV TEAM	Oct 2019	Complete
CF(19)046	20.09.2019	Charitable Funds Operations Sub- Committee Update Report			
		• For an update to be provided to the Committee on the staff recognition proposal following discussions at the Sub Committee.	MW/GR	Dec 2019	Stood down – no appetite from service leaders due to complication in its administration

MINUTE REFERENCE	MEETING DATE	ACTION	LEAD	TIMESCALE	PROGRESS
		• To provide additional information in relation to the Estates Department's proposal to use charitable funding to pay for internal fees for the design of capital schemes relating to charitable funds.	GR/RE	March 2020	Forward planned for inclusion on the March 2020 CFC agenda. (Update from G Rees 17/2/20 – awaiting member of staff return from long term sick leave).
CF(19)047	20.09.2019	Charitable Funds Committee Risk Register			
		<ul> <li>An assurance update report to be provided at next meeting</li> </ul>	SJ	Dec 2019	Deferred to March 2020 CFC Agenda
CF(18)071 CF(19)014 CF(19)029	20.12.2018/ 14.03.2019/ 18.06.2019/	Integrated Hywel Dda Health Charities Performance Report • To bring an in-depth analysis and	JT/NLI	Dec 2019	Complete
CF(19)048	20.09.2019	evidence of recent donation trends to the planned December workshop.			
CF(19)030	18.06.2019	<ul> <li>Investor Advisor Performance Update</li> <li>To bring a report back to committee every 6 months showing Sarasin's decision making processes that we can incorporate into our annual report.</li> </ul>	AT	6 monthly	Forward planned for inclusion on the March 2020 CFC agenda
CF(19)031	14.03.2019	<ul> <li>Expenditure &amp; Commitments Requiring Approval</li> <li>Review Tŷ Bryngwyn support costs arrangement with the relevant Finance Business Partner.</li> </ul>	JT	Mar 2020	Complete
CF(19)050	20.09.2019	<ul><li>Ceredigion Property Options</li><li>To rewrite the pros and cons table from</li></ul>	JT	February 2020	Complete

MINUTE REFERENCE	MEETING DATE	ACTION	LEAD	TIMESCALE	PROGRESS
		<ul> <li>the perspective of the charity's responsibility, to include further detail.</li> <li>For Finance and Estates colleagues to hold further discussions on the history, the costs of each option, how and why this property came into the possession of the charity and to obtain a site map of the property.</li> </ul>	JT/RE	February 2020	Complete
		<ul> <li>A final report to be brought back to the March 2020 meeting for decision.</li> </ul>	JT	March 2020	Forward planned for inclusion on the March 2020 CFC agenda
CF(19)051	20.09.2019	<ul> <li>Fundraising appeal for the development of a new Chemotherapy Day Unit at</li> <li>Bronglais General Hospital</li> <li>To make amendment to the first recommendation in the paper to read "APPROVE the development of a fundraising appeal under the umbrella of Hywel Dda Health Charities for a new Chemotherapy Day Unit at Bronglais General Hospital, subject to confirmation of the availability of the proposed location for the development (following the pilot of the shared care model with Y Banwy and Enlli Ward)".</li> </ul>	EM	October 2019	Complete
CF(19)052	20.09.2019	Charitable Funds Committee Work Programme 2019/20			
		• To stand down some items on December meeting agenda due to the meeting taking the form of a workshop	CW	November 2019	Complete



Bwrdd Iechyd Prifysgol Hywel Dda University Health Board



#### TERMS OF REFERENCE

Version	Issued To	Date	Comments
V0.1	Charitable Funds Committee	11.06.2012	Approved
V0.2	Hywel Dda Health Board (SO's)	27.09.2012	Approved
V0.3	Charitable Funds Committee	18.06.2013	Approved
V0.4	Charitable Funds Committee	03.09.2013	Approved
V0.5	Charitable Funds Committee	12.12.2013	Approved
V0.6	Charitable Funds Committee	09.10.2013	Approved
V0.7	Charitable Funds Committee	16.12.2014	Approved
V0.8	Charitable Funds Committee	10.03.2015	Approved
	Hywel Dda University Health Board	26.03.2015	Approved
V0.9	Charitable Funds Committee	29.06.2015	Approved
V0.10	Hywel Dda University Health Board	26.11.2015	Approved
V0.11	Charitable Funds Committee	29.11.2016	Approved
V0.12	Hywel Dda University Health Board	26.01.2017	Approved
V0.13	Charitable Funds Committee	15.06.2017	Approved
V0.14	Charitable Funds Committee	15.03.2018	Approved
V0.15	Hywel Dda University Health Board	29.03.2018	Approved
V0.16	Charitable Funds Committee	14.03.2019	Approved
V0.16	Hywel Dda University Health Board	30.05.2019	Approved
V0.17	Charitable Funds Committee	17.03.2020	

#### CHARITABLE FUNDS COMMITTEE

#### 1. Introduction

- 1.1 The Hywel Dda University Local Health Board's standing orders provide that "The Board may and, where directed by the Welsh Government must, appoint Committees of the UHB either to undertake specific functions on the Board's behalf or to provide advice and assurance to the Board in the exercise of its functions. The Board's commitment to openness and transparency in the conduct of all its business extends equally to the work carried out on its behalf by committees".
- 1.2 In accordance with the Standing Orders (and the UHB's Scheme of Delegation), the Board has nominated a Committee to be known as the Charitable Funds Committee (the Committee). The detailed terms of reference and operating arrangements set by the Board in respect of this Committee are set out below.

#### 2. Constitution

- 2.1 Hywel Dda University Local Health Board was appointed as corporate trustee of the charitable funds by virtue of Statutory Instrument 2009 No. 778 (W.66) and that its Board serves as its agent in the administration of the charitable funds held by the UHB.
- 2.2 The Committee has been established as a Committee of the Hywel Dda University Local Health Board (HDdUHB) and constituted from 22<sup>nd</sup> July 2010.

#### 3. Membership

3.1 The membership of the Committee shall comprise of the following:

Member
Independent Member (Chair)
Independent Member (Vice-Chair)
4 x Independent Members
Chief Executive
Executive Director of Finance
Director of Partnerships and Corporate Services (Lead Director) for Hywel Dda Health Charities

The following should attend Committee meetings:

In Attendance
Assistant Director of Finance (Finance Systems and Statutory Reporting)
Senior Finance Business Partner (Accounting & Statutory and Reporting)
Deputy Director of Operations
Head of Hywel Dda Health Charities
Staff Side Representative

- 3.2 A standing invitation is extended for a representative of the Hywel Dda Community Health Council to attend in an observer capacity.
- 3.3 Membership of the Committee will be reviewed on an annual basis.

#### 4. Quorum and Attendance

- 4.1 A quorum shall consist of no less than four of the membership and must include as a minimum the Chair or Vice Chair of the Committee, and one other Independent Member, as well as the Executive Director of Finance and the Lead for Hywel Dda Health Charities (or their suitably briefed deputies).
- 4.2 The membership of the Committee shall be determined by the Board of the Corporate Trustee (HDdUHB), based on the recommendation of the UHB Chair, taking into account the balance of skills and expertise necessary to deliver the Committee's remit and subject to any specific requirements or directions made by the Welsh Government.
- 4.3 Any senior officer of the UHB or partner organisation may, where appropriate, be invited to attend, for either all or part of a meeting to assist with discussions on a particular matter.
- 4.4 The Committee may also co-opt additional independent external 'experts' from outside the organisation to provide specialist skills.
- 4.5 The Chairman of the UHB reserves the right to attend any of the Committee's meetings as an ex officio member.
- 4.6 Should any officer member be unavailable to attend, they may nominate a deputy with full voting rights to attend in their place, subject to the agreement of the Chair.
- 4.7 The Head of Internal Audit shall have unrestricted and confidential access to the Chair of the Charitable Funds Committee.
- 4.8 The Committee will invite External Audit to attend once a year to provide the Committee with assurance on processes and end of year accounts.
- 4.9 The Committee may also extend the membership to include independent members outside of the Board (e.g. a nomination from Stakeholder Reference Group).
- 4.10 The Chair of the Charitable Funds Committee shall have reasonable access to Executive Directors and other relevant senior staff.
- 4.11 The Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

#### 5. Purpose

The purpose of the Charitable Funds Committee is:

- 5.1 To make and monitor arrangements for the control and management of the Board's Charitable Funds, within the budget, priorities and spending criteria determined by the Board and consistent with the legislative framework.
- 5.2 To provide assurance to the Board in its role as corporate trustees of the charitable funds held and administered by the Health Board.
- 5.3 To agree issues to be escalated to the Board with recommendations for action.

#### 6. Key Responsibilities

The Charitable Funds Committee shall:

- 6.1 Within the budget, priorities and spending criteria determined by the UHB as trustee, and consistent with the requirements of the Charities Act 2011 (or any modification of these acts), to apply the charitable funds in accordance with its respective governing documents.
- 6.2 To devise, implement and approve appropriate procedures and policies to ensure that fundraising and accounting systems are robust, donations are received and coded as instructed and that all expenditure is reasonable, clinically and ethically appropriate.
- 6.3 To ensure that the UHB policies and procedures for charitable funds investments are followed.
- 6.4 In addition, to make decisions involving the sound investment of charitable funds in a way that both preserves their value and produces a proper return consistent with prudent investment and ensuring compliance with:
  - 6.4.1 Trustee Act 2000
  - 6.4.2 The Charities Act 2011
  - 6.4.3 Terms of the fund's governing documents
- 6.5 To receive at least twice a year reports for ratification from the Executive Director of Finance, and investment decisions and action taken through delegated powers upon the advice of the UHB's investment adviser.
- 6.6 To oversee and monitor the functions performed by the Executive Director of Finance as defined in the UHB's Standing Financial Instructions.
- 6.7 To monitor the progress of Charitable Appeal Funds where these are in place and considered to be material.
- 6.8 To monitor and review the UHB's scheme of delegation for Charitable Funds expenditure and to set and reflect in Financial Procedures the approved delegated limits for expenditure from Charitable Funds.

- 6.9 Overseeing the day to day management of the investments of the charitable funds in accordance with the investment strategy set down from time to time by the Trustees, and in accordance with the requirements of the UHB's Standing Financial Instructions.
- 6.10 The appointment of an Investment Manager (where appropriate) to advise it on investment matters and the delegation of day-to-day management of some or all of the investments to that Investment Manager. The Investment Manager, if appointed, must actively manage the charitable fund on behalf of Trustees. In exercising this power, the Committee must ensure that:
  - 6.10.1 The scope of the power delegated is clearly set out in writing and communicated with the person or persons who will exercise it;
  - 6.10.2 There are in place adequate internal controls and procedures which will ensure that the power is being exercised properly and prudently;
  - 6.10.3 The performance of the person or persons exercising the delegated power is regularly reviewed;
  - 6.10.4 Where an investment manager is appointed, that the person is regulated under the Financial Services Act 1986;
  - 6.10.5 Acquisitions or disposal of a material nature outside the terms of agreement must always have written authority of the Committee or the Chair of the Committee in conjunction with the Executive Director of Finance.
- 6.11 Ensuring that the banking arrangements for the charitable funds should be kept entirely distinct from the UHB's NHS funds.
- 6.12 Ensuring that arrangements are in place to maintain current account balances at minimum operational levels consistent with meeting expenditure obligations, the balance of funds being invested in interest bearing deposit accounts.
- 6.13 The amount to be invested or redeemed from the sale of investments shall have regard to the requirements for immediate and future expenditure commitments.
- 6.14 The operation of an investment pool when this is considered appropriate to the charity in accordance with charity law and the directions and guidance of the Charity Commission. The Committee shall propose the basis to the UHB Board for applying accrued income to individual funds in line with charity law and Charity Commission guidance.
- 6.15 Obtaining appropriate professional advice to support its investment activities.
- 6.16 Regularly reviewing investments to see if other opportunities or investment services offer a better return.
- 6.17 Reviewing alternative sources of funding to donations and legacies which could provide the Committee with additional leverage and access to additional funds.
- 6.18 By giving reasonable notice, require the attendance of any of the officers or employees and auditors of the Board at any meeting.
- 6.19 The following thresholds are approved in the Charitable Funds Procedure:

"Expenditure less than £5,000 shall only need approval by the nominated fund manager. All expenditure in excess of £5,000 and up to £25,000 will require the approval of the Deputy Director of Operations on behalf of the Charitable Funds Operations Sub-Committee. All expenditure in excess of £25,000 and up to £50,000 will require the approval of an Executive Director. Expenditure in excess of £50,000 will require the approval of the Charitable Funds Committee."

- 6.20 In addition, further clarification is provided in the associated guidance to budget holders as follows: *"Unusual or novel expenditure requests, and expenditure requests resulting in ongoing charitable fund commitment, or revenue resource commitment, will need prior Charitable Funds Committee approval prior to purchase, regardless of value. If this is deemed to be necessary [by senior finance staff], the authorised signatory will be advised."*
- 6.21 It also states that the following expenditure types require Committee approval:
  - "Research & development expenditure"
  - "Pay expenditure"
  - "Training including conferences/seminars etc requiring attendance of participants outside the UK"

Therefore, items requiring urgent Chair's Action will generally be expenditure on equipment greater than £50,000 value, or anything that falls under the criteria above. All expenditure requests made via Chair's Actions will be considered on a case by case basis, as an exception rather than the rule. The presumption will be that other than equipment (in excess of £50,000) and smaller research projects (up to £25,000), items can be deferred to the next meeting.

- 6.22 The Chair's decision on which items can be approved outside of the Committee will be final and all items approved outside of the full Committee will be reported to the next Committee meeting for ratification.
- 6.23 The Committee shall embed the UHB's vision, corporate standards, priorities and requirements, e.g. equality and human rights, through the conduct of its business.
- 6.24 The requirements for the conduct of business as set out in the UHB's Standing Orders are equally applicable to the operation of the Committee.
- 6.23 The Committee will seek assurance on the management of principal risks within the Board Assurance Framework and Corporate Risk Register allocated to the Committee and provide assurance to the Board that risks are being managed effectively and report any areas of significant concern e.g. where risk tolerance is exceeded, lack of timely action, etc.
- 6.24 Recommend acceptance of risks that cannot be brought within the UHBs risk appetite/tolerance to the Board through the Committee Update Report.

#### 7. Delegated Powers and Duties of the **Executive** Director of Finance

- 7.1 The Executive Director of Finance has prime financial responsibility for the UHB's Charitable Funds as defined in the UHB's Standing Financial Instructions. The specific powers, duties and responsibilities delegated to the Executive Director of Finance are:
  - 7.1.1 Administration of all existing charitable funds.

- 7.1.2 To identify any new charity that may be created (of which the UHB is trustee) and to deal with any legal steps that may be required to formalise the trusts of any such charity.
- 7.1.3 To provide guidelines with respect to donations, legacies and bequests, fundraising and trading income.
- 7.1.4 Responsibility for the management of investment of funds held on trust.
- 7.1.5 To ensure appropriate banking services are available to the UHB.
- 7.1.6 To prepare reports to the UHB Board including the Annual Report and Accounts.

#### 8. Agenda and Papers

- 8.1 The Committee Secretary is to hold an agenda setting meeting with the Chair and/or Vice-Chair, the Lead Director for Hywel Dda Health Charities and the Executive Director of Finance or their nominated deputies) at least **six** weeks before the meeting date.
- 8.2 The agenda will be based around the Committee work plan, identified risks, matters arising from previous meeting, issues emerging throughout the year, and requests from Committee members. Following approval, the agenda and timetable for request of papers will be circulated to all Committee members.
- 8.3 All papers must be approved by the Lead/relevant Director.
- 8.4 The agenda and papers for meetings will be distributed **seven** days in advance of the meeting, electronically.
- 8.5 The minutes and action log will be circulated to members within **ten** days to check their accuracy.
- 8.6 Members must forward amendments to the Committee Secretary within the next **seven** days. The Committee Secretary will then forward the final version to the Committee Chair for approval.

#### 9. In Committee

9.1 The Committee can operate with an In Committee function to receive updates on the management of sensitive and/or confidential information.

#### **10. Frequency of Meetings**

- 10.1 The Committee will meet no less than quarterly and shall agree an annual schedule of meetings. Additional meetings will be arranged as determined by the Chair of the Committee, in discussion with the Lead Director.
- 10.2 The Chair of the Committee, in discussion with the Committee Secretary, shall determine the time and the place of meetings of the Committee and procedures of such meetings.

#### 11. Accountability, Responsibility and Authority

11.1 Although, as set out within these terms of reference, the Board has delegated authority to the Committee for the exercise of certain functions, it retains overall responsibility and accountability

for ensuring the quality and safety of healthcare for its citizens, through the effective governance of the organisation.

- 11.2 The Committee is directly accountable to the Board for its performance in exercising the functions set out in these terms of reference.
- 11.3 The Committee shall embed the UHB's vision, corporate standards, priorities and requirements, e.g. equality and human rights, through the conduct of its business.
- 11.4 The requirements for the conduct of business as set out in the UHB's Standing Orders are equally applicable to the operation of the Committee.

#### 12. Reporting

- 12.1 The Committee Chair shall agree arrangements with the UHB's Chair to report to the Board in their capacity as Trustees. This may include, where appropriate, a separate meeting with the Board.
- 12.3 The Committee, through its Chair and members, shall work closely with the Board's other Committees, including joint/sub-committees and groups, to provide advice and assurance to the UHB through the:
  - 12.3.1 joint planning and co-ordination of Board and Committee business;
  - 12.3.2 sharing of information.
- 12.4 In doing so, the Committee shall contribute to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance framework.
- 12.5 The Committee may establish sub-committees or task and finish groups to carry out on its behalf specific aspects of Committee business. The Committee will receive an update following each sub-committee or task and finish group meeting detailing the business undertaken on its behalf.
- 12.6 The Committee shall establish the Charitable Funds Operations Sub-Committee to ensure that the UHB's policies and procedures are followed in relation to specialist designated and restricted funds.
- 12.7 The Committee Chair, supported by the Committee Secretary, shall:
  - 12.7.1 Report formally, regularly and on a timely basis to the Board on the Committee's activities in their capacity as trustees. This includes the submission of a written Committee update report as well as the presentation of an annual report and accounts prior to submission to the Charity Commission.
  - 12.7.2 Bring to the Board's specific attention any significant matter under consideration by the Committee.
  - 12.7.3 Ensure appropriate escalation arrangements are in place to alert the UHB Chair, Chief Executive or Chairs of other relevant Committees of any urgent/critical matters that may compromise patient care and affect the operation and/or reputation of the UHB.

12.8 The Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous selfassessment and evaluation of the Committee's performance and operation including that of any sub-committees established.

#### 13. Secretarial Support

13.1 The Committee Secretary shall be determined by the Board Secretary Director of Partnerships & Corporate Services.

#### 14. Review Date

14.1 These Terms of Reference and operating arrangements shall be reviewed on at least an annual basis by the Committee for approval by the Board.



#### PWYLLGOR CRONFA ELUSENNOL CHARITABLE FUNDS COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	17 March 2020
TEITL YR ADRODDIAD: TITLE OF REPORT:	Charitable Funds Committee Self-Assessment of Performance 2019/20
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Cllr. Simon Hancock, Chair Sarah Jennings, Director of Partnerships & Corporate Services
SWYDDOG ADRODD: REPORTING OFFICER:	Claire Williams, Committee Services Officer

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate) Ar Gyfer Trafodaeth/For Discussion

#### ADRODDIAD SCAA SBAR REPORT Sefyllfa / Situation

The purpose of this report is to present to the Charitable Funds Committee (CFC) Self-Assessment of Performance Questionnaire template intended for use to assess the Committee's effectiveness, to consider any amendments or omissions to ensure it remains fit for purpose for the Committee's annual self-assessment exercise 2019/20. **Cefndir / Background** 

In line with all Board level Committees' Terms of Reference, Members and In Attendance Members of the Charitable Funds Committee are required to complete an annual questionnaire to consider the Committee's effectiveness in providing assurance to the Board throughout the preceding year, and also to consider their individual understanding, role and contribution to the Committee.

#### Asesiad / Assessment

For the 2019/20 CFC self-assessment of Committee effectiveness exercise, it is intended to use the Self-Assessment of Performance Questionnaire template attached at Appendix 1, and to make use of Survey Monkey, an online survey development tool, to capture the responses made.

As well as requesting Members and In Attendance Members to score each of their responses to the questionnaire on a 6 point scale from Strongly Agree to Strongly Disagree, for any responses scoring Somewhat Agree or below, accompanying comments regarding any areas of concern or suggestions for improvement are required. The questionnaire has also been designed to invite free text comments on any improvements for consideration to assist the Committee in drawing up its own plan for improvement, either in terms of requesting future training and/or development, or in changes to its own processes and procedures.

The Charitable Funds Committee is requested to consider the proposed Self-Assessment of Committee Effectiveness Questionnaire template and support its use for 2019/20.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	10.5 The Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous self-assessment and evaluation of the Committee's performance and operation, including that of any sub committees established.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <u>Hyperlink to HDdUHB Well-being</u> <u>Statement</u>	Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth:	CFC Self-Assessment Questionnaire 2019/20
Evidence Base:	CFC Terms of Reference
Rhestr Termau:	Included within the body of the report
Glossary of Terms:	
Partïon / Pwyllgorau â	CFC Members
ymgynhorwyd ymlaen llaw y	
Pwyllgor Cynllunio Busnes a	
Sicrhau Perfformiad:	
Parties / Committees consulted prior	
to Charitable Funds Committee:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian:	
Financial / Service:	Not Applicable
Ansawdd / Gofal Claf:	Not Applicable
Quality / Patient Care:	
Gweithlu:	Not Applicable
Workforce:	

Risg: Risk:	Not Applicable
Cyfreithiol: Legal:	Not Applicable
Enw Da: Reputational:	Not Applicable
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable

#### Appendix 1

#### COMMITTEE EFFECTIVENESS REVIEW – CHARITABLE FUNDS COMMITTEE (CFC) – 2019/20

To be completed by the Membership (Member and In Attendance) as specified in the Committee's Terms of Reference.

My role is (please delete as appropriate):

- Member of CFC
- In Attendance Member of CFC

	Pleas	se mark you	r score in t		If a score of "3" or below is			
Question	1	2	3	4	5	6	U	given, your comments regarding any areas of concern and
	Strongly disagree	Disagree	Somewhat disagree	Somewhat agree	Agree	Strongly agree	Unable to assess/don't know	suggestions for improvement would be appreciated.
The Role/ Purpose of the Committee		1	1	I	1	-		
The role of the Charitable Funds								
Committee (CFC) is understood and								
clearly defined in its Terms of Reference.								
Committee Members understand their								
individual role and what is expected of								
them.								

	Pleas	se mark you	If a score of "3" or below is					
Question	1 Strongly disagree	2 Disagree	3 Somewhat disagree	4 Somewhat agree	5 Agree	6 Strongly agree	U Unable to assess/don't know	given, your comments regarding any areas of concern and suggestions for improvement would be appreciated.
The Committee is aware of the areas in which it can take decisions under the Scheme of Delegation.								
The frequency and scheduling of Committee meetings are sufficient to carry out its functions and responsibilities.								
The Committee has established and follows an agreed plan of work for the year.								
Scope of work							1	
The Committee receives sufficient and timely information to review, understand and assess the issues for discussion, on which to base its decisions.								
The quality of presentations made to the Committee is appropriate.								

	Pleas	se mark you	If a score of "3" or below is					
Question	1 Strongly disagree	2 Disagree	3 Somewhat disagree	4 Somewhat agree	5 Agree	6 Strongly agree	U Unable to assess/don't know	given, your comments regarding any areas of concern and suggestions for improvement would be appreciated.
The Committee understands the issues which are on the horizon for the Health Board which may impact on its areas of work.								
The work of the Committee culminates in appropriate recommendations to the Board.								
The Board takes due regard of the recommendations from the Committee.								
The Committee has effective escalation arrangements in place to alert relevant individuals and committees of any urgent/critical matters that may compromise patient care and affect the operation and/or reputation of the Health Board.								
Assurance	<u> </u>	1	1	<u> </u>	1		1	1
The Committee works effectively with its designated Sub-Committee.								

	Plea	se mark you	If a score of "3" or below is given, your comments regarding					
Question	1 Strongly disagree	2 Disagree	3 Somewhat disagree	4 Somewhat agree	5 Agree	6 Strongly agree	U Unable to assess/don't know	any areas of concern and suggestions for improvement would be appreciated.
The Committee is effective in providing assurance to the Board in its role as corporate trustees of the charitable funds held and administered by the Health Board.								
The Committee is effective in making and monitoring arrangements for the control and management of the Board's Charitable Funds, within the budget, priorities and spending criteria determined by the Board and consistent with the legislative framework.								
When areas of good practice emerge from the Committee's deliberations, there are effective arrangements in place for them to be shared with other committees/executives as appropriate.								
Overall, the Committee is effectively fulfilling its Terms of Reference.								

	Pleas	se mark you	If a score of "3" or below is					
Question	1 Strongly disagree	2 Disagree	3 Somewhat disagree	4 Somewhat agree	5 Agree	6 Strongly agree	U Unable to assess/don't know	given, your comments regarding any areas of concern and suggestions for improvement would be appreciated.
Meetings	1	1	1	I	1		1	
Committee meetings are scheduled with sufficient time to cover all agenda items, including discussion and answering questions.								
Committee meetings are managed and controlled effectively, and conducted in a business-like manner.								
The Committee meeting dynamic encourages full participation and open communications.								
Meeting time is used well with issues getting the time and attention proportionate to their importance.								
The length of the Committee's meetings is appropriate in relation to the agenda.								
Membership								

	Plea	se mark you	If a score of "3" or below is given, your comments regarding					
Question	1 Strongly disagree	2 Disagree	3 Somewhat disagree	4 Somewhat agree	5 Agree	6 Strongly agree	U Unable to assess/don't know	any areas of concern and suggestions for improvement would be appreciated.
Committee members receive induction, advice, support and ongoing development opportunities to support them in their role.								
Committee members have the collective skills, knowledge and experience to fulfil its Terms of Reference and to advise and assure the Board.								
The Committee is the right size and sufficiently diverse.								
Committee members come to meetings prepared and ready to contribute.								
There is consistent attendance and timely arrival by members at Committee meetings.								
Attendance at Committee meetings is evaluated as a criterion for continued membership on the Committee.								

	Pleas	se mark you	If a score of "3" or below is given, your comments regarding					
Question	1 Strongly disagree	2 Disagree	3 Somewhat disagree	4 Somewhat agree	5 Agree	6 Strongly agree	U Unable to assess/don't know	any areas of concern and suggestions for improvement would be appreciated.
Support for the Committee							1	I
An appropriate agenda is set before								
Committee meetings and is followed.								
The Committee receives clear and								
concise papers which focus on the key								
issues and priorities.								
The agenda and papers are received in a								
timely manner in advance of the								
meetings to allow time for appropriate review and preparation.								
The Committee enjoys a good working								
relationship with management and								
significant issues are reviewed with the								
Chief Executive Officer or the relevant Lead Director.								
The minutes of the meetings are								
accurate and reflect the discussion, next								
steps and/or action articulated by members.								

						If a score of "3" or below is given, your comments regarding		
Question	1	2	3	4	5	6	U	any areas of concern and
	Strongly disagree	Disagree	Somewhat disagree	Somewhat agree	Agree	Strongly agree	Unable to assess/don't know	suggestions for improvement would be appreciated.
General Comments			1	1	1			
The Committee's key successes in the pa	ast year were:							
What could be improved at the Committee's meetings, and how:								
What areas should the Committee focus	What areas should the Committee focus on in future:							
What training would help you perform your Committee role more effectively:								



### PWYLLGOR CRONFA ELUSENNOL CHARITABLE FUNDS COMMITTEE

DYDDIAD Y CYFARFOD:	17 March 2020
DATE OF MEETING:	
TEITL YR ADRODDIAD:	Charitable Funds Operations Sub-Committee Update
TITLE OF REPORT:	Report
CYFARWYDDWR ARWEINIOL:	Andrew Carruthers
LEAD DIRECTOR:	Executive Director of Operations
SWYDDOG ADRODD:	Gareth Rees
REPORTING OFFICER:	Deputy Director of Operations

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate) Ar Gyfer Trafodaeth/For Discussion

### ADRODDIAD SCAA SBAR REPORT

### Sefyllfa / Situation

This report provides the Charitable Funds Committee (CFC) with an overview of Charitable Funds Operations Sub-Committee (CFOSC) decisions including discussions and deliberations taken since the last report presented to Committee on the 20<sup>th</sup> September 2019.

### Cefndir / Background

This report has been developed to provide assurance to the CFC on decisions taken at CFOSC and provides an opportunity for the CFC Committee to discuss these.

### Asesiad / Assessment

Highlights:

- Six sessions were scheduled and only four went ahead. Attendance at the four sessions was below optimal although only one failed to meet the minimum level considered a quorum.
- Two meetings (January and February 2020) were cancelled due to high levels of apologies received as a consequence of extreme escalation within Hywel Dda University Health Board sites.
- The terms of reference have been reviewed and agreed subject to two amendments to the membership.
- Fifteen requests having a combined value of £77,199 were approved.
- Five requests are presently on hold whilst further information is obtained to support decisions.
- There were no requests approved using the discretion afforded to the Chair.
- One request was rejected.
- Three requests were recommended for Executive Director approval at a combined value of £100,549. One at £39,054 includes a previously approved sum of £32,915.
- One request (value £61,116) has been considered and recommended for Committee approval.
- Six new funds have been established and provide better alignment of the funding structure with the services they relate to.
- There is one potential departure from Hywel Dda Health Board policy to consider full explanation within the report.

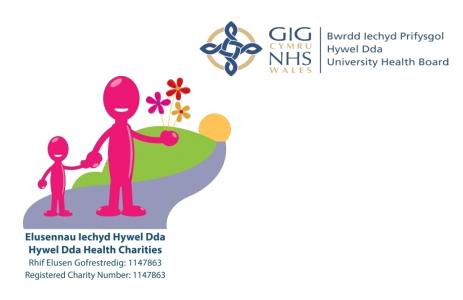
<u>Matters requiring the approval of the Charitable Funds Committee (> $\pm$ 50,000).</u> One request has been considered and supported by the Subcommittee and is put forward for Committee approval. This is detailed in table 2.1.5 of the Subcommittee report and concerns the purchase of two scanners for breast unit at Prince Philip Hospital (£61,116).

### Argymhelliad / Recommendation

The Committee is asked to receive the update report and endorse the Subcommittee's recommendation to progress with the purchase of breast scanners for Prince Philip Hospital.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference Cyfeirnod Cylch Gorchwyl y Pwyllgor	12.6 - The Committee has established the Charitable Funds Operations Sub-Committee to ensure that the UHB's policies and procedures are followed in relation to specialist designated and restricted funds.
Cyfeirnod Cofrestr Risg Risk Register Reference:	Not applicable
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	9. To improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
Amcanion Llesiant BIP: UHB Well-being Objectives:	Improve efficiency and quality of services through collaboration with people, communities and partners
Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015 - Pum dull o weithio: The Well-being of Future	<b>Long term –</b> Ensure patients are cared for in an appropriate setting. Decisions made will assist with sustaining and developing the services provided now and in the future.
Generations (Wales) Act 2015 - 5 Ways of Working:	<b>Prevention –</b> Continually improve governance systems and processes which seek to improve the clinical outcomes and experiences for patients, their families and staff.
	<b>Integration –</b> Work together to directly enhance patient benefit and improve the quality of the service provided to patients.
	Collaboration – Build strong relationships to
	continuously seek ways to enhance patient benefit and
	ensure charitable funds are robustly managed.
	<b>Involvement –</b> Service leads and other colleagues are key to ensure issues and solutions are identified which will directly benefit patients, their families and Hywel Dda Unoversity Health Board staff.
Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth:	Ledger reports and investment reports
Evidence Base:	Page 2 of 3

Rhestr Termau: Glossary of Terms:	Included within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Cronfa Elusennol: Parties / Committees consulted prior to Charitable Funds Committee:	Charitable Funds Sub Committee
Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Provide independent oversight and ensure correct controls and governance arrangements are in place to provide assurance that charitable funds within Hywel Dda are appropriately managed.
Ansawdd / Gofal Claf: Quality / Patient Care:	Develop a proactive and standard approach to the expenditure of charitable funds to ensure that appropriate service needs and additional benefits to patient care is supported. Support charitable funds requests which provide increased benefits to patient services and demonstrate enhancement to the quality of patient care provided.
Gweithlu: Workforce:	Not applicable
Risg: Risk:	Reputational risk if charitable funds are not properly managed and governance controls are not followed.
Cyfreithiol: Legal:	Financial reporting is in line with charity law and guidance. Legal obligation to ensure that charitable funds are appropriately controlled.
Enw Da: Reputational:	Reputational risk if charitable funds are not properly managed and governance controls are not followed correctly.
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Ensure equity of access by ensuring decisions made benefit all patients and staff within Hywel Dda UniversityHealth Board.



# **Hywel Dda Health Charities**

## Charitable Funds Operations Sub-Committee

## Update Report for the Charitable Funds Committee

17<sup>th</sup> March 2020

## Contents

- 1. Introduction.
- 2. Update from Charitable Funds Operations Sub-Committee meetings.
  - 2.1. Sub-Committee consideration of requests since the last report to Charitable Funds Committee (20<sup>th</sup> September 2019).
    - 2.1.1. Items approved at Sub-Committee.
    - 2.1.2. Items pending decision.
    - 2.1.3. Items approved by Chair's Action.
    - 2.1.4. Items rejected.
    - 2.1.5. Items recommended for approval by Executive Director or Charitable Funds Committee.
  - 2.2. Future Expected Requests.
  - 2.3. Applications to set up new charitable funds.
  - 2.4. Issues requiring decision by the Charitable Funds Committee.
  - 2.5. Other issues for noting.
- 3. Draft priorities eligible for charitable funding.
- 4. Diversions from Hywel Dda University Health Board (HDdUHB) Policy.

### 1. Introduction

This report provides the Charitable Funds Committee (CFC) with an overview of the Charitable Funds Operations Sub-Committee's decisions since the last report to the CFC on 20<sup>th</sup> September 2019.

The report summarises decisions taken at Sub-Committee level during the period 20<sup>th</sup> September 2019 to 5<sup>th</sup> March 2020 and provides an opportunity for the CFC to review these as necessary.

### 2. Update from Charitable Fund Operations Sub-Committee meetings

Since the previous report, the Sub-Committee has met on 4 occasions, however, the meeting held on the 1<sup>st</sup> November 2019 was not quorate. Two meetings were cancelled due to winter pressures.

Subcommittee Meeting Date	Quorate	Comments
2 <sup>nd</sup> October 2019	√	
1 <sup>st</sup> November 2019	Х	
28 <sup>th</sup> November 2019	√	
8 <sup>th</sup> January 2020	-	Cancelled
5 <sup>th</sup> February 2020	-	Cancelled
5 <sup>th</sup> March 2020	✓	

2.1. <u>Sub-Committee consideration of requests since the last report to the CFC</u>

2.1.1 ITEMS APPROVED AT SUB-COMMITTEE							
Description	Date Approved	Value	Commentary	Claimed Patient Benefit			
DAWN Clinical Software Training	2 <sup>nd</sup> October 2019	£1,950	The original submission brought to the Sub- Committee's attention the fact that training for anti-coagulant nurses in the use of the computerised dosing software was not provided when the system was commissioned. Against this the Sub-Committee determined that the application did not emphasise the needs of the service and offer enhanced patient benefit. The Sub-Committee advised that a submission of a revised	Enhanced staff training for anticoagulation nurses across HDdUHB on the DAWN 4S anticoagulation dosing software. Enhanced training will allow current users to utilise the full functionality of the software to provide a more efficient, effective and safer way of managing patients and medical			

			request detailing these benefits would be supported. A revised request was provided to the October 2019 Sub-	appointments.
Mobile support arm system (Carmarthenshire County Team)	2 <sup>nd</sup> October 2019	£2,516	Committee meeting.	The system offers enormous benefit to palliative patients whose strength and mobility has deteriorated. This enhanced support is not provided by the NHS.
Study leave (cancer treatment for young people)	28 <sup>th</sup> November 2019	£1,883	Issues with timing around policy change within the Learning & Development (L&D) team suggested that some leniency around the extent of application was justified. However, the Sub-Committee requested that the service first explore deferred or phased payment of the 25% (£450) by the member of staff to avert a policy departure on technical grounds.	Enhancing the cancer treatments for young people. Improving the patient experience.
AuditBase audiology patient management system	2 <sup>nd</sup> October 2019	£1,500		Enhanced staff training within the audiology service on the AuditBase patient management system. Enhanced training will allow the service to analyse data around areas such as referral rates, prioritisation and geographical allocations to ensure that services are provided as close to patients homes

				as possible.
Recliner chairs (x4) for Clinical Decisions Unit (CDU) at Glangwili General Hospital (GGH)	28 <sup>th</sup> November 2019	£5,200		Improved comfort for patients waiting in the CDU at GGH which in turn affords more rest. Should patient conditions deteriorate then the furniture offers a ready- made facility for the provision of urgent care.
Accuvein Viewing System and Stand – Chemotherapy day unit at Prince Phillip Hospital	28 <sup>th</sup> November 2019	£4704 + £810	2 part application considered as one by the Sub-committee.	Improved venous access for clinicians which lowers distress in patients who might be dehydrated.
Parity Econolite Infinity Cart – CCU (Coronary Care Unit) at GGH	28 <sup>th</sup> November 2019	£4,297		Portability of information means more speedy clinical access to blood results and other clinical information.
7 <sup>th</sup> Generation IPad for Angharad Ward at Bronglais General Hospital (BGH)	28 <sup>th</sup> November 2019	£339		Supports distraction and therapeutic play, which reduces peri operative stress in patients without the need for sedation.
HP LaserJet Printer – Oncology team Withybush General Hospital (WGH)	28 <sup>th</sup> November 2019	£110		Allows clinicians to print specific patient information in the moment as the needs are identified, supporting speedier clinics insomuch that patients do not have to wait for documents to be printed remotely and retrieved from another

				department.
IT teaching aids for Cilgerran Ward at GGH	28 <sup>th</sup> November 2019	£990	Including laptop computer, case, speakers and mobile projector. Currently the team borrows equipment from another department which is not always available.	Supports the provision of up to date information to families and carers of paediatric patients.
Replacement Portable ECG Machine	5 <sup>th</sup> March 2020	£6,500	Equipment to diagnose cardiac conditions. Failure to replace from other sources has left the cardiac service with an urgent need to find a solution.	Maintains a cardiac diagnostic service. Supports the Permanent Pacemaker Implantation Service initiated in June 2019. Prior to this Ceredigion patients needed to travel to GGH. The equipment also supports the initiation of a local trans- oesophageal ECHO and Dubutamine Stress SCHO service to further enhance the local patient experience which again currently requires Ceredigion patients to travel to GGH.
14 Bed Chairs for parents who are required to remain with sick children.	5 <sup>th</sup> March 2020	£12,60 0	Individual bed chairs costs are below the capital threshold and need to be urgently replaced. Equipment is destined for Cilgerran Ward GGH but paid for from the Puffin Unit (WGH) fund.	Supports the transfer of paediatric patients from WGH to GGH by providing overnight accommodation and facilities for parents.

2 IntelliVue MX400 Patient Monitors	5 <sup>th</sup> March 2020	£12,38 4.20	Provides rapid diagnosis of critically ill patients where there is a time critical imperative and where CT would prove too stressful for patients. Equipment will be shared with adjacent CDU.	Supports rapid, painless and non invasive diagnostic processes hence improving the patient experience and likelihood of positive outcomes.
Mobile Conferencing Equipment at Ty Bryngwyn	5 <sup>th</sup> March 2020	£17,67 5.50	This request was previously approved in principle pending a verification that this chosen type was in line with potential change in direction on the part of NWIS about how VC services were to be provided in future. This has been confirmed.	Supports MDT working and hence speedier response times for patients.
Parity Medical Versalite Cart for Cardio-respiratory team at GGH	5 <sup>th</sup> March 2020	£3,740	No specialised software required. Allow cardiologists to prepare letters to GP's and complete many other response tasks during the clinics. Also facilitates speedier broader access to x-rays, blood results and other diagnostic information. Avoids the need to leave the patient when those matters are being dealt with. Expected to reduce near miss incidents arising from these circumstances.	Generally a more efficient and streamlined services for cardiology patients.

2.1.2 ITEMS PENDING DECISION					
Description	Date Reviewed	Value	Commentary		
Mobile conferencing system – Ty	2 <sup>nd</sup> October 2019 and	£18,999	Application to be re-submitted as a result of change in costs due to alternative software specification. Sub-committee		

Bryngwyn	28 <sup>th</sup> November 2019		due diligence has averted abortive expenditure on a system that will be phased out in under 12 months.
Microsoft Surface Pro Tablets (x2) for the Pembrokeshire district liaison nursing service	28 <sup>th</sup> November 2019	£1,760	Alignment with HDdUHB's agile working strategy needs to be first established.
Digital reminiscence software	28 <sup>th</sup> November 2019	£6,594 + £5,995 + £41,965 + £5,495	The Sub-committee considered that the applications totalling £60,049 across four sites needed to be considered against the evaluation outcome of the first phase of digital reminiscence software investment made a year ago.
Macmillan Cancer support (Salary top up)	28 <sup>th</sup> November 2019	£10,039 per annum for three years	The Carmarthenshire service has successfully secured time limited funding for a Macmillan cancer support role and wishes to top up the allocation to facilitate a full time role (+7.5 hours). The Sub-committee supported the concept, but required details of an exit strategy and the Macmillan commitment before final approval could be given.
Three Tablets (2 Ipads/1 Galaxy)	5 <sup>th</sup> March 2020	£734.24	Money donated specifically to Ward 9 at PPH for the purchase of tablets. Equipment supports stroke patients in their rehabilitation through self-support. Principles acknowledged that some reservation on the type of equipment required and general compatibility with IT strategy.

2.1.3 ITEMS APPROVED BY CHAIR'S ACTION           Description         Approval Noted at CFSC         Value         Commentary         Patient Benefit					

### 2.1.4 ITEMS REJECTED

Description	Date Rejected	Value	Commentary
Training day for gynaecology staff at National Botanic Garden of Wales	2 <sup>nd</sup> October 2019	£1,818	Retrospective request

#### 2.1.5 ITEMS RECOMMENDED FOR APPROVAL (by Executive Director or Charitable Funds Committee)

Description	Data Value Commentany Datient Ben		Dotiont Donofit	
Description	Date Reviewed	Value	Commentary	Patient Benefit
Dementia Garden at Mynydd Mawr Rehab Ward, PPH	28 <sup>th</sup> November 2019	£39,054	A previous figure (£32,915) was supported on 6 <sup>th</sup> August 2019. Following approval in August 2019, a more detailed review of the scheme has identified a number of design oversights, the correction of such has led to a £6,139 escalation of cost.	Safe inviting and sensory environment which supports patient healing.
Ultrasound System in in support of DVT Pathway at PPH	13 <sup>th</sup> January 2020	£33,600		Improved patient experience for those on the DVT Pathway through reduced waits for diagnosis. The currency of these waits is often days so in such circumstances are prescribed Rivaroxaban whilst waiting. The more rapid diagnosis removed the need for medication.
Two Replacement Ultrasound Scanners for the Breast Care Unit at	5 <sup>th</sup> March 2020	£61,116	More advanced usage image quality leads to better patient outcomes. Replacing unreliable equipment reduces risks to business continuity.	Improved image quality leads to better outcomes for patients – greater reliability reduces

PPH			The facility was set up using charitable resources.	downtime and patient waits or deferred treatment.
Sonosite X- Porte Ultrasound Machine and Printer (GGH – ED)	5 <sup>th</sup> March 2020	£27,895	Having this equipment will facilitate rapid diagnosis of critically unwell trauma patients as well as those in cardiac arrest where interventions are time critical. Particularly where they are too unwell to undergo other diagnostic tests. Support RCEM requirements for ED trainees. No such equipment is currently at hand in Hywel Dda.	The fast bedside test is far less traumatic for sick patient than standard tests.

#### 2.1.6 Other Outcomes

- 2.1.6.1 An application submitted in May 2019 for digital tablets and cameras for the paediatric physiotherapy team has been withdrawn given delays experienced in obtaining advice from the necessary team. A revised request is expected to be made for cameras only.
- 2.1.6.2 A request for hearing amplifiers was considered by the Subcommittee and at the October 2019 meeting, it was confirmed that these had been funded from the resources of the Corporate Team.
- 2.1.6.3 A request to purchase active-passive equipment to support the physiotherapy service is being coordinated by Helen Annandale, Therapies & Health Science Transformation Lead, and a charitable funds request is expected in due course.
- 2.1.6.4 A submission for a further purchase of digital reminiscence software and equipment was considered at the March 2020 meeting – value £71,940. Common belief from the experience of those present was that the system offered clear patient experience benefits - however as part of the initial purchase in 2018 - no formal evaluation information has yet been provided.
- 2.1.6.5 In light of the committee's previous sensitivities around the initial request for DRT software, the proposal was therefore supported and recommended for approval by the sub-committee in principle only subject to the provision of a formally documented evaluation report. The project sponsor will be approached to

provide this and it is expected that the committee will receive this proposal at the June 2020 meeting.

#### 2.2. Applications to set up new charitable funds

Six applications were received and approved in November 2019 and March 2020:

- Upper Gastrointestinal (GI) Health Board wide fund
- Paediatric diabetes Health Board wide fund
- Audiology Health Board wide fund
- South Carms Older Adults Mental Health
- BGH Chemo Day Unit Appeal
- Carmarthenshire Women's Services.

#### 2.3. Issues requiring guidance from CFC

None at this time.

### 2.4. Other Issues for Noting

Terms of Reference were received and agreed subject to two minor changes to the membership.

### 3. List of Priorities Eligible for Charitable Funding

The list of priorities below form part of a larger list of capital bids and have been evaluated as eligible for charitable funding and set out the higher level aspirations of service teams after due consideration has been given to funding schemes from capital and other resources. These schemes are now the responsibility of the service to facilitate proposals.

Scheme	Site	Estimate of Cost
Active passive equipment for physiotherapy	Health Board	Not yet
		known
Ophthalmology field analysers	GGH and BGH	£129,657
Breast scanners (x3)	PPH	£136,333
Bronchoscope	WGH	£32,155

The four Ophthalmology field analysers have been funded from 2019/20 capital slippage in recent weeks.

### 4. Departures from HDdUHB Policy

There is one potential departure from HDdUHB policy to bring to the attention of the CFC and this concerns the approval of 100% of a "cancer treatment for young person's course" noted in table 2.1.1.

Appendix 1



### **Hywel Dda Health Charities**

### Request for charitable funds expenditure

Rhif Elusen Gofrestredig: 1147863 istered Charity Number; 1147863

#### **1. Lead contact** MART

For Finance	
usė only	

Reference:

Fund Code:

Contact name: Carol Cotterell	Job title: Assistant Director Operational Nursing & Quality Acute Services
Ward/Team/Department/Service/Direc Operations Directorate	torate:
Contact address: Management Offices, Prince Philip	Hospital
Post code: SA14 8QF	
WHTN: <b>01824 3450</b>	Mobile:
Telephone: 01554 783450	Email: Carol.Cotterell@wales.nhs.uk

### 2. What item(s) are you asking us to fund and for what purpose?

Please give us as much information as possible so that we can determine whether your request is eligible for support. For any equipment, please provide details of supplier make, model and quote.

Following the successful implementation of the Digital Reminiscence Therapy Software and associated devices purchased from charitable funds in selected clinical areas across the Health Board in 2017, this application is being submitted to request a number of additional devices for use across the Health Board.

Supplier: My Improvement Network Ltd

Item: RITA (Reminiscence Interactive Therapy Activities) Digital Reminiscence Therapy Software Package

Unit price: £5,995.00 (VAT exempt)

Product code: MIN-006W

Product description: RITA Digital Reminiscence Therapy Software package to include:

- 24" touchscreen PC (incl. 3 year warranty) •
- Software including movies
- 10" tablet
- Support, media license and training
- Trolley (large unit) •
- Delivery •

The 15 packages being requested are as follows:

ronglais Hosp ocation	Items	Value £	Charitable fund	Quote Ref
<u>u</u> ₩₩€₹LI₩II	requested			
Y Banwy	1 x package	5,995.00	T330 BGH General	n/a
Simone Brandy		,	Purpose	
General	1 x package	5,995.00	T862 BGH General	
Medical wards			Medicine	
Dawn Jones				
Glangwili Hosp	ital x 7			
Location	Items	Value £	Charitable fund	Quote Ref
	requested			
Emergency	1 x package	5,995.00	T289 GGH General	MIN-1606/1
Department			Purpose	-
Alison Williams				
Preseli Ward	1 x package	5,995.00	T289 GGH General	MIN-1606/1
Olwen Morgan			Purpose	
Teifi Ward	1 x package	5,995.00	T289 GGH General	MIN-1606/1
Olwen Morgan			Purpose	
Ceri Ward	1 x package	5,995.00	T289 GGH General	MIN-1606/1
Iona Evans			Purpose	
Steffan Ward	1 x package	5,995.00	T289 GGH General	MIN-1606/1
Sarah Williams			Purpose	
Towy Ward	1 x package	5,995.00	T289 GGH General	MIN-1606/1
Iona Evans			Purpose	
Derwen Ward	1 x package	5,995.00	T289 GGH General	MIN-1606/1
Olwen Morgan			Purpose	
Prince Philip H				
Location	Items	Value £	Charitable fund	Quote Ref
	requested			
			7300	
		5,995.00	T716 PPH General	MIN-1772/1
Ward 9	1 x package	5,995.00	Purpose	
Gill Webber	hital v 2			L
Withybush Hos	ltems	Value £	Charitable fund	Quote Ref
Location	requested	value L		
Ward 1	1 x package	5,995.00	T458 WGH	MIN-1886/1
Carol Thomas	I A package	0,000.00	General Purpose	
Ward 12	1 x package	5,995.00	T458 WGH	MIN-1886/1
Carol Thomas	I A Hackaye		General Purpose	

**3. Why is this expenditure required?** Please provide details of how the need has been identified and who this has been discussed with.

This application for charitable funds is to support the purchase of a further 15 RITA systems following their successful use in the initial clinical areas within the Health Board.

There are currently 13 systems in use across the Health Board. In 2017 10 systems were purchased from charitable funds and since then a further 3 systems have been purchased for various locations also from charitable funds:

Site	Items requested	Date
Bronglais Hospital	2 packages	2017
Prince Philip Hospital	2 packages	2017
Glangwili Hospital	4 packages	2017
Tregaron Hospital	2 packages	2017
Amman Valley Hospital	1 package	September 2019
Llandovery Hospital	1 package	January 2020
Withybush Hospital (Ward 10)	1 package	January 2020

At the time of writing an order for 3 additional devices for our older adult mental health wards is in the process of being placed thanks to funding from Welsh Government.

The Digital RITA packages are aimed at offering an enjoyable therapeutic focus for older people as a means of supporting them and reducing their agitation, isolation, depression and delirium.

This is particularly evident in elderly patients admitted to hospital with cognitive impairment e.g. acute confusion, delirium or patients with dementia can become very agitated in an unfamiliar clinical environment.

Care needs can then become very complicated and challenging both for the patients and the healthcare professionals. The use of Digital Reminiscence Therapy Software aims to provide stimulation and engagement, which will help improve health, wellbeing and the quality of care received by the patients in acute general and rehabilitation wards with the aim of providing a positive patient experience.

Digital RITA is currently being used in more than 380 hospitals throughout the UK including acute hospitals, mental health units, community hospitals, care homes & day centres.

There are 7 hospitals within HDUHB that are currently using the Digitalised RITA software with reported beneficial outcomes for patients. On the basis of the successful implementation of the Digital RITA system in these areas and in particular the impact and results achieved at Prince Philip Hospital which culminated in the submission of the Patient Experience Network awards in 2018 on the basis of the positive experience of patients on a designated Elderly Care Rehabilitation Ward. The submission reached the short list of the National awards and some of the positive project outcomes are described below:-

 A reduction in patient falls and in the number of incidents involving inappropriate patient behavior including episodes of aggression to both staff and other patients since the introduction of the system. Although other patient safety initiatives have been introduced it is believed that the introduction of the Digital RITA system has significantly contributed to this overall improvement by helping to ensure patient care provided with additional opportunities for social interaction simulation, music therapy and other reminiscence activities.

- Some examples of team activities such as Bingo, Bowls, Karaoke and Horse Racing games has significantly contributed to increased patient engagement, wellbeing and establishing friendships with other patients. This effect has helped patients with their rehabilitation programs.
- Falls data and patient behavioral incidents are reviewed on a monthly basis through scrutiny and assurance meetings. Patients being active and stimulated during the day often helps the patient get a more restful sleep at night.
- The patient experience and carer feedback has been extremely positive; and one patient experience story was included as part of this submission. This can be accessed via the link on the attached document below



Susan's Story.pptx

• This feedback has also been used to improve other elements of the care environment. One additional action taken recently is to develop a sensory garden.

The systems are portable and can be used for single patient use or group involvement. The reminiscence materials can encourage many interesting conversations among the patients and can also involve family and carers which can create a positive atmosphere in an otherwise busy clinical environment. Since the purchase of the original RITA packages the company have developed additional welsh and polish elements at the request of another Health Board in Wales.

The Digital RITA packages have been positive in reducing harm during hospital stays:

- Reduced Falls by 49.65%
- Reduced the need for extra patient support (1:1) an example in 1 Trust (4 Wards) Saving Yr. 1 £164K
- Software supports dementia care mapping
- Significant reduction in anti-psychotic medication Reduced length of stay
- Dramatically increased patient experience
- Significant improvements in patients with dementia that are unable to sleep
- Supports dignity, respect and wellbeing for those patients at the end of life
- Clinically led, improving the quality of patient-centred care
- Improved Family & Friends results
- Reductions in in-patient bed days
- Improved interaction between carers and patient, and relatives and patient

### Source: My Improvement Network Ltd

There are no ongoing costs involved with the systems. Once the systems have been purchased there are no recurring fees,

Full training is provided to staff onsite.

There is no requirement for the IT department to support the system, My Improvement Network Ltd has a dedicated Customer Support Team that will deal with all day to day issues. Whilst the product is Wi-Fi enabled, there is no requirement to have Wi-Fi for the functionality of the system.

All devices can be wiped cleaned to comply with Health Board's infection control guidelines.

Representatives from My Improvement Network Ltd have met with NHS Wales Shared

Services Procurement & IT and agreements have been made at a national level regarding procurement and IT compatibility. Purchasing will be made in conjunction with the UHB's Senior Procurement Business Manager and Head of IT to ensure a consistent approach.

### 4. Why is this a charitable request?

Our charitable funds support expenditure over and above what the NHS can provide. All requests for support must offer value for money and demonstrate clear and direct benefits to patient care.

The successful use of the Digital RITA devices and positive patient experience has prompted further requests for roll out to other clinical areas within the Health Board to achieve the following benefits:-

- Enhance staff and patient engagement thus enhancing mood and reducing agitation of patients with cognitive impairment
- Help improve the health, wellbeing and quality of care received by patients
- Enhance rehabilitation and discharge planning of elderly patients
- Improve patient outcomes and experience

These items are not items routinely purchased by the NHS and are aimed at improving a patient's experience.

### 5. Total amount of funding requested

<b>Net £</b> Excluding VAT	£71,940.00	VAT £	0.00	Gross £ Including Vat	£71,940.00
To this modi			Supplier	My Dementia	Improvement

Is this medical	No	Supplier	My Dementia Improvement
equipment?		name:	Network Ltd

### 6. Fund details

Fund title:	Fund code:	Value:
T330	BGH General Purpose	5,995.00
T862	BGH General Medicine	5,995.00
T289	GGH General Purpose	41,965.00
7716 T300	PPH General Purpose	5,995.00
T458	WGH General Purpose	11,990.00

### 7. Assessment for medical equipment

When buying medical equipment is it important to ensure that all UHB requirements are being met. Please answer the questions below as fully as possible.

Is this a new or replacement item?	New (Not medical)
Where will this equipment be located?	Within the ward areas
Have you consulted with the Medical Devices Steering Group?	N/A

Does this item appear on the UHB's Capital Planning List?	Νο
<b>Risk:</b> What risk assessments have been carried out?	N/A
Maintenance: Has support been gained from the maintenance/ estates department? Who will maintain the equipment?	Supplier had a dedicated Customer Support Team
<b>Storage:</b> Are there any storage implications?	No
<b>Training:</b> Are there any training implications?	No – training will be provided by the company which is included in the purchase price
<b>Revenue costs:</b> Details of any associated revenue costs and how they will be met	No ongoing costs
<b>Capital costs:</b> Details of any associated capital costs and how they will be met	N/A

### 8. Authorisation

Designation	Name, Job Title & Signature	Date
1. Requester	Carol Cotterell Assistant Director Operational Nursing & Quality – Acute Services	27.02.2020
2. Authorised signatory under £1,000		
	Senior Nurse Manager, Service Delivery Manager, Head of Service or managers at equivalent level	
3. Authorised signatory under £5,000		
	Hospital or Service Director/General Manager, Head of Nursing or managers at equivalent level	
4. Authorised signatory under £25,000		
L	Deputy Director of Operations on behalf of the Operations Directorate Charitable Funds Committee	
5. Authorised signatory under £50,000		
h	Executive Director	• • • • • • • • • • • • • • • • • • • •
6. Authorised		

signatory over £50,000		
	Charitable Funds Committee	······································

### FOR FINANCE DEPARTMENT

Directorate:	Reference Number:
HYNEL DDA	
Fund Title: BGH GEN PURPOSES/BGH GEN MEDICIN	Fund Code: T 330 / T862
GGH / PPH / WGH GEN PURPOSES	T 330 / T862 T289 / T300 / T458
Current Fund Balance: £904,512 / E41,621	Financial Code: T330 T862
£132,613/£25,172/£54,964	T289/T300/T4-58
Eligible Expenditure: Y / N	Authorised Finance Signatory: J. Robert
	Date: 28.02.20

### **Please return this form to:**

John Roberts Charitable Funds Support Officer Finance Department Glangwili Hospital

> Tel: 01267 227529 WHTN: 01828 2529

Email: John.Roberts3@wales.nhs.uk

Appendix 2



### Hywel Dda Health Charities

### **Request for charitable funds expenditure**

1. Lead contact JAN 2	For Finance use only	Reference: . Fund Code: 7039
Contact name: Bethan Perkins	Job title: Ser	vice Manager
Ward/Team/Department/Service/D	Directorate: Breast	Care, Scheduled Care.
Contact address: Scheduled Care N Prince Philip Hospital.	Management Office	e, Waiting List Portakabin,
Post code:	Mahilar	
WHTN: 01824 6911	Mobile:	
Telephone: 01554 899011	Email: Betha	n.perkins@wales.nhs.uk

### 2. What item(s) are you asking us to fund and for what purpose?

Please give us as much information as possible so that we can determine whether your request is eligible for support. For any equipment, please provide details of supplier make, model and quote.

This is a request for two replacement Ultra sound scanners for the Breast Care Unit in Prince Philip Hospital which are used to scan and diagnose patients on both USC and routine pathways.

The scanners are used in the outpatient clinic rooms and are a vital part of the clinic. The images from the scans are downloaded to the PACS system so that the patients scan results can be monitored and help in diagnosing patients safely.

The make of the Ultra sound scanners are GE and will be supplied by the company.

By replacing the current machines with a GE machine it will bring the scanners in line with what is in place with the rest of the Health Board ensuring therefore that there is equity of the quality of the scanners and the images they provide.

#### 3. Why is this expenditure required?

Please provide details of how the need has been identified and who this has been discussed with.

The clinicians from the Breast Unit have flagged that one of the US scanners in department has broken and the other is unreliable and the images do not save to PACS, which is essential in the on going treatment of patients.

The scanners improve the patient pathway and with the scanners in place the Breast Unit in PPH can maintain the capacity that they have to see diagnose and treat patients.

1

### 4. Why is this a charitable request?

Our charitable funds support expenditure over and above what the NHS can provide. All requests for support must offer value for money and demonstrate clear and direct benefits to patient care.

The scanners will allow for the capacity in the Breast Unit to be maintained. There are sufficient funds in the Breast fund which can be used and the allocation of funds from this budget has been discussed the clinical lead.

No capital funds are available at this time.

#### 5. Total amount of funding requested

61,116.12 Gross £ 73339.34 Net £ 61,116.12 VAT £ 9223.22 Excluding VAT Including Vat

Is this medical	Yes / No	Supplier	GE Healthcare
equipment?		name:	

### 6. Fund details

Fund title:	PPH Breast Centre
Fund code:	T039 CAR

### 7. Assessment for medical equipment

When buying medical equipment is it important to ensure that all UHB requirements are being met. Please answer the questions below as fully as possible.

Is this a new or replacement item?	Yes
Where will this equipment be located?	Breast Care Unit , PPH
Have you consulted with the Medical Devices Steering Group?	No
Does this item appear on the UHB's Capital Planning List?	Yes
<b>Risk:</b> What risk assessments have been carried out?	Yes – assessments carried out on the current US machines.
Maintenance: Has support been gained from the maintenance/ estates department? Who will maintain the equipment?	There will be the same maintenance process as what is currently in place.
Storage: Are there any storage implications?	No
<b>Training:</b> Are there any training implications?	No
Revenue costs: Details of any	N/A

2

associated revenue costs and how they will be met	
<b>Capital costs:</b> Details of any associated capital costs and how they will be met	N/A

### 8. Authorisation

	Designation	Name, Job Title & Signature	Date
	1. Requester		
	2. Authorised signatory under £1,000		1
		Senior Nurse Manager, Service Delivery Manager, Head of Service or managers at equivalent level	
	3. Authorised signatory under £5,000	flothe STEPHANIE HIRE	5/12/19.
-		Hospital or Service Director/General Manager, Head of Nursing or managers at equivalent level	
	4. Authorised signatory under £25,000		
	· ·	Deputy Director of Operations on behalf of the Operations Directorate Charitable Funds Committee	
	5. Authorised signatory under £50,000		
	<u> </u>	Executive Director	
	6. Authorised signatory over £50,000		

**Charitable Funds Committee** 

### FOR FINANCE DEPARTMENT

Directorate:	Reference Number:
Fund Title:	Fund Code:
PPH BREAST CENTRE	TO 3 9
Current Fund Balance:	Financial Code:
£86,796	101 - To 39
Eligible Expenditure: Y / N	Authorised Finance Signatory: J. Roberts Date: 04.01.20

### Please return this form to:

John Roberts Charitable Funds Support Officer Finance Department Ty Gorwel, Building 14 St David's Park, Job's Well Road, Carmarthen, SA31 3BB

> Tel: 01267 283012 WHTN: 01827 1612

Email: John.Roberts3@wales.nhs.uk

4

### APPENDIX A : Medical Equipment Statement of Need For New & Replacement Medical Equipment

Hywel Dda Health Board Medical Equipment Statement of Need For New & Replacement Medical Equipment (Equipment over £5K will also require a Capital Bid Proforma)

Unit / Division / Department: Breast Unit Prince Philip Hospital.

Brief Description of Proposal/ Requirement:

The request is for two GE Ultra Sound Scanning machines,

### Equipment redeployment options that have been investigated.

Before submitting a request for additional/replacement equipment, have all options for redeployment of existing equipment been investigated? Please provide evidence below.

The same machines are in place in WGH and BGH, however due to the regularity of use on those sites they cannot be transported to be used in the clinic in PPH. There would also be issues around warranty and insurances to move equipment of this nature across sites.

### Brief Outline of Benefits/Consequences/Risks /Clinical effectiveness :

The effectiveness of the scanners would mean the waiting times for patients would be maintained and the patients would continue to have access to a good quality of patient care.

Details of any training and decontamination requirements that will be needed, costing and source. How are these revenue costs to be funded:

N/A

New / Replacement Cost (inc VAT):

£73339.34

Specify Source of funding (Capital, Revenue, Charitable Funds, League of Friends) and financial code:-

Charitable Fund - TO39 CAR - PPH Breast Centre

	Details	5	Recurring/Non- recurring	Amount (inc VA
Additional Staff Costs:	N/A			
Consumables or Development costs :	N/A			
Maintenance Costs:	Yes – the same	cost as the		
(Internally maintained)	current mainter	ance, this		1
YES / NO	would not be addit	ional.		
Internal costs inc commissioning : £	N/A			
(10% of purchase cost paid to				
Clinical Engineering annually)				
or, External Contract Costs	N/A			
Expected lifetime of equipment (in years) :	7 YEARS			
Installation / Disposal costs :				
Details of any training requirements	N/A			
that will be needed, costing and source				
	full datails of fundi			
This form will not be processed unles:	s jun detuns of junun	ng are supplied	d, i.e. Cost Centre and Su	bjective codes mus
supplied. Please		•	d, i.e. Cost Centre and Su available or new require	-
supplied. Please PROCUREMENT PLAN:-	confirm if existing re	venue budget	available or new require	ed.
supplied. Please PROCUREMENT PLAN:- For completion by Procurement,	confirm if existing re /Clinical Engineer	venue budget ing/IT depa	available or new require artment before subm	ission and appre
supplied. Please PROCUREMENT PLAN:- For completion by Procurement,	confirm if existing re	venue budget ing/IT depa	available or new require	ed.
supplied. Please PROCUREMENT PLAN:- For completion by Procurement, DJE advertisement required:	confirm if existing re /Clinical Engineer YES / NO	venue budget ing/IT depa Tender/C required:	available or new require artment before subm Quotation action	ission and appro YES / NO
supplied. Please PROCUREMENT PLAN:- For completion by Procurement, DJE advertisement required:	confirm if existing re /Clinical Engineer	venue budget ing/IT depa Tender / ( required: Clinical En	available or new require artment before subm Quotation action	ission and appre
supplied. Please PROCUREMENT PLAN:- For completion by Procurement, DJE advertisement required: Single Tender Action Required:	confirm if existing re /Clinical Engineer YES / NO YES / NO	venue budget ing/IT depa Tender / C required: Clinical En agreemen	available or new require artment before subm Quotation action gineering t and PPQ Pass	ission and appro YES / NO YES / NO
supplied. Please	confirm if existing re /Clinical Engineer YES / NO YES / NO	venue budget ing/IT depa Tender/C required: Clinical En agreemen Will there	available or new require artment before subm Quotation action gineering t and PPQ Pass	ission and appro YES / NO
supplied. Please PROCUREMENT PLAN:- For completion by Procurement, DJE advertisement required: ingle Tender Action Required: dvice sought from HSDU / Infec	confirm if existing re /Clinical Engineer YES / NO YES / NO tion YES / NO	venue budget ing/IT depa Tender/C required: Clinical En agreemen Will there	available or new require artment before subm Quotation action gineering t and PPQ Pass be any IT	ission and appro YES / NO YES / NO
supplied. Please PROCUREMENT PLAN:- For completion by Procurement, DJE advertisement required: Single Tender Action Required: Advice sought from HSDU / Infec	confirm if existing re /Clinical Engineer YES / NO YES / NO tion YES / NO	venue budget ing/IT depa Tender/C required: Clinical En agreemen Will there	available or new require artment before subm Quotation action gineering t and PPQ Pass be any IT	ission and appro YES / NO YES / NO
supplied. Please PROCUREMENT PLAN:- For completion by Procurement, DJE advertisement required: Single Tender Action Required: Advice sought from HSDU / Infect Control Team Advice sought from Radiology	confirm if existing re /Clinical Engineer YES / NO YES / NO tion YES / NO	venue budget ing/IT depa Tender / ( required: Clinical En agreemen Will there requireme	available or new require artment before subm Quotation action gineering t and PPQ Pass be any IT	ission and appro YES / NO YES / NO
supplied. Please PROCUREMENT PLAN:- For completion by Procurement, DJE advertisement required: Single Tender Action Required: Advice sought from HSDU / Infect Control Team Advice sought from Radiology	confirm if existing re /Clinical Engineer YES / NO YES / NO tion YES / NO	venue budget ing/IT depa Tender/C required: Clinical En agreemen Will there	available or new require artment before subm Quotation action gineering t and PPQ Pass be any IT	ission and appro YES / NO YES / NO
supplied. Please PROCUREMENT PLAN:- For completion by Procurement, DJE advertisement required: ingle Tender Action Required: Advice sought from HSDU / Infection Control Team Advice sought from Radiology	confirm if existing re /Clinical Engineer YES / NO YES / NO tion YES / NO	venue budget ing/IT depa Tender / ( required: Clinical En agreemen Will there requireme	available or new require artment before subm Quotation action gineering t and PPQ Pass be any IT	ission and appro YES / NO YES / NO
supplied. Please PROCUREMENT PLAN:- For completion by Procurement, DJE advertisement required: Single Tender Action Required: Advice sought from HSDU / Infect Control Team	confirm if existing re /Clinical Engineer YES / NO YES / NO tion YES / NO	venue budget ing/IT depa Tender / C required: Clinical En agreemen Will there requireme	available or new require artment before subm Quotation action gineering t and PPQ Pass be any IT	ission and appro YES / NO YES / NO

### Briefing note - Medical Device Management Policy.

The policy is based upon guidance produced by the Department of Health and the Medicines and Healthcare Regulatory Products Agency (MHRA). This briefing note will ensure that:

- all medical equipment used on behalf of Hywel Dda Health Board (HB) complies with the recommended standards particularly those relating to safety;
- users are aware of the clinical, technical and revenue implications of their choice of equipment;
- a standardisation of common types of equipment is promoted, in order to lessen possible confusion, to facilitate ease of training, maintenance and keep revenue costs to a minimum.

Assistive equipment	Hoists, Beds, Dynamic Mattresses
Life support equipment	Anaesthetics, Defibrillators,
	Ventilators
Imaging equipment	Scopes, Ultrasound, Ophthalmic devices.
Surgical equipment	Electro surgery, Orthopaedic devices.
Patient monitoring equipment	ECG recorders, EEG, Patient
	Monitors.
Infusion equipment	IV devices, PCA, Epidural, Enteral
Medical gas equipment	Entonox, Regulators, Flow meters, Suction.
Therapeutic equipment	Light source, Nebulisers, CPAPs.
Associated devices	Central stations, Examination
	lamps,
LASER's	Argon, YAG, CO2.
Diagnostic equipment	Audiology devices, Diagnostic sets,
	Urodynamic devices.

Some examples of medical devices are listed below :

All requisitions placed for medical equipment over £200 should be accompanied by a **Statement of Need (SON)** as per Appendix A. All requisitions placed for medical equipment over £5,000 should also be accompanied by a **Capital bid proforma**.



### PWYLLGOR CRONFA ELUSENNOL CHARITABLE FUNDS COMMITTEE

DYDDIAD Y CYFARFOD:	17 March 2020
DATE OF MEETING:	
TEITL YR ADRODDIAD:	Charitable Funds Sub-Committee Annual Report
TITLE OF REPORT:	2019/20
CYFARWYDDWR ARWEINIOL:	Andrew Carruthers
LEAD DIRECTOR:	Executive Director of Operations
SWYDDOG ADRODD:	Gareth Rees
REPORTING OFFICER:	Deputy Director of Operations

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate) Ar Gyfer Trafodaeth/For Discussion

### ADRODDIAD SCAA SBAR REPORT <u>Sefyllfa / Situation</u>

The purpose of this paper is to present the Charitable Funds Sub-Committee (CFSC) Annual Report 2019/20 to the Charitable Funds Committee (CFC). The Charitable Funds Sub-Committee Annual Report provides assurance in respect of the work it has undertaken and decisions taken on behalf of the Charitable Funds Committee in 2019/20, and outlines the main achievements, which have contributed to furthering the governance of charitable funds across the Hywel Dda University Health Board (HDdUHB).

### Cefndir / Background

The UHB's Standing Orders and Terms of Reference for the CFSC require submission of an Annual Report to the Charitable Funds Committee outlining the business of the CFSC and identifying how it has fulfilled its duties over the year.

The fundamental purpose of the CFSC is to provide assurance on decisions taken as they relate to the control and management of the UHB's named charitable funds. In particular the CFSC is required to:

- Consider and approve all requests for expenditure over £5,000 against named charitable funds, within the scheme of delegation for authorisation of charitable funds expenditure.
- Implement appropriate policies and procedures to ensure that all expenditure is reasonable, clinically and ethically appropriate.
- Agree issues to be escalated to the CFC with recommendations for action.
- Make upward recommendations for matters outside its approval limit.

The Annual Report specifically comments on key issues considered by the Sub-Committee and those matters that required consideration or approval by the Executive Director or the CFC.

Asesiad / Assessment

Meeting Summary

During 2019/20, the Charitable Funds Sub-Committee met on the following dates:

Date of Meeting	Attendance
6 <sup>th</sup> June 2019	7
2 <sup>nd</sup> July 2019	9
6 <sup>th</sup> August 2019	7
3 <sup>rd</sup> September 2019	10
2 <sup>nd</sup> October 2019	7
1 <sup>st</sup> November 2019	4
28 <sup>th</sup> November 2019	9

### **Constitution**

From the terms of reference reviewed in September 2019, the membership of the Sub-Committee was agreed as the following:

- Deputy Director of Operations (Chair)
- Head of Service Integration and Development (Vice-Chair)
- General Manager Scheduled Care represented by the Service Manager for Scheduled Care
- General Manager Cancer & Women and Children's Services
- General Manager Withybush General Hospital
- General Manager Glangwili General Hospital
- General Manager Bronglais General Hospital
- General Manager Prince Philip General Hospital
- General Manager Community and Primary Care (Pembrokeshire)
- County Director and Commissioner Carmarthenshire represented by Service Delivery Manager
- County Director and Commissioner Ceredigion represented by the Head of Service Integration and Development
- Director of Mental Health and Learning Disabilities represented by Directorate Support Manager
- Assistant Director (Operational Nursing and Quality)
- Head of Hywel Dda Charities (in attendance)
- Assistant Head of Financial Accounting (in attendance)

As the CFSC is directly accountable to the CFC for its business, it provides assurance on a quarterly basis through a written update report, which is received at the subsequent Committee meeting.

In discharging its duties, the CFSC has adhered to a work plan during 2019/20 and has broadly fulfilled and undertaken work against the areas of responsibility noted below.

Work Undertaken in 2019/20

During 2019/20, the CFSC has delivered against the following:

**Lung Function Machine, Withybush General Hospital** – The Sub-Committee recommended a request for approval by the Executive Director to purchase a new, higher specification lung function machine.

**ECG Machines, South Pembrokeshire and Tenby Hospitals** – The Sub-Committee approved the request to fund new ECG machines for use at South Pembrokeshire and Tenby Hospitals.

**Plant and Landscaping, Withybush General Hospital** – The Sub-Committee approved the request to develop and improve green spaces at Withybush General Hospital.

**Pharmacy Study Leave** – The Sub-Committee approved advanced training for the technician team as a key element of service development to improve patient care through reducing the risk of medicines related harm.

**Pharmacy Printers, Glangwili General Hospital** – The Sub-Committee approved a request for four pharmacy label printers for patients on Dynefwr and Cilgerran wards, pharmacy stores and the mental health dispensary.

**iPad Mini for Dyfi Ward, Bronglais General Hospital** – The Sub-Committee approved a request to purchase an iPad Mini for patient use to help educate patients about cardiac conditions, tests and treatments by showing videos for cardiac patients to help understand their condition and the treatments and therapies available.

**Phlebotomy Chair, Outpatients Department, Glangwili General Hospital** – The Sub-Committee approved a request to replace three phlebotomy chairs in the Outpatients Department area at Glangwili General Hospital to provide patient comfort during the venepuncture process.

**Digital Reminiscence Software, Cysgod Y Cwm Ward, Amman Valley Hospital** – The Sub-Committee approved a request to purchase the equipment which had demonstrated a significant benefit to patients.

**Two Sorrento Chairs, Y Banwy, Bronglais General Hospital** - The Sub-Committee approved a request to purchase the chairs, which constituted a clear patient benefit.

**Physiotherapy Exercise Machine** – The Sub-Committee approved a request to purchase a physiotherapy exercise machine to support community patients with spasticity management, health and wellbeing.

**Two Laptops** – The Sub-Committee approved the purchase of two laptops for specialist nurses to enable a portable means to provide diabetes training for hospital and community staff.

**Wanderguard Alarm System** – The Sub-Committee approved the purchase of the sensor wristbands for patients use.

**Garden at Prince Phillip Hospital** – The Sub-Committee approved funding for providing a safe, inviting and sensory environment for patients and enhance their rehabilitation whilst in hospital.

**Bladder Scanner and Printer, Cadog Ward, Glangwili General Hospital** – The Sub-Committee approved the request to purchase the equipment for patient assessment and management of urinary problems.

**Higher Award Funding (MSc Course)** – The Sub-Committee approved a request for higher award studies.

**Tilt In Space Shower Chair** – The Sub-Committee approved the purchase of a tilt in shower chair to provide postural support for community patients with severe mobility restrictions offering assistance whilst showering.

**Establishment of Running Groups** – The Sub-Committee approved the investment in appropriate training to support wider health issues for staff.

**Training Days, Audiology Department** – The Sub-Committee approved the Auditbase software training application, which would enable clinics to run smoother, therefore benefitting patients.

**Four Reclining Chairs, Clinical Dependency Unit, Glangwili General Hospital** – The Sub-Committee approved the replacement of four reclining chairs.

Accuvein Viewing System, Chemotherapy Day Unit, Prince Phillip Hospital – The Sub-Committee approved the purchase of an Accuvein Viewing System and Powered Stand to improve patient experience.

**iPad 7<sup>th</sup> Generation, Angharad Ward, Bronglais General Hospital** - The Sub-Committee approved the purchase of an iPad for use on Angharad Ward.

**Printer HP LaserJet, Cancer Services, Withybush General Hospital** - The Sub-Committee approved the purchase of a printer for use within Cancer Services at Withybush General Hospital.

**Teaching Equipment, Cilgerran Ward, Glangwili General Hospital** - The Sub-Committee approved the purchase of teaching equipment for the children's ward (Cilgerran).

Psychological Support Service, Ty Brynwgwyn, Prince Phillip Hospital – The Sub-Committee approved the final contribution to a 3-year SLA offering specialist psychological support to inpatients and their families.

Huntlight Dopplex Ability Kits x 2, Carmarthenshire Community Service – The Sub-Committee approved the purchase of 2 kits for use in the assessment of patients with leg ulcers.

Recliner Chairs, Ty Bryngwyn, Prince Phillip Hospital – The Sub-Committee approved the purchase of recliner chairs to provide an enhanced model of chair for the newly refurbished patient area.

Leg Ulcer Treatment Chairs for Narberth Leg Ulcer Clinic – The Sub-Committee approved the purchase of a chair to provide the best possible environment for care including refurbishing community facilities.

DAWN Clinical Software Training – The Sub-Committee approved the software training to provide enhanced staff training for anticoagulation nurses across HDdUHB on the DAWN 4S anticoagulation dosing software.

Mobile Support Arm System, Carmarthenshire County Team – The Sub-Committee approved the system purchase which offers enormous benefit to palliative patients whose strength and mobility has deteriorated.

Study Leave (Cancer Treatment for Young People) - The Sub-Committee approved the funding to enhance the cancer treatments for young people, improving the patient experience.

AuditBase Audiology Patient Management System – The Sub-Committee approved the enhanced staff training within the audiology service on the AuditBase patient management system to allow the service to analyse data around areas such as referral rates, etc.

Lifepak 1000 Defibrillator and Monitor – The Sub-Committee approved the defibrillator and monitor for the district nursing team to improve a patient's chance of survising a cardiac arrest should this occur whilst attending a clinic appointment.

Parity Econolite Infinity Cart – The Sub-Committee approved the cart for the Coronary Care Unit at Glangwili General Hospital for more speedy clinical access to blood results and other clinical information.

Mobile Video Conferencing Integrated System – The Sub-Committee approved the system for use by the specialist palliative care team to communicate across the Health Board.

### Financial Reports

The Sub-Committee received regular financial reports, which included fund balances, income and expenditure, donations, legacies, expenditure under £1000. At the November 2019 meeting, Members noted charitable funds requests would be available to view on Qlikview by March 2020.

### Matters Considered

The Sub-Committee was presented with and approved the list of authorised signatories.

At its November 2019 & March 2020 meeting, the Sub Committee approved applications to establish the following new charitable funds:

- Upper GI Health Board Wide Fund
- Paediatric Diabetes Health Board Wide Fund
- Audiology Fund Health Board Wide Fund.
- South Carmarthenshire Older Adults Mental Health Fund.
- Bronglais Chemotherapy Day Unit Appeal Fund.
- Carmarthenshire Women's Services Fund.

### Argymhelliad / Recommendation

To receive the Charitable Funds Sub-Committee Annual Report 2019/20.

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor: Cyfeirnod Cofrestr Risg Datix a	<ul> <li>12.6 - The Committee has established the Charitable Funds Operations Sub-Committee to ensure that the UHB's policies and procedures are followed in relation to specialist designated and restricted funds.</li> <li>Not applicable</li> </ul>
Sgôr Cyfredol: Datix Risk Register Reference and Score:	
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
Amcanion Llesiant BIP: UHB Well-being Objectives: <u>Hyperlink to HDdUHB Well-being</u> <u>Statement</u>	Improve efficiency and quality of services through collaboration with people, communities and partners

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth:	Ledger reports, minutes and investment reports
Evidence Base:	
Rhestr Termau:	Included within the body of the report
Glossary of Terms:	
Partïon / Pwyllgorau â	Charitable Funds Sub Committee
ymgynhorwyd ymlaen llaw y Bwrdd	
Partneriaeth Y Prifysgol:	
Parties / Committees consulted prior	
to Charitable Funds Committee:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Provide independent oversight and ensure correct controls and governance arrangements are in place to provide assurance that charitable funds within Hywel Dda are appropriately managed.
Ansawdd / Gofal Claf: Quality / Patient Care:	Develop a proactive and standard approach to the expenditure of charitable funds to ensure that appropriate service needs and additional benefits to patient care is supported. Support charitable funds requests, which provide increased benefits to patient services and demonstrate enhancement to the quality of patient care provided.

Gweithlu: Workforce:	Not applicable
Risg: Risk:	Reputational risk if charitable funds are not properly managed and governance controls are not followed.
Cyfreithiol: Legal:	Financial reporting is in line with charity law and guidance. Legal obligation to ensure that charitable funds are appropriately controlled.
Enw Da: Reputational:	Reputational risk if charitable funds are not properly managed and governance controls are not followed correctly.
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Ensure equity of access by ensuring decisions made benefit all patients and staff within Hywel Dda University Health Board



### PWYLLGOR CRONFA ELUSENNOL CHARITABLE FUNDS COMMITTEE

DYDDIAD Y CYFARFOD:	17 March 2020					
DATE OF MEETING:						
TEITL YR ADRODDIAD:	Charitable Funds Risk Register					
TITLE OF REPORT:						
CYFARWYDDWR ARWEINIOL:	Sarah Jennings, Director of Partnerships and Corporate					
LEAD DIRECTOR:	Services					
SWYDDOG ADRODD:	Sarah Jennings, Director of Partnerships and Corporate					
REPORTING OFFICER:	Services					

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate) Er Sicrwydd/For Assurance

#### ADRODDIAD SCAA SBAR REPORT Sefyllfa / Situation

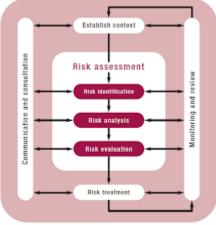
The Charitable Funds Committee (CFC) is responsible for providing assurance to the Board that operational risks aligned to the Committee are being identified, assessed and managed effectively.

This paper provides an update on any charitable funds related risks and recent actions that have been undertaken to provide assurance that the risk will be appropriately monitored and mitigated.

The Committee is asked to review and scrutinise these risks to seek assurance that all relevant controls and mitigating actions being put in place.

# Cefndir / Background

Effective risk management requires a 'monitoring and review' structure to be in place to ensure that risks are effectively identified and assessed and that appropriate controls and responses are in place.



(Risk Management Process, ISO 31000)

Operational risks must be managed within directorates under the ownership and leadership of individual executive directors, who must establish local arrangements for the review of their risk registers, which includes the validation of the information and risk scores, and the prioritisation and identification of solutions to their risks. In addition to these local arrangements, there are formal monitoring and scrutiny processes in place within the UHB with the aim of providing assurance to the Board that it is managing its risks effectively.

All risks identified within the Datix Risk Module must be aligned to a formal Board Committee, Sub-Committee or Group who will be responsible for monitoring and scrutiny of risks which relate to their remit.

The Charitable Funds Committee is responsible for the monitoring and scrutiny of <u>operational</u> risks within their remit. It is responsible for:

- Scrutinising operational risks within their remit either through receiving the risk registers or through Service Reports.
- Gaining assurance that risks are being appropriately managed, effective controls are in place and planned additional controls are being implemented.
- Challenging pace of delivery of risk actions.
- Identifying through discussions, new and emerging risks and ensure these are assessed by those with the relevant responsibility.
- Providing assurance to its parent committee that risks are being managed effectively and report risks which have exceeded tolerance through its Sub-Committee/Group update report.
- Using risk registers to inform meeting agendas.

### Asesiad / Assessment

The Charitable Funds Committee Terms of Reference state that it will:

• Contribute to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance framework (12.4).

The current charitable funds risk - 743 There is a risk of reputational damage if the Health Board becomes implicated by default, in events outside of the HB's control, due to association, or perceived association with any external charitable organisations - is presented on the risk register attached, together with the proposed actions to be put in place to provide assurance that the risk is being appropriately monitored and mitigated.

The risk has scored against the following 'impact' domains':

• Adverse publicity or reputation

The risk has been based on the following criteria:

- CFC has been selected by the risk lead as the 'Assuring Committee' and will feature in this way on Datix.
- Risks have been approved at Directorate level.
- Risks have not been escalated to the Corporate Risk Register.

The current risk is within the CFC's risk tolerance level of 8, which was discussed and agreed by the CFC on 20<sup>th</sup> September 2019. Due to the nature of this risk and whether the original target score of 4 would be achievable, it was agreed to increase the risk's target risk score to 8, to site within the Committee's tolerance level.

# Argymhelliad / Recommendation

The Committee is asked to:

- review and scrutinise this risk to seek assurance that all relevant controls and mitigating actions are being put place.
- discuss whether the planned actions will reduce the risk further and/or mitigate the impact if the risk materialises.

This in turn will enable the Committee to provide the necessary assurance to the Board, or otherwise, that the UHB is managing any risks effectively.

Amcanion: (rhaid cwblhau)	
Objectives: (must be completed) Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	12.4 In doing so, the Committee shall contribute to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance framework.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	743 - There is a risk of reputational damage if the Health Board becomes implicated by default, in events outside of the HB's control, due to association, or perceived association with any external charitable organisations
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	
	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
Amcanion Llesiant BIP: UHB Well-being Objectives: <u>Hyperlink to HDdUHB Well-being</u> <u>Objectives Annual Report 2018-2019</u>	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth:	Underpinning risk registers on the Datix Risk
Evidence Base:	Module from across the UHB's services reviewed by
	risk leads/owners
Rhestr Termau:	Risk Appetite - the amount of risk that an
Glossary of Terms:	organisation is willing to pursue or retain' (ISO
	Guide 73, 2009)
	Risk Tolerance - the organisation's readiness to
	bear a risk after risk treatment in order to achieve its
	objectives (ISO Guide 73, 2009)

Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Cronfa Elusennol:	N/A
Parties / Committees consulted prior	
to Charitable Funds Committee:	

Effaith: (rhaid cwblhau)	
Impact: (must be completed)	
Ariannol / Gwerth am Arian:	No direct impacts from report however impacts of each
Financial / Service:	risk are outlined in risk description.
Ansawdd / Gofal Claf:	No direct impacts from report however impacts of each
Quality / Patient Care:	risk are outlined in risk description.
	· ·
Gweithlu:	No direct impacts from report however impacts of each
Workforce:	risk are outlined in risk description.
Risg:	No direct impacts from report however organisations are
Risk:	expected to have effective risk management systems in
	place.
Cyfreithiol:	No direct impacts from report however proactive risk
Legal:	management including learning from incidents and
	events contributes towards reducing/eliminating
	recurrence of risk materialising and mitigates against
	any possible legal claim with a financial impact.
	any possible legal claim with a interfold impact.
Enw Da:	Poor management of risks can lead to loss of
Reputational:	stakeholder confidence. Organisations are expected to
	have effective risk management systems in place and
	take steps to reduce/mitigate risks.
	tano otopo to roduco/miligato nono.
Gyfrinachedd:	No direct impacts
Privacy:	· ·
Cydraddoldeb:	Has EqIA screening been undertaken? No
Equality:	Has a full EqIA been undertaken? No
	·

#### Charitable Funds Risk Register

Rick Rof	Health and Care Standards	Directorate	Directorate lead	Management or	service lead Date risk Identified	Risk Statement	Existing Control Measures Currently in Place	Domain	Risk Tolerance Score	Current Likelihood	Current Impact	Current Risk Score	Additional Risk Action Required	By Whom	By When	Progress Update on Risk Actions	Lead Committee	Target Likelihood	Target Impact	Target Risk Score	Date Reviewed
247	Standard 7.1 Workforce	P&CS: Charitable Funds	Jennings, Sarah	Llewelyn, Nicola	11/30/2018	There is a risk of reputational damage if the Health Board becomes implicated by default, in events outside of the HB's control, due to association, or perceived association with any external charitable organisations. This is caused by no requirement for external charitable organisations to conform to the HB's policies and procedures. Donations given to the HB to say thank you for the care received are sometimes made to HB staff involved in external charities of their own where their interests may not have been declared. This will lead to an impact/affect on the HB's reputation if association by default occurs with external charitable organisations which appear to have HB involvement and/or participation and seem to be aligned to the Health Board (either via staff association or name). This may result in a decrease of donations, charitable giving, lack of trust by patients, carers and members of the public, media interest and/or concerns or complaints raised. Risk location, Health Board wide.	UHB policies: Standards of Behaviour Policy (Incorporating Declarations of Interests, Gifts, Hospitality, Honorarium and Sponsorship). The above policy is referenced in all HDdUHB (A4C) contracts of employment where it states I hereby confirm that I accept this appointment on the terms and conditions set out above and contained in the Hywel Dda University Health Board Standards of Business Conduct I. Charitable Funds: Financial Administration and Governance Policy.	Adverse publicity/reputation	8	2	4	8	Revise the UHB's Standards of Behaviour Policy to incorporate guidance on the declaration of interests involving external charitable organisations and those with any financial associations.	Head of Corporate & Partnership Governance Head of Corporate & Partnership Governance	Completed Completed	The Standards of Behaviour Policy has undergone a full review and been assessed against similar policies across Wales. Consultation end date was mid July 2019 following its passage through Staff Partnership Forum (10/06), Workforce & OD Sub-Committee (04/07) and Audit & Risk Assurance Committee (27/08). The revised policy was approved at Business Planning & Performance Assurance Committee on 29/08/2019. The revised Standards of Behaviour Policy will be linked to the revised 'Charitable Funds: Financial Administration and Governance Policy' once approved. The Communications Plan has raised awarnesses of the new policy as follows: 1. Use of Team Brief, the payslip information advice section and the staff intranet. 2. Global e-mails have and will continue to remind employees and Independent Members of the Standards of Behaviour Policy and their responsibility to comply with it. 3. Targeted specific groups and forums to raise awareness of the policy such as corporate and local induction, the Local Partnership Forum, Medical Leadership Forum, Operations Business Meeting and other key meetings.		2	4	8	3/2/2020
													Work with key clinicians to communicate the importance of declaring all external interests, especially those involving external charitable organisations and those with any financial associations e.g. via the Medical Leadership Forum and 1:1 meetings with key clinicians.	Assistant Director, Medical Directorate	Completed	Assistant Director Medical Directorate has met with key clinicians in various forums to discuss the declaration of interests in external charitable organisations. Following the approval of the revised policy (BPPAC 29/08/19) wider dissemination took place across the whole Medical Directorate and will continue at regular intervals.					

#### Date: February 2020

#### Charitable Funds Risk Register

Risk Ref	Health and Care Standards	Directorate	Directorate lead	Management or service lead	Date risk Identified	Risk Statement	Existing Control Measures Currently in Place	Domain	Risk Tolerance Score	Current Likelihood	Current Impact	Current Risk Score	Additional Risk Action Required 방망 유명	Progress Update on Risk Actions	Lead Committee	Target Likelihood	Target Impact	Target Risk Score	Date Reviewed
													Work with senior Operations Directorate managers to communicate the importance of supporting all staff to declare external interests, especially those involving external charitable organisations and those with any financial associations e.g. awareness raising session at Operations Business Meeting.	Presentation delivered at the May 2019 Operations Business Meeting on the revised Standards of Behaviour Policy as part of targeted consultation.					
													Develop a 'model' Memorandum of Understanding to be introduced with all relevant external charitable organisations to discuss and agree how both organisations will collaborate and co-operate and the establishment of relevant governance structures.	external charities on UHB premises is being included in the revised 'Charitable Funds: Financial Administration and Governance Policy (420)' rather than developing a new corporate policy. The revised policy is being led by the Finance Directorate and will be communicated widely following approval by the Finance					
													Senior Finance Business	Committee with all relevant external charitable organisations. 'Model' Memorandums of Understanding will be developed if and when required.					

#### Date: February 2020



#### PWYLLGOR CRONFA ELUSENNOL CHARITABLE FUNDS COMMITTEE

DYDDIAD Y CYFARFOD:	17 March 2020
DATE OF MEETING:	
TEITL YR ADRODDIAD:	Draft Charitable Funds Committee Annual Report
TITLE OF REPORT:	2019/20
CYFARWYDDWR ARWEINIOL:	Simon Hancock, Charitable Funds Committee Chair
LEAD DIRECTOR:	
SWYDDOG ADRODD:	Sarah Jennings, Director of Partnerships & Corporate
REPORTING OFFICER:	Services

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate) Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA SBAR REPORT Sefyllfa / Situation

The purpose of this paper is to present the Charitable Funds Committee's (CFC) Annual Report for 2019/20 to the Board.

The Annual Report outlines how the CFC has complied with the key responsibilities set through its terms of reference and identifies key areas of work intended to provide further assurance that the Committee's terms of reference are being adequately discharged.

# Cefndir / Background

The Hywel Dda University Health Board (HDdUHB) was appointed corporate trustee of the charitable funds by virtue of Statutory Instrument 2009 No. 778 (W.66), with the Board serving as its agent in the administration of the charitable funds held by HDdUHB.

In accordance with HDdUHB's standing orders and scheme of delegation, the Board has nominated a committee to be known as the Charitable Funds Committee, established as a Committee of HDdUHB, and constituted from 22<sup>nd</sup> July 2010.

HDdUHB holds charitable funds as sole corporate trustee, and board members, whilst not 'trustees' in their own right, are jointly responsible for the management of those charitable funds.

The charitable funds linked to HDdUHB are independent of the 'exchequer' funds of HDdUHB and must be managed separately. The Charity Commission has regulatory responsibility for ensuring the proper management of these funds.

The purpose of the CFC is to 'make and monitor arrangements for the control and management of the HDdUHB's charitable funds, within the budget, priorities and spending criteria determined by the Board and consistent with legislative framework'.

This paper outlines the governance arrangements in place to ensure that the Committee's terms of reference are adequately discharged and that our registered charity, Hywel Dda

Health Charities, operates to a high standard with limited exposure to any kind of risk, both financial and non-financial.

### Asesiad / Assessment

The CFC Annual Report 2019/20 is intended to outline how the Committee and its Sub-Committee has complied with the duties delegated by the Board through the terms of reference set, and also to identify key actions that have been taken to address issues within the Committee's remit.

The CFC has been established under Board delegation with the CFC reviewing its current terms of reference at its meeting on 17<sup>th</sup> March 2020.

These terms of reference clearly detail the Committee's purpose to provide assurance to the Board in its role as corporate trustee of the charitable funds held and administered by the Health Board. The Committee is required to make and monitor arrangements for the control of the Board's charitable funds, within the budget, priorities and spending criteria determined by the Board and consistent with legislative framework.

### 1. Key responsibilities

In discharging its role, the Committee is required to oversee and monitor implementation against the following areas of responsibility:

- Within the budget, priorities and spending criteria determined by the HDdUHB as trustee and consistent with the requirements of the Charities Act 2011 (or any modification of these acts) to apply the charitable funds in accordance with its respective governing documents.
- Devise, implement and approve appropriate procedures and policies to ensure that fundraising and accounting systems are robust, donations are received and coded as instructed and that all expenditure is reasonable, clinically and ethically appropriate.
- Ensure that the HDdUHB policies and procedures for charitable funds investments are followed.
- In addition, make decisions involving the sound investment of charitable funds in a way that both preserves their value and produces a proper return consistent with prudent investment and ensuring compliance with:
  - Trustee Act 2000
  - The Charities Act 2011
  - Terms of the fund's governing documents.
- Receive at least twice a year reports for ratification from the Director of Finance and investment decisions and action taken through delegated powers upon the advice of the HDdUHB's investment adviser.
- Oversee and monitor the functions performed by the Director of Finance as defined in the HDdUHB's Standing Financial Instructions.
- Monitor the progress of Charitable Appeal Funds where these are in place and considered to be material.
- Monitor and review the HDdUHB's scheme of delegation for Charitable Funds expenditure and to set and reflect in Financial Procedures the approved delegated limits for expenditure from Charitable Funds.

# 2. Charitable Funds Operations Sub-Committee

There is currently one Sub-Committee reporting to the CFC; the Charitable Funds Operations Sub-Committee, which was constituted from 1<sup>st</sup> April 2017.

The Sub-Committee was established following a review of charitable funds governance arrangements at a local level to provide assurance to the CFC that HDdUHB's policies and procedures are followed in relation to the control and management of our named charitable funds. The Sub-Committee was established alongside the establishment of a central business function within the operations directorate with the intention of also providing administration support to the Sub-Committee function.

During 2019/20, the Sub-Committee met on ten occasions and was quorate at nine of these meetings.

The operational responsibilities of the Sub-Committee are to:

- Consider and approve all requests for expenditure over £5,000 against named charitable funds, within the scheme of delegation for authorisation of charitable funds expenditure.
- Providing updates on:
  - Fund balances Expenditure requests over £5,000 for consideration
  - Expenditure under £5,000

Unusual or novel expenditure requests of any value, and expenditure requests resulting in ongoing charitable funds commitment (prior to Charitable Funds Committee consideration)

Progress on requests for expenditure already approved

Expenditure plans for named HDdUHB charitable funds

Notable donations received

- Fundraising appeals
- Table of actions

Feedback from Charitable Funds Committee meetings.

- Develop and oversee the implementation of annual expenditure plans for the use of the named charitable funds.
- Provide quarterly written updates to the Charitable Funds Committee.
- The Chair of the Sub-Committee (or a suitably briefed deputy) will attend the quarterly Charitable Funds Committee meetings and provide written reports on the following items:

Notable items of expenditure

Key decisions

Progress on expenditure plans for use of named HDdUHB charitable funds Chair's actions undertaken outside of the cycle of Sub-Committee meetings Key risks and issues/matters of concern

Matters requiring Charitable Funds Committee consideration or approval Any revisions to the Sub-Committee's Terms of Reference.

# 2.1 Sub-Committee Feedback

The Sub-Committee is required to report to the CFC on a quarterly basis to provide assurance that it is exercising its duties in line with its terms of reference. During 2019/20, the CFC received quarterly written reports from the Sub-Committee highlighting the key areas of work scrutinised, key risks, issues, and matters of concern.

This included:

Sub-Committee update to the June 2019 CFC meeting

 Members received an update on the work of the Sub-Committee for the period 15<sup>th</sup> March 2019 – 6<sup>th</sup> June 2019 and were updated on charitable items approved for purchase, items rejected and items pending decision. 11 requests valued at £74,473 had been approved. Two requests valued at £13,612 were approved through Sub-Committee Chair's Action. One request was recommended for Executive Director approval valued at £38,706.

Sub-Committee update to the September 2019 CFC meeting

Members received an update on the work of the Sub-Committee for the period 19<sup>th</sup> June

 19<sup>th</sup> September 2019 and were updated on charitable items approved for purchase, items rejected and items pending decision. 14 requests valued at £73,562 were approved. Five requests were on hold whilst further information was obtained. Two requests were rejected. One request valued at £32,915 was recommended for Executive Director approval.

# 3. Membership

From the terms of reference approved in March 2019, the membership of the Committee was agreed as the following:

- Independent Member (Chair)
- Independent Member (Vice-Chair)
- 4 x Independent Members
- Chief Executive
- Director of Finance
- Director of Partnerships & Corporate Services (Lead Director) for Hywel Dda Health Charities

In attendance:

- Assistant Director of Finance (Finance Systems and Statutory Reporting)
- Senior Finance Business Partner (Accounting & Statutory and Reporting)
- Deputy Director of Operations
- Head of Hywel Dda Health Charities
- Staff Side Representative

The Committee's membership ensures that HDdUHB's charitable funds are managed by a clearly identifiable body of people (as the corporate trustee) who take responsibility for management and control of the funds.

# 4. Meetings

Since April 2019, CFC meetings have been held on four occasions and were quorate at each:

- 18<sup>th</sup> June 2019
- 20<sup>th</sup> September 2019
- 16<sup>th</sup> December 2019 (Strategy Workshop)
- 17<sup>th</sup> March 2020

# 5. Reporting to the Board

As the CFC is directly accountable to the Board for its performance, following each meeting it provides an assurance to the Board through a formal written update report, which is received at the subsequent Committee meeting. These reports highlight any significant matters which require the Board's attention and are also used to request Board ratification of any relevant decisions made by the Committee. The Committee provided update reports to the Board during 2019/20 on the following dates:

- 25<sup>th</sup> July 2019
- 28<sup>th</sup> November 2019
- 6. Matters escalated to Board

During 2019/20, no key risks and issues/matters of concern were escalated to the Board for consideration.

During 2019/20, there were no matters requiring Board level consideration or approval.

# 7. Committee Terms of Reference and principal duties

In discharging its duties, the CFC has undertaken work during 2019/20 against the following areas of responsibility:

# 7.1 Financial control

A financial procedure which includes expenditure guidelines is in place to ensure that there are sufficient management controls to provide assurance that:

- Spending is in accordance with objects and priorities agreed by the CFC.
- Criteria for spending charitable monies are fully met.
- Accounting records are maintained.
- Devolved decision making is within specified parameters.

HDdUHB's Standing Financial Instructions cover the charity in so far as it is possible. Where it is not possible to follow the Standing Financial Instructions then prior authority needs to be sought through the Committee and ratified by Board.

Charitable Funds are managed through HDdUHB's Oracle finance system in line with the Health Board's financial procedures. Internal Audit and Wales Audit Office conduct annual audits of the financial procedures in place.

Internal staff expertise ensures that all Charity Commission requirements and changes are adhered to and reported to the CFC as they occur.

# 7.2 Agreed spending objectives and charitable expenditure

Charity law recognises 'the relief of those who are ill including the support of those who care for the sick' as a charitable purpose. Our charitable funds must therefore only be utilised to support activity over and above our NHS responsibilities by providing additional benefits to frontline healthcare.

Our internal policies, procedures and systems relating to charitable funds expenditure have been subject to recent refinement. Our comprehensive 'User Guide' for staff provides clear guidelines on our charitable aims, eligible and ineligible items of expenditure and how to use the funds of the charity in a responsible and appropriate manner.

Every request for charitable expenditure must be approved by staff with the necessary authorised limits before being passed on to the Finance team for assessment and final authorisation.

Expenditure over £50,000 and expenditure under £50,000 which is unusual or contentious, is presented to the CFC as it arises, and is discussed and agreed before being committed.

# 7.3 Resources to maintain management and control of charitable funds

Staff are employed by the HDdUHB to ensure the effective management and operations of our charitable funds. Salary costs are reclaimed from the charity's resources to support the following duties:

- Maintenance of accounting systems
- Production of annual accounts

- Compilation of management information
- Scrutiny of expenditure proposals to ensure propriety
- Preparation of committee papers
- Fundraising and support to internal and external stakeholders.

The Committee considers these costs on an annual basis when a report is submitted at the final meeting of each financial year to seek approval to cover both pay and non-pay costs associated with the running of the charity.

### 7.4 Risk management

The Chief Executive of HDdUHB, together with the other Directors, is responsible for ensuring that an effective system of financial control is maintained. The Chief Executive and other Directors are also responsible for reviewing the effectiveness of this system and have confirmed that the minimum control standards laid down by the Welsh Government have been in existence throughout the financial year. The minimum control standards apply equally to the management of the charity by officers of the HDdUHB as to the exchequer funds of the University Local Health Board. In this way, the major risks to which the charity is exposed have been reviewed and systems have been established to mitigate those risks.

Historically, the Committee's risk register has had high-risk scores around a number of risks relating to public confidence and reputational damage. However, recent efforts to rebuild trust and confidence have significantly helped to reduce the risks to the charity as mitigating actions have had a great impact.

At the CFC meeting on 20<sup>th</sup> September 2019, an update was provided on an on-going risk (743) in relation to reputational damage by default due to association, or perceived association, with external charitable organisations. Members discussed the tolerance level for this risk and whether the target risk score of 4 would be achievable due to the nature of the risk. It was agreed that a target risk score of 8 would be more achievable which was within the tolerance level of the Committee's risk register.

#### 7.5 Investments and performance

The charity retains the services of investment advisors to manage its investment portfolios. Policy is set by the charity trustee in its instruction to their advisors. The advisors are instructed to manage the portfolios to produce both income and capital returns, and manage those funds within the value they retain on the accounts. The charity also holds funds in short term investments that are not managed by the investment advisor. The CFC monitors the performance of the Investment Advisor (Sarasin & Partners LLP) through the quarterly Integrated Performance Report.

#### 7.6 Reserves

The charity has a reserves policy and has defined reserves to be the element of funds that are unrestricted and uncommitted. The charity shall hold reserves of 10% of the value of its fixed asset investments and £500,000, and shall only fall below to cover losses in value of those investments. In order to maintain the reserves as low as possible, it is important that expenditure plans be developed for all funds. Reserves are needed where there may be insufficient balances in individual restricted and designated funds to meet the objectives of those funds. There is also a need for reserves where there may be a requirement to incur expenditure which is exclusively charitable, and cannot be funded from revenue, for which there is not a relevant fund.

# 7.7 Internal audit

Internal audit undertake annual reviews to evaluate the adequacy of procedures and controls, to ensure compliance, and to provide reasonable assurance over:

- Achievement of management objectives for the systems
- Use of resources in accordance with donors requirements
- Compliance with policies and procedures
- Safeguarding assets.

The internal audit reports are presented to both the CFC as well as the Audit and Risk Assurance Committee (ARAC).

# 7.8 Compilation of annual report and accounts

As part of its delegated role, the CFC reviews, approves and adopts the charity's annual report and accounts on an annual basis. Wales Audit Office (WAO) conducts an annual audit of the charity's annual reports and accounts with the outcome reported to the Committee as well as ARAC. The annual audit provides assurance that all financial procedures are being adhered to. The 2018/19 annual report and accounts were approved by the CFC at the September 2019 meeting following their audit by WAO.

# 7.9 Professional development

The Board, as corporate trustee, has a sound knowledge of the purpose of the charity and the procedures that govern its operations to fulfil its duties.

All Board Members (Executive Directors and Independent Members) are aware of their statutory duties and responsibilities to the charity and have unrestricted access to officers of the charity to enquire about its activities.

The Committee receives regular updates on relevant changes to charity law and any other areas of interest via verbal updates from staff, papers from the Charity Commission or from the national Healthcare Financial Management Association (Charitable Funds Special Interest Group).

An overview of the charity and roles and responsibilities of the corporate trustee is to be developed as part of the formal induction arrangements for new Board members, led by the Corporate Governance team, with a more informal induction undertaken by the Head of Hywel Dda Health Charities for new Committee members when required.

# 8. Chair's Actions

Outside of Committee meetings, the Chair has delegated authority to act on behalf of the Committee. Chair's Actions typically focus on the approval of items of expenditure over £50,000, as required by the charitable funds approval thresholds. Requests for 'Chair's Actions' are infrequent but are always accompanied by detailed papers for audit and reporting purposes, with any activity reported back to the next meeting for ratification.

During 2019/20, no items were considered under 'Chair's Action'.

# 9. Other areas of responsibility

During 2019/20, the CFC also received and considered the following:

- Members were presented with examples of staff fundraising activities and expressed gratitude to staff for their heartening and inspiring fundraising stories.
- Members of the Committee were provided with a presentation on the charity's investments by Mr Alexander True and Mr Tom Knight, Sarasin Investments. Members were also provided with an update on the Charity's portfolio, training and events and the investment outlook, noting:

- The combined portfolio value as at 31<sup>st</sup> May 2019 was £7.3 million.
- Mildly overweight in respect of equities and property.
- Underweight on fixed interest.
- Performance versus peers up 6.8% versus 6.1% (Arc).

Members further noted a market update, noting the following key points:

- Rate height reached a peak and was expected to start to fall again.
- European interest rates German government issued a 10-year bond offering a negative rate of -0.3% and it was 1.6 times over-subscribed. Western economy enjoyed a decent growth from 2009.
- UK government borrowing was at a 17 year low.
- An update report was provided to the Committee in respect of the Psychological Support for Cancer Patients project and Members noted the delay in the project launch due to the recruitment of a psychologist and further noted proposed changes in order to ensure the success of the project.
- Members were pleased to note "The Utilisation of IT Devices to Support Patient Centred Care and Service Improvement" had been purchased.
- Members visited the Bronglais General Hospital Chemotherapy Day Unit and approved the development of a fundraising appeal under the umbrella of Hywel Dda Health Charities for a new Chemotherapy Day Unit at Bronglais Hospital, subject to confirmation of the availability of a proposed location for the development. Members approved the contribution of £287,496 from the Ceredigion Cancer Services charitable fund to the development and reaffirmed its commitment to the £250,000 of charitable funds committed to the scheme in 2015 and approved the additional sum of £9,97 of current and any future interest growth to the scheme.
- An update report was provided at the June 2019 meeting on the charity's financial performance and position and Members noted the following:
  - Next movements in funds had increased by £15,535 in the month of April 2019.
  - Donations had remained steady over the year.
  - Although donations increased, spend had a decreasing trend.
  - The decrease of 30% in donations for month 1 had been recovered in month 2.
  - The largest ever income as charity with a 26% increase was noted for the year ending 31<sup>st</sup> March 2019.
- An update report was provided at the September 2019 meeting on the charity's financial performance and position and Members noted the following:
  - A 12% decline noted in Carmarthenshire.
  - A new on-line fundraising database established.
  - The Charity exceeded its fundraising target during Quarter 1 (April June 2019).
- Members were informed that following the 2018 Internal Audit Report, it was recommended that the funded projects associated with the T607 (Wales for Africa) fund were considered completed and formally closed.
- The Committee approved the request to contribute £259,214 of charitable funds to support an enhanced scheme to improve experience for patients using Ward 10 at Withybush General Hospital.
- Members felt they could not approve a proposal from the Executive Director of Operations on the principle of using charitable monies as a gesture to support staff working beyond expectations during the winter months.
- A strategic planning workshop was held in December 2019 to engage with CFC members on the future direction of Hywel Dda Health Charities to support the development of the charity's future growth strategy and the development of charity's three-year plan 2020/23.

Argymhelliad / Recommendation

To endorse the Charitable Funds Committee Annual Report for 2019/20 for onward submission to the Board.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	
Cyfeirnod Cofrestr Risg Datix a Sgôr	N/A
Cyfredol: Datix Risk Register Reference and	
Score:	
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Hyperlink to NHS Wales Health &	
Care Standards	
Amcanion Strategol y BIP: HDDUHB Strategic Objectives:	Not Applicable
Hyperlink to HDdUHB Strategic	
Objectives	
Amcanion Llesiant BIP: HDDUHB Well-being Objectives:	Not Applicable
Hyperlink to HDdUHB Well-being	
Statement	

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth:	Standing Orders
Evidence Base:	Standing Financial Instructions
	Charity legislation and guidance
	Minutes of CFC & Sub-Committee meetings and CFC
	update reports to Board
Rhestr Termau:	HDdUHB – Hywel Dda University Health Board
Glossary of Terms:	CFC – Charitable Funds Committee
Partïon / Pwyllgorau â ymgynhorwyd	Director of Partnerships & Corporate Services
ymlaen llaw y Pwyllgor Cronfa	Head of Charitable Funds
Elusennol:	
Parties / Committees consulted prior	
to Charitable Funds Committee:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	No direct impacts
Ansawdd / Gofal Claf: Quality / Patient Care:	No direct impacts

Gweithlu: Workforce:	No direct impacts
Risg: Risk:	No direct impacts
Cyfreithiol: Legal:	No direct impacts
Enw Da: Reputational:	No direct impacts
Gyfrinachedd: Privacy:	No direct impacts
Cydraddoldeb: Equality:	No direct impacts



#### PWYLLGOR CRONFA ELUSENNOL CHARITABLE FUNDS COMMITTEE

DYDDIAD Y CYFARFOD:	17 <sup>th</sup> March 2020			
DATE OF MEETING:				
TEITL YR ADRODDIAD:	Hywel Dda Health Charities Integrated Performance			
TITLE OF REPORT:	Report			
CYFARWYDDWR ARWEINIOL:	Sarah Jennings, Director of Partnerships and			
LEAD DIRECTOR:	Corporate Services			
SWYDDOG ADRODD:	Jennifer Thomas, Senior Finance Business Partner &			
REPORTING OFFICER:	Nicola Llewelyn, Head of Hywel Dda Health Charities			

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate)

# For discussion

#### ADRODDIAD SCAA SBAR REPORT Sefyllfa / Situation

This paper provides the Charitable Funds Committee with an integrated picture of performance of Hywel Dda Health Charities. The report provides an update to the Committee on the charity's performance and position as of 31<sup>st</sup> January 2020.0

### Cefndir / Background

This report has been developed to provide assurance to the Committee on the charity's performance and is intended to bring together both financial and non-financial information. The report is intended to provide the Committee with the relevant information required to scrutinise key performance information as the charity's corporate trustee.

#### Asesiad / Assessment

The charity's performance is summarised in the main body of the report which is presented in a dashboard style format, as per the request of Committee members.

#### Argymhelliad / Recommendation

The Committee is asked to discuss and note the content of this report and receive assurance on the charity's performance.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Risk Register Reference:	Not applicable for this paper.
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	Governance, Leadership and Accountability

Amcanion Strategol y BIP: UHB Strategic Objectives:	9. To improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.			
Amcanion Llesiant BIP: UHB Well-being Objectives: <u>Hyperlink to HDdUHB Well-being</u> <u>Statement</u>	Not applicable for this paper.			
Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015 - Pum dull o weithio: The Well-being of Future Generations (Wales) Act 2015 - 5 Ways of Working:	Please explain how each of the '5 Ways of Working' will be demonstratedLong term - the importance of balancing short-term needs with the need to safeguard the ability to also meet long-term needs.Not applicable for this paper.			
	Prevention – the importance of preventing problems occurring or getting worse. Not applicable for this paper.			
	Integration - the need to identify how the Health Board's well-being objectives may impact upon each of the well-being goals, on its other objectives, or on the objectives of other public bodies.			
	Not applicable for this paper.			
	Collaboration – acting in collaboration with anyone else (or different parts of the organisation itself) which could help the Health Board to meet its well-being objectives.			
	Not applicable for this paper.			
	Involvement - the importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the Health Board serves			
	Not applicable for this paper.			

Gwybodaeth Ychwanegol:	
Further Information:	
Ar sail tystiolaeth:	Ledger reports and investment reports
Evidence Base:	
Rhestr Termau:	Included within the body of the report
Glossary of Terms:	
Partïon / Pwyllgorau â ymgynhorwyd	Director of Finance
ymlaen llaw y Pwyllgor Cronfa	Director of Partnerships and Corporate Services
Elusennol:	Investment advisors
Parties / Committees consulted prior	Fundraising team
to Charitable Funds Committee:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	The report sets out the financial position of the charity. Income generated from fundraising activities is a key source of income for Hywel Dda Health Charities. The charity is therefore duty bound to ensure that the correct controls and governance arrangements exist with regards to all aspects of fundraising.
Ansawdd / Gofal Claf: Quality / Patient Care:	Charity objects are in support of NHS services locally.
Gweithlu: Workforce:	The charity has no employees but may access staff time via the University Health Board.
Risg: Risk:	Reputational risk if associated with unethical fundraising.
Cyfreithiol: Legal:	The charity's financial reporting is in line with charity law and guidance.
Reputational:	Reputational risk if associated with unethical fundraising.
Privacy	No impact
Cydraddoldeb: Equality:	No EqIA is considered necessary for a paper of this type.



Hywel Dda Health Charities Rhif Elusen Gofrestredig: 1147863 Registered Charity Number: 1147863

# Hywel Dda Health Charities Integrated Performance Report

Position as at 31<sup>st</sup> January 2020

Charitable Funds Committee -17th March 2020

# 1. Summary

Purpose	Key Messages
• The purpose of this report is to provide an integrated picture of the performance of Hywel Dda Health	• The value of our funds has increased by £1,079,129 during this financial year.
<ul> <li>Charities.</li> <li>The report details the financial performance and position for the financial year to 31<sup>st</sup> January 2020 and provides</li> </ul>	• Donations have increased by 30% and legacies by 21% in comparison to the same period in the previous financial year, which is significantly greater than any previous years.
an update on progress made against the charity's 12- month work plan during 2019/20.	• Donations have seen an increase of over recent months within Ceredigion & Corporate (see 2.1).
<ul> <li>For the period ending 31<sup>st</sup> January 2020, a summary statement is shown in appendix 1.</li> </ul>	<ul> <li>Following a recent downward trend in income for Carmarthenshire, donations have remained stable since October 2019.</li> </ul>
	• We predict that our total incoming resources will exceed £2m for the first time which demonstrates the continued interest of our local communities and staff in supporting their local NHS.

# 1.1 Summary of Key Financial Activity

The charitable funds balances for all directorates, including future commitments as at 31<sup>st</sup> January 2020 are shown below:

						Less	
Fund Balances As At 31st January 2020	Hywel Dda	Carms	Ceredigion	Pembs	Total	Commitments	Total
Corporate	163,727				163,727	0	163,727
Community		222,607	574,389	134,250	931,246	437,220	494,026
Mental Health & Learning Disabilites	25,113	52,066	8,348	75,822	161,349	1,755	159,594
Acute Services -							0
Scheduled Care		444,076	108,328	27,118	579,522	5,271	574,251
Unscheduled Care		883,559	2,057,103	2,645,879	5,586,541	400,396	5,186,145
Cancer Services		560,738	732,275	734,556	2,027,569	950,873	1,076,696
Women & Children's Service		336,742	47,746	46,839	431,327	28,185	403,142
Other		129,134	18,870	33,112	181,116	3,640	177,476
Total	188,840	2,628,922	3,547,059	3,697,576	10,062,397	1,827,340	8,235,057

# 1. Summary continued.

- 1.1.1 Appendix 1 shows the net movement in funds for period ending 31<sup>st</sup> January 2020.
- 1.1.2 The key movements are as follows:
  - The **Net Assets** of the charity have increased by £1,079,129 for the year period ending 31st January 2020.
  - Total **Incoming Resources** to 31st January 2020 was £1,682,473 of which £935,013 related to grants, legacy and investment income. Legacy income received is 21.43% more in comparison to month 10 in the previous financial year.
  - **Donations and Fundraising Income** is £747,460. This represents an increase of 29.8% in comparison to month 10 income from the previous financial year. See also Fundraising and Donation Trends 2.1.
  - **Realised & Unrealised Gains** on investment assets amount to £170,135 as at quarter 3, an increase in comparison to previous year loss of (£59,173).

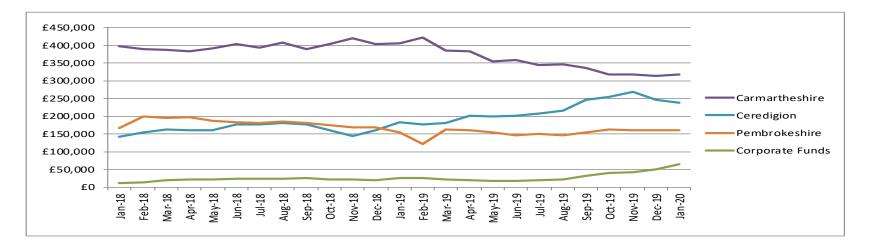
# 2. Financial Activity

### 2.1 Donation and Fundraising Trend

- Donations of £46,824 were received via JustGiving & My Donate for the period up to 31<sup>st</sup> January 2020. Donations via My Donate have now ceased. There has been an increase of 25% in JustGiving donations in comparison to the same period last year.
- Material legacies (those received over the value of £5,000) received in the financial year to 31<sup>st</sup> January 2020 are as follows:

£	To Benefit	<b>Date Received</b>
763,210.41	Bronglais General Hospital Purpose	Jan-20
95,722.76	Bronglais General Hospital Purpose	May-19
25,000.00	PPH Breast Centre	Sep-19
883,933.17		

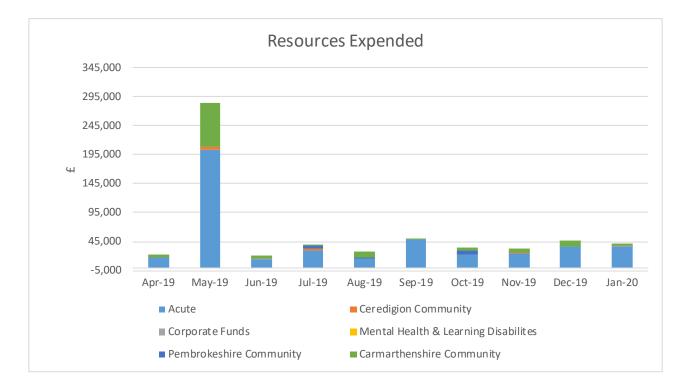
• The graph below depicts the rolling annual donations by county, shown on monthly basis from January 2018 onwards.



# 2. Financial Activity continued

### 2.1.2 Resources Expended

- Expenditure during 2019/20 has been static with the exception of May 2019, which included Ty Bryngwyn Support Costs of £52,848, and purchase of ECG & Cardiovascular Ultrasound £158,787 (Pembrokeshire) as the major spending that month.
- Considering the exceptional operational pressures that the organisation has faced over the winter period the stable spend remains consistent with previous years. However it is acknowledged through the three-year plan that a focus on increasing our expenditure is imperative in future years and there is an opportunity to make real impact and achieve our charitable objectives through increasing our expenditure.



# 3. Investment Position

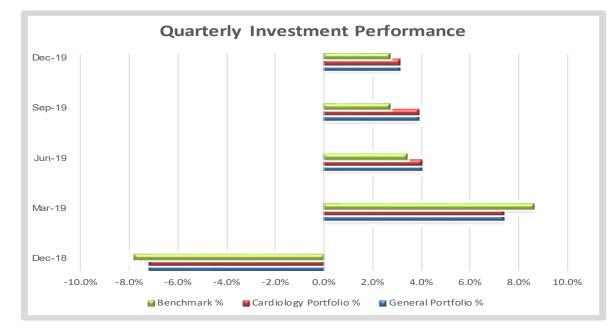
### 3.1 Investment performance

As at 31<sup>st</sup> December 2019 the value of those investments held, was £7,963,594, with the total funds held by the charity at the same date being £10,062,397.

Funds are separated into two areas. Firstly, a fund tied to the permanent endowment fund for Pembrokeshire Cardiology Equipment of £2,131,546, and a General Charity Fund of £5,832,048.

See below a chart reporting quarterly performance against the benchmark for quarter ending 31<sup>st</sup> December 2019.

Further update will be presented by Sarasin at the Charitable Funds Committee meeting on 17<sup>th</sup> March 2020.



Portfolio benchmark (from 1-Feb-18): FTSE All-Share 5% capped (Total Return) (UK) (20%), ICE BofAML Sterling Corporate (8.5%), ICE BofAML UK Gilts All Stocks (9%), MSCI AC World ex UK (Local Currency) (GBP) (25%), MSCI AC World ex UK (Net Total Return) (25%), MSCI All Balanced Property Funds - One Quarter Lagged (4%), S&P Developed Property Net TR (3.5%), UK cash LIBOR 1 Month (Total Return) (5%).

Performance is calculated 'net' of Sarasin's investment management fees, using Bid prices. This takes into account receipts to and withdrawals from the portfolio during the period, and their dates. Prices are sourced from Bloomberg. The report 'looks-through' to the underlying investments within the Sarasin funds in order to show the portfolio's overall allocation. Where a portfolio holds Sarasin Unit Trusts or OEIC Funds, we use a close of business unit price to enable more

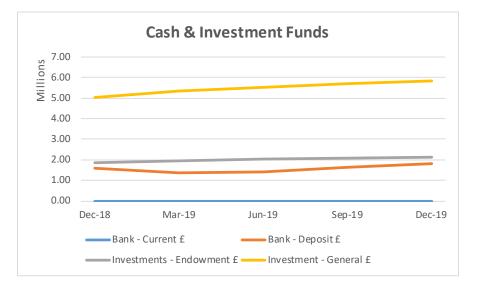
# 4. Working Balances

The need for access to funds is monitored on an ongoing basis which informs discussions with our Investment Advisor.

Please see below a quarterly summary of funds held by the charity. The Charity Bank Accounts (as at 31<sup>st</sup> January 2020):

Current Account: £100 Deposit Account: £2,685,752

The balance of cash held is driven by the level of commitments.



# 5. Governance & Support Costs

In March 2019, the Committee approved a governance & support costs budget of £305,160 for 2019/20.

For the year to  $31^{st}$  January 2020, the reported position for the total of Finance and Fundraising costs is an underspend of £18,160 against budget, see below for the breakdown:

	Approved Annual Budget	Budget to 31/01/20	-	
	£	£	£	£
Finance	88,372	73,643	73,643	0
Fundraising	216,788	180,657	162,497	(18,160)
Total	305,160	254,300	236,140	(18,160)

# 5. Governance & Support Costs (continued)

Detailed below is a table presenting all income, returns and charges which are apportioned across funds for the period ending 31<sup>st</sup> January 2020, categorised into unrestricted, restricted and endowment funds.

There is a net surplus from unrestricted apportionments of £217,916.

For clarity on the nature of dividend and interest earned, definitions are as follows:

- Unrestricted and restricted funds income earned from surplus cash from general and restricted funds invested with Sarasin. The income earned is apportioned against all unrestricted and restricted funds based on an average fund balance across the whole year
- Endowment funds income earned from an investment where the capital cannot be spent and that income earned is to be used for a specific purpose, and is therefore restricted and will not be generally apportioned across all funds.

	Unrestricted Funds	Restricted Funds	Total	Endowment Funds	Overall Total
Investment Income	(84,198)	(55,501)	(139,699)	(49,413)	(189,112)
Governance & Support - Finance, Fundraising & Support Team	142,325	93,816	236,140	0	236,140
Audit Fees	4,520	2,980	7,500	0	7,500
Investment Gains & Losses	(280,563)	(184,938)	(465,501)	(170,135)	(635,637)
(Surplus ) / Deficit	(217,916)	(143,644)	(361,560)	(219,548)	(581,108)

- The surplus unrestricted funds is sufficient to cover the governance and support costs as well as audit fees.
- To be prudent it is proposed that the Committee agrees that the surplus will be carried forward into 2020-21. This is to allow flexibility and counter any adverse market changes.

# 6. 2019-20 Projected Governance & Support Costs

### 6.1 Governance and support costs 2019/20

In March 2019 the Charitable Funds Committee approved a combined governance and support budget (finance and fundraising functions) for the 2019/20 financial year of £305,160.

The estimated governance and support costs to be charged to the charity for 2019/20 are £287,314, as outlined in appendix 5. These costs are £17,846 under the approved budget for the financial year:

The underspend relates mainly to pay costs. The Marketing & Communications vacancy has been vacant since November 2019 and a new candidate has yet to be recruited despite two recruitment drives. The job description for this role is currently being revised and the role advertised shortly. The Ceredigion Fundraising Officer role has also been vacant since February 2020 and will also be advertised shortly.

# 7. Financial Projections, Opportunities & Risks

### 7.1 Risks & risk management strategy

There are no new or emerging risks at present.

# Appendix 1: Fund Balances 2019-20

		IARITABL	DCAL HEAL LE FUND RE JMMARY	TH BOARD EPORT				
	FOR THE P		NDING 31st	JANUARY 2	2020			
	Corporate Acute Carmarthen Ceredigion Pembrokeshire Mental Health Services Community Community Community & Learning Disabilities							
	£	£	£	£			£	
Incoming resources								
Donations	61,059	591,492	43,698	19,343	14,646	17,222	747,460	
Legacies	0	868,833	0	3,500	0	0	872,333	
Grants receivable	0	0	3,887	0	0	9,380	13,267	
Investment income	0	49,413	0	0	0	0	49,413	
Activities for generating funds	0	0	0	0	0	0	0	
Other incoming resources	0	0	0	0	0	0	0	
	61,059	1,509,738	47,585	22,843	14,646	26,602	1,682,473	
Resources expended								
Costs of generating funds	0	0	0	0	0	0	0	
Charitable activities	(4,082)	(450,625)	(123,411)	(8,493)	(13,491)	(5,512)	(605,614)	
Governance costs	0	0	0	0	0	0	0	
Support costs	0	0	0	0	0	0	0	
Investment Management	0	2,270	0	0	0	0	2,270	
_	(4,082)	(448,355)	(123,411)	(8,493)	(13,491)	(5,512)	(603,344)	
Net incoming/(outgoing) resources								
before transfers	56,977	1,061,383	(75,826)	14,350	1,155	21,090	1,079,129	
Gross transfers between funds	0	0	0	0	0	0	0	
Net incoming/(outgoing) resources	56,977	1,061,383	(75,826)	14,350	1,155	21,090	1,079,129	
Gains/(losses) on investment assets								
Realised and Unrealised	0	170,135	0	0	0	0	170,135	
Net movement in funds	56,977	1,231,518	(75,826)	14,350	1,155	21,090	1,249,264	
Opening balance at 1 April 2019	106,750	7,574,558	298,433	560,038	133,095	140,259	8,818,051	
Closing balance at 31st January 2020	) 163,727	8,806,076	222,607	574,388	134,250	161,349	10,062,397	

# Appendix 2: Fund Balances Movement 2019-20

	Month 10	Month 10 Closing
Fund Balances 2019-20	movement %	Balance £000
Cancer Services - Carmarthenshire	0.33	560.74
Cancer Services - Ceredigion	1.89	732.27
Cancer Services - Pembrokeshire	0.27	734.56
Carmarthenshire Community	-0.75	222.61
Ceredigion Community	0.14	574.39
Pembrokeshire Community	0.00	134.25
Corporate	0.52	163.73
Mental Health & Learning Disabilities	0.18	161.35
Other - Carmarthenshire	-0.03	129.13
Other - Ceredigion	0.00	18.87
Other - Pembrokeshire	0.02	33.11
Planned - Ceredigion	0.07	108.33
Planned Care - Carmarthenshire	0.32	444.08
Planned Care - Pembrokeshire	-0.05	27.12
Unscheduled Care - Ceredigion	8.46	2,057.10
Unscheduled Care - Pembrokeshire	0.59	2,645.88
Unscheduled Care - Carmarthenshire	0.04	883.56
Women & Children Srv - Carmarthenshire	0.27	336.74
Women & Children Srv - Ceredigion	-0.03	47.75
Women & Children Srv - Pembrokeshire	0.05	46.84
Total	12.29	10,062.40

# Appendix 3: Material Commitments

Service	Fund Name	£	Description	Date Approved	Status
Cancer Service - Pembrokeshire	Pembs Cancer Services	250,000.00	Ward 10 Refurbishment	2016	Drawing to close - Finance are working with Capital team to ensure spend has complied with approved expenditure plan.
Cancer Service - Pembrokeshire	PDT - WGH Ward 10 Fund	55,034.00	Refurbishment of Ward 10	2016	Drawing to close - Finance are working with Capital team to ensure spend has complied with approved expenditure plan.
Unscheduled Care - Ceredigion	CMW - BAJ - Bronglais	250,000.00	BGH Chemotherapty Relocation	2015	Re-committed to the development in September 2019.
Ceredigion Community	CMW - BAJ - Aberaeron	11,232.42	Minaeron	Dec-17	Active Spend - Finance are working with Capital team to ensure spend has complied with approved expenditure plan.
Cancer Service - Pembrokeshire	WGH Ward 10 Refurbishment Scheme	175,741.00	Ward 10 Enhanced Scheme	Sep-19	Active Spend - Finance are working with Capital team to ensure spend has complied with approved expenditure plan.
Cancer Service - Ceredigion	Ceredigion - Cancer Services	287,496.00	BGH Chemotherapy Development	Sep-19	Approved as contribution to the development in September 2019
Cancer Service - Ceredigion	Ceredigion - Cancer Services	13,271.00	Cancer Psycological Support Pilot Project 2 years	Mar-18	
Cancer Service - Pembrokeshire	Pembs Cancer Services	24,620.00	Cancer Psycological Support Pilot Project 2 years	Mar-18	
Cancer Service - Glangwili	GGH Oncology	30,967.00	Cancer Psycological Support Pilot Project 2 years	Mar-18	Project commenced later than initiated; 1st year commenced 2019-20
Cancer Service - Prince Philip	PPH Oncology	27,312.00	Cancer Psycological Support Pilot Project 2 years	Mar-18	
Unscheduled Care - Pembrokeshire	Cardiac/ Respiratory Fund - Pembs	2,250.00	Hypertrophic Cardiomyopathy project	Sep-19	Request received Feb 2020 to draw upon funds.
Unscheduled Care - Ceredigion	Ceredigion - Cardiovascular Services	2,250.00	Hypertrophic Cardiomyopathy project	Sep-19	Finance are working with Service Delivery
Unscheduled Care - Prince Philip	PPH Cardiology Fund	6,750.00	Hypertrophic Cardiomyopathy project	Sep-19	Manager (USC) to ensure spend has complied
Unscheduled Care - Glangwili	GGH Cardiology Fund	6,750.00	Hypertrophic Cardiomyopathy project	Sep-19	with approved plan.

# Appendix 4: Significant Expenditure over £5,000

Service	Fund Name	£	Description
Unscheduled Care - Pembrokeshire	PDT -Cardiology Equip Income Fund	£15,910.00	GE MAC VU 360 ECG Machine
Pembrokeshire Community	Pembrokeshire Community Services	£6,180.00	Medical Tilting Chair
			My Dementia Improvement Betwork - PC,
Carmarthenshire Community	Amman Valley General Purposes	£5,995.00	Software, Tablet, Licence, Trolley
Unscheduled Care - Carmarthenshire	Carms Clinical Support Haematology	£8,187.00	Barworth Medical Phlebotomy Chairs

# Expenditure over £5,000 for the period Aug 2019 - Jan 2020

# Appendix 5: Projected 2019-20 Governance and Support costs

Name	Days per	Total Budget	Governance	Support	M10	M11-M12 estimated	Total	Variance to budget
Finance function	Month	£	£	£	£	£	£	£
Charitable Funds Officer (Queries and fund								
analysis)	All	30,649	0	30,649	25,541	5,108	30,649	0
Creditors	6	9,595	0	9,595	7,996	1,599	9,595	0
Procurement	5	7,996	0	7,996	6,663	1,333	7,996	0
Charitable Funds Accountant (General supervision, queries, annual accounts, trustee committee)	6	13,932	13,932	0	11,610	2,322	13,932	0
Finance Supervisory Support (Reconciliation/ledger control/gains/income)	8	14,706	7,353	7,353	12,255	2,451	14,706	0
General Offices	2	2,783	0	2,783	2,319	464	2,783	0
Finance Senior Lead	2	7,711	7,711	0	6,426	1,285	7,711	0
Overheads (HFMA / Training / Other)	n/a	1,000	1,000	0	833	167	1,000	0
TOTAL		88,372	29,996	58,376	73,643	14,729	88,372	0

# Appendix 5: Projected 2019-20 Governance and Support costs (continued)

Name	Days per		Governance	Support	M10	M11-M12 estimated	Total	Variance to budget
Fundraising and support team pay	Month	£	£	£	£	£	£	£
Head of Hywel Dda Health Charities	1 fte	57,397	0	57,397	48,006	9,601	57,607	210
Senior Fundraising Officer	0.8 fte	29,905	0	29,905	24,589	4,918	29,507	-398
Community & Events Fundraising Officers	1.6 fte	52,427	0	52,427	42,772	4,772	47,554	-4,873
Marketing & Communications Officer	1 fte	32,520	0	32,520	22,791	0	22,791	-9,729
Administration Officer	0.8 fte	16,974	0	16,974	14,328	2,866	17,194	220
TOTAL	5.2 fte	189,223	0	189,223	145,544	29,109	174,653	-14,570
Fundraising and support team non-pay								
33000-Printing Costs	n/a	5,250	0	5,250	4,769	954	5,723	473
33020-Books, Journals & Subscriptions	n/a	2,725	0	2,725	2,778	0	2,778	53
33050-Design Costs	n/a	3,750	0	3,750	2,270	454	2,724	-1,026
33610-Travel & Subsistence	n/a	6,000	0	6,000	4,148	830	4,978	-1,022
34200-Training Expenses	n/a	500	0	500	150	0	150	-350
35550-Computer Software/License Fees	n/a	4,590	0	4,590	4,886	0	4,886	296
Fundraising costs (new subjective code)	n/a	3,750	0	3,750	1,291	258	1,549	-2,201
37470-Miscellaneous Expenditure (including fundraising costs)	n/a	1,000	0	1,000	1,251	250	1,501	501
TOTAL	n/a	27,565	0	27,565	21,543	2,746	24,289	-3,276
GRAND TOTAL		305,160	29,996	275,164	240,730	46,583	287,314	-17,846



#### PWYLLGOR CRONFA ELUSENNOL CHARITABLE FUNDS COMMITTEE

DYDDIAD Y CYFARFOD:	17 March 2020
DATE OF MEETING:	
TEITL YR ADRODDIAD:	Support for Children Affected by Cancer
TITLE OF REPORT:	
CYFARWYDDWR ARWEINIOL:	Keith Jones, Director of Secondary Care
LEAD DIRECTOR:	
SWYDDOG ADRODD:	Gina Beard, Lead Cancer Nurse
REPORTING OFFICER:	

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate) Er Gwybodaeth/For Information

# ADRODDIAD SCAA SBAR REPORT

## Sefyllfa / Situation

This report provides the Charitable Funds Committee (CFC) with an update regarding the resources purchased from charitable funds to support families with young children affected by cancer.

## Cefndir / Background

Hywel Dda University Health Board Charities are currently funding CaPS (Cancer Psychological Support), a pilot project offering psychological support both for people following a cancer diagnosis and the cancer workforce. Early in the application process, the exclusion criteria highlighted a gap in the support available to children where there is a close relative who has had a cancer diagnosis. Whereas this could not be incorporated into the CaPS project, it did highlight a need, and the Macmillan Cancer Information and Support Service Coordinators explored resources for use in the information hubs that could support families in having difficult conversations with children around cancer, cancer treatment, and when necessary death and dying.

# Asesiad / Assessment

The resources purchased are as follows:

<u>"Cancer Cloud Kits" https://fruitflycollective.com/cancer-cloud-kits/</u>

There are three different kits designed for three different age ranges.

Each kit contains an age-appropriate set of tools designed to help children or young people to understand what cancer is, the treatments given, and the side-effects they may cause.

There are also tools to help improve communication within the family, practical tools to help manage changes in the family's routine, and tools that explore the emotional impact a cancer diagnosis brings. Prices range between £30 - £45 per kit. The kits are ordered by the Health Board's Cancer Information and Support Team and are provided to each County team for use in the hub. They are given to families who access the service and where there is an expressed need. In terms of feedback, this has been difficult to capture as the interface with the information team is person-led and stand alone. The information team do not store or collect identifiable demographics for the people who access the service and while there has been a request that there is feedback from the families who have received the kits, to date no feedback has been received. This is understandable due to these families going through the most difficult

of times. However, the website does capture feedback of the resources where people who have ordered directly:

"The cancer cloud kit is a lovely resource and I think provides a very useful talking tool for families. The planner in particular is a practical and useful tool that I have suggested to many. I believe that there are many parents who would really value this box to enable them to begin that difficult conversation, it could be dipped into from time to time as feelings emerge." Counsellor

"My daughter loved the Cloud Kit – she fell upon it like it was a treasure box. It enables us to have the conversations we need to at each stage of my treatment." Parent of a seven year old

The Cancer Cloud Kits are also endorsed by the British Medical Association and the Tiger Cloud Kit won two BMA awards in 2016 for children's information and innovation.

To date, 11 kits have been provided to families across the Hywel Dda University Health Board.

<u>Nurse Ted Books http://www.nurseted.com/</u>

The "Nurse Ted" series of award winning picture books are designed to support children's understanding of what is happening to a family member who is affected by a brain tumour, cancer, or other serious illness.

These conditions can be scary and children may have lots of questions. In the "Nurse Ted" books there is lots of information and stories of children who are going through similarly difficult times.

There are three books in the series: A Children's Guide to Cancer, A Children's Guide to Terminal Illness, A Children's Guide to Brain Tumours.

The books are purchased by the Health Board Information Teams using charitable funds and provided free to families who access the information service where the need is expressed. The books are £7.99 each to purchase.

Feedback has been requested, however, none has been received to date on the usefulness of the books. User feedback via the website is as follows:

"I'm totally blown away by this very special and endearing book. It educates children on a difficult, complicated and scary subject matter in a completely non-threatening way. The book doesn't conceal any truth or attempt to shield children from the reality of the subject yet at the same time the facts are presented in a reassuring and encouraging way that is easy to understand. I would imagine that children going through this would feel hugely comforted by the story and also have many of their questions answered."

"I really like how the illustrations combine the fictional "Nurse Ted" and other characters with images of a real hospital. Allowing the reader to become familiar with the clinical features of a hospital and its machinery through the illustrations on each page will take away some of the uneasiness and trepidation children will have when setting foot in a hospital and offer much comfort, even if subconsciously."

Nurse Ted Books have been endorsed by the Brain Cancer Charity amongst other cancer related support charities. To date, the Health Board's Cancer Information service has only given out four of these books.

Argymhelliad / Recommendation

For The Charitable Funds Committee to note the update regarding the resources purchased from charitable funds to support families with young children affected by cancer.

Amcanion: (rhaid cwblhau)	
Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	11.1 Overseeing the day to day management of the investments of the charitable funds in accordance with the investment strategy set down from time to time by the Trustees, and in accordance with the requirements of the UHB's Standing Financial Instructions.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	A Risk Register is in place and managed by the Cancer Psychological Support Project Group
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	<ul><li>1.1 Health Promotion, Protection and Improvement</li><li>3.3 Quality Improvement, Research and Innovation</li><li>7.1 Workforce</li><li>3.2 Communicating Effectively</li></ul>
Amcanion Strategol y BIP: UHB Strategic Objectives:	<ul> <li>2. Living and working well.</li> <li>4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.</li> </ul>
Amcanion Llesiant BIP: UHB Well-being Objectives: <u>Hyperlink to HDdUHB Well-being</u> <u>Objectives Annual Report 2018-2019</u>	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth:	Not applicable
Evidence Base:	
Rhestr Termau:	Included within the body of the report
Glossary of Terms:	
Partïon / Pwyllgorau â ymgynhorwyd	Previous Charitable Funds Committees
ymlaen llaw y Pwyllgor Cronfa	
Elusennol:	
Parties / Committees consulted prior	
to Charitable Funds Committee:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Costings approved by Hywel Dda Health Charities

Ansawdd / Gofal Claf: Quality / Patient Care:	It is intended that patients and their families are psychologically supported during difficult times
Gweithlu:	
Workforce:	Not applicable
Risg: Risk:	Not applicable
Cyfreithiol: Legal:	Not applicable
Enw Da: Reputational:	Not applicable
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Not applicable



#### PWYLLGOR CRONFA ELUSENNOL CHARITABLE FUNDS COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	17 <sup>th</sup> March 2020
TEITL YR ADRODDIAD: TITLE OF REPORT:	IT Equipment for Patients with Learning Disabilities
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mandy Rayani Executive Director of Nursing, Midwifery & Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Carol Cotterell Assistant Director Operational Nursing & Quality Acute Services

# **Pwrpas yr Adroddiad** (dewiswch fel yn addas) **Purpose of the Report** (select as appropriate)

Ar Gyfer Penderfyniad/For Decision For Information

#### ADRODDIAD SCAA SBAR REPORT Sefyllfa / Situation

Since the initial application for charitable funds to support the purchase of IT Mobile Devices for use as a means of improving communication with people who have a learning disability and for other potential data collection processes and patient acuity measurement, there has been a protracted time lapse in the procurement process due to problem solving with issues relating to compatibility between the Communication Apps and the IT Devices and also the purchase of the IT Devices from the designated NHS suppliers.

At the end of January 2020, the IT Department issued one IPAD Device for each Acute Hospital Site to pilot a communication app for patients who have a learning disability or other communication difficulties over a three month period.

This report provides an overview on the challenges experienced and the current position on the use of mobile IT Devices in the ward areas.

# Cefndir / Background

The ultimate objective in seeking charitable funding for the purchase of mobile IT Devices for use in ward areas was to provide an aide to providing effective communication links for patients with Learning Disabilities for use in Wards and Departments spanning Acute and Community Hospitals and Mental Health Wards across the Health Board

These devices are deemed to be an essential commodity in order to modernise our systems to help capture feedback on patient experience of our services with an added benefit of being able to collate data relating to measurement of standards of care and the patient acuity /workload information required to inform calculation of nurse staffing levels

These items are not routinely purchased and their use is ultimately aimed at improving the patient experience:

- Enhance effective communication with diverse groups such as people with a Learning Disability and other patients with complex communication needs.
- Support timely capture of the views of patients and their carers on their experience of inpatient services which will inform service improvement initiatives.
- Provide essential audit data on standards of care being delivered in the clinical areas.
- Support continuous professional development through access to the Health Board elearning programme.
- Support the delivery of evidence based care through staff access to educational apps and e-Learning courses.

In addition it was envisaged that this use could support improvement in other ways too as our current methods of data capture in clinical areas are inefficient involving completing handwritten questionnaires and forms and then feeding the information into table top computers which are limited in their availability as they are in constant use. The IT tablets will be used in the clinical areas for several purposes:

- As an interactive communication aid by use of specialist pictorial apps for diverse minority patient groups such as people with a Learning Disability.
- As an educational aid for clinical staff via specialist apps eg short 3 minute app on Hypo/Hyper Glycaemia management is just one example.
- To record patient experience feedback at the end of an inpatient episode will inform service improvement initiatives.
- To collate data on patient acuity essential information used in part to calculate safe nurse staffing levels in line with the Wales Nurse Staffing Act (2017).
- To collate information to inform the fundamentals of care audit which again includes patient experience feedback.
- To collate monthly nursing metrics audits.
- To support data capture on monthly spot check quality assurance audits conducted in all ward areas.
- The purchase of the IT Tablets is supported by the Executive Director of Nursing, Quality and Patient Experience; Senior Nurse Management Team; General Managers – Acute Services.

Local approval has been received by the Triumvirate Teams and the Senior Nursing and Midwifery Team

# Asesiad / Assessment

Progress relating to the procurement of the hand held mobile IT Devices has been at a standstill for a lengthy period of time whilst the IT Department worked to overcome difficulties with sourcing compatible communication apps to devices that supported this function. This meant that the recommended original Microsoft Surface Pro Device was changed in favour of the Apple I-pad model. The purchase of the devices was subsequently affected by availability through the NHS supply chain.

Due to the initial difficulties experienced with the match of the Communication app to the IT Devices, the IT Department requested a three month pilot to ensure that the app worked from a user friendly perspective and was fit for purpose.

At the end of January 2020, each of the acute hospital sites was issued with a mobile IPAD Device. To date, two of the hospitals have had an opportunity to use the Communication apps with patients who have a learning disability. The other two areas have not as yet had patients who would benefit from their use.

Initial feedback gained from users and their carers on these touch screen communication apps is that they do require a level of understanding and an ability to use the device although carers and ward staff were supportive.

All areas acknowledge that they need more time to try them to their full potential.

#### Argymhelliad / Recommendation

The Charitable Funds Committee is requested to note the content of this position report, acknowledge the difficulties encountered with the compatibility of the Apps, procurement of the devices and the progress now being made in the trial period.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference Cyfeirnod Cylch Gorchwyl y Pwyllgor	12.6 - The Committee has established the Charitable Funds Operations Sub-Committee to ensure that the UHB's policies and procedures are followed in relation to specialist designated and restricted funds.
Cyfeirnod Cofrestr Risg Risk Register Reference:	Priority Improvement Initiatives – not on Risk Register
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	<ul> <li>Standard 2.1 - Managing Risk and Promoting Health and Safety</li> <li>Standard 3.1 - Safe and Clinically Effective Care</li> <li>Standard 3.3 - Quality Improvement Research and Innovation</li> <li>Standard 4.1 - Dignified Care</li> <li>Standard 5.1 - Timely Access</li> <li>Standard 7.1 - Workforce</li> </ul>
Amcanion Strategol y BIP: UHB Strategic Objectives:	<b>Strategic Objectives 9</b> To improve the productivity and quality of our services using the principles of prudent Health Care and the opportunities to innovate and work with partners
Amcanion Llesiant BIP: UHB Well-being Objectives: <u>Hyperlink to HDdUHB Well-being</u> <u>Statement</u>	Improve efficiency and quality of services through collaboration with people, communities and partners
Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015	Please explain how each of the '5 Ways of Working' will be demonstrated
<ul> <li>Pum dull o weithio:</li> <li>The Well-being of Future Generations (Wales) Act 2015</li> </ul>	<b>Long term –</b> Ensure patients are cared for in an appropriate setting. Decisions made will assist with sustaining and developing the services provided now and in the future.
- 5 Ways of Working:	<b>Prevention –</b> Continually improve governance systems and processes which seek to improve the clinical outcomes and experiences for patients, their families and staff.

<b>Integration –</b> Work together to directly enhance patient benefit and improve the quality of the service provided to patients.
<b>Collaboration –</b> Build strong relationships to continuously seek ways to enhance patient benefit and ensure charitable funds are robustly managed.
<b>Involvement –</b> Service leads and other colleagues are key to ensure issues and solutions are identified which will directly benefit patients, their families and Health Board staff

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Ledger reports and investment reports
Rhestr Termau: Glossary of Terms:	Included within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Cronfa Elusennol: Parties / Committees consulted prior to Charitable Funds Committee:	Charitable Funds Sub Committee

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Provide independent oversight and ensure correct controls and governance arrangements are in place to provide assurance that charitable funds within Hywel Dda are appropriately managed
Ansawdd / Gofal Claf: Quality / Patient Care:	Develop a proactive and standard approach to the expenditure of charitable funds to ensure that appropriate service needs and additional benefits to patient care is supported. Support charitable funds requests which provide increased benefits to patient services and demonstrate enhancement to the quality of patient care provided.
Gweithlu: Workforce:	Not applicable
Risg: Risk:	Reputational risk if charitable funds are not properly managed and governance controls are not followed.
Cyfreithiol: Legal:	Financial reporting is in line with charity law and guidance. Legal obligation to ensure that charitable funds are appropriately controlled.
Enw Da: Reputational:	Reputational risk if charitable funds are not properly managed and governance controls are not followed correctly.
Gyfrinachedd: Privacy:	Not applicable

Cydraddoldeb:	Ensure equity of access by ensuring decisions made
Equality:	benefit all patients and staff within Hywel Dda Health
	Board.



#### PWYLLGOR CRONFA ELUSENNOL CHARITABLE FUNDS COMMITTEE

DYDDIAD Y CYFARFOD:	17 <sup>th</sup> March 2020
DATE OF MEETING:	
TEITL YR ADRODDIAD:	Hywel Dda Health Charities Three-Year Plan 2020/2023
TITLE OF REPORT:	
CYFARWYDDWR ARWEINIOL:	Sarah Jennings, Director of Partnerships and Corporate
LEAD DIRECTOR:	Services
SWYDDOG ADRODD:	Sarah Jennings, Director of Partnerships and Corporate
REPORTING OFFICER:	Services

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate) Ar Gyfer Penderfyniad/For Decision

#### ADRODDIAD SCAA SBAR REPORT Sefyllfa / Situation

The purpose of this paper is to provide the Charitable Funds Committee with the Hywel Dda Health Charities three-year plan, from 1<sup>st</sup> April 2020 to 31<sup>st</sup> March 2023, for consideration and approval.

The paper also provides the Committee with the charity's proposed governance, support, administration and fundraising costs for consideration and approval for the 2020/21 financial year.

# Cefndir / Background

The Hywel Dda Health Charities three-year plan sets out the charity's key objectives from 1<sup>st</sup> April 2020 to 31<sup>st</sup> March 2023 and has been developed in response to priorities identified during a workshop held in December 2019 with Committee members on the future direction of the charity. The plan also discusses the resources required to achieve the charity's three-year objectives.

The Charitable Funds Committee is responsible for approving all charitable expenditure above £50,000 in accordance with the Committee's terms of reference and agreed scheme of financial delegation. To ensure that the Committee is clear on its financial commitments on an annual basis, each year the Committee is presented with a paper detailing estimated governance, support, administration and fundraising costs for consideration and approval in advance of these costs being incurred.

#### Asesiad / Assessment

The Charitable Funds Committee has made a notable investment in the fundraising function of the charity in recent years to support key areas of work and make a positive difference to local NHS services across Carmarthenshire, Ceredigion, Pembrokeshire. This investment has provided much needed resources on both a strategic and operational level to the charity and the impact of this investment can be demonstrated in the charity's improved performance. Firm foundations have been laid to move the charity forward and realise its potential to generate additional income for the benefit of our patients, service users and staff. Increased investment in the charity's support functions are required over the next three-years in order to build on this growth and move the charity even further forward to achieve the objectives discussed in the charity's three-year plan:

- 1. Income: Increase our income levels by 10% on an annual basis from April 2020 to March 2023.
- 2. Expenditure: Increase our charitable expenditure by 15% on an annual basis from April 2020 to March 2023.
- 3. Communications: Increase our charity's profile and raise awareness of the positive difference we make.

The objectives within our three-year plan provide a clear direction for the charity. They are ambitious but achievable and with the right resources in place, will allow us to increase our income and charitable expenditure to make a positive difference to the health, wellbeing and experience of patients, service users and staff across Hywel Dda University Health Board.

#### Argymhelliad / Recommendation

The Committee is asked to **consider and approve** the Hywel Dda Health Charities three-year plan from 1<sup>st</sup> April 2020 to 31<sup>st</sup> March 2023.

The Committee is asked to **consider and approve** a budget of £90,993 for the finance support function for the 2020/21 financial year.

The Committee is asked to **consider** the merits of an increased investment in the fundraising function of the charity and **approve** a budget of £327,413 for the fundraising function for the 2020/21 financial year.

The Committee is also asked to **consider and approve** the establishment of a staff lottery scheme to raise funds to invest in staff health and wellbeing initiatives.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Risk Register Reference:	Not applicable for this paper.
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	9. To improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.

Amcanion Llesiant BIP: UHB Well-being Objectives: <u>Hyperlink to HDdUHB Well-being</u> <u>Statement</u>	Not applicable for this paper.
Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015 - Pum dull o weithio: The Well-being of Future Generations (Wales) Act 2015 - 5 Ways of Working:	Please explain how each of the '5 Ways of Working' will be demonstratedLong term - the importance of balancing short-term needs with the need to safeguard the ability to also meet long-term needs.Not applicable for this paper.Prevention – the importance of preventing problems
	occurring or getting worse. Not applicable for this paper.
	Integration - the need to identify how the Health Board's well-being objectives may impact upon each of the well-being goals, on its other objectives, or on the objectives of other public bodies.
	Not applicable for this paper.
	Collaboration – acting in collaboration with anyone else (or different parts of the organisation itself) which could help the Health Board to meet its well-being objectives.
	Not applicable for this paper.
	Involvement - the importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the Health Board serves
	Not applicable for this paper.

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth:	Ledger reports and investment reports
Evidence Base:	
Rhestr Termau:	Included within the body of the report
Glossary of Terms:	
Partïon / Pwyllgorau â ymgynhorwyd	Executive Director of Finance
ymlaen llaw y Pwyllgor Cronfa	Director of Partnerships and Corporate Services
Elusennol:	Investment Advisors
Parties / Committees consulted prior	Fundraising Team
to Charitable Funds Committee:	_

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian:	Income generated from fundraising activities is a key
Financial / Service:	source of income for Hywel Dda Health Charities. The

	charity is therefore duty bound to ensure that the correct controls and governance arrangements exist with regards to all aspects of fundraising.
Ansawdd / Gofal Claf: Quality / Patient Care:	Charity objects are in support of NHS services locally.
Gweithlu: Workforce:	The charity has no employees but may access staff time via the University Health Board.
Risg: Risk:	Reputational risk if associated with unethical fundraising.
Cyfreithiol: Legal:	The charity's financial reporting is in line with charity law and guidance.
Reputational:	Reputational risk if associated with unethical fundraising.
Privacy	No impact
Cydraddoldeb: Equality:	No EqIA is considered necessary for a paper of this type.



# **Hywel Dda Health Charities**

# Three-year plan

# 2020 - 2023

# #makingadifference



Bwrdd Iechyd Prifysgol Hywel Dda University Health Board



# Contents

1. Introduction	3
2. Hywel Dda Health Charities – our charity	4
3. Our current position	6
4. Our future direction	8
5. Staff lottery proposal	12
6. Resources	21





# 1. Introduction

Hywel Dda Health Charities is the official charity of Hywel Dda University Health Board.

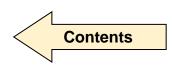
The purpose of this document is to set out the charity's key objectives from April 2020 to March 2023 to raise and distribute increased levels of funds to enhance our local NHS services.

The document has been developed in response to priorities identified during a workshop held in December 2019 with Charitable Funds Committee members on the future direction of the charity.

Our three-year plan prioritises the following objectives:

- 1. Income: Increase our income levels by 10% on an annual basis from April 2020 to March 2023.
- 2. Expenditure: Increase our charitable expenditure by 15% on an annual basis from April 2020 to March 2023.
- 3. Communications: Increase our charity's profile and raise awareness of the positive difference we make.

Many internal and external opportunities and challenges will shape and influence our performance over the next three years. We will therefore keep our plan under review as local healthcare services change and evolve to ensure that we are able achieve our objectives to make a positive difference to the health, wellbeing and experience of patients, service users and staff across Hywel Dda University Health Board.





# 2. Hywel Dda Health Charities – our charity

Our **vision** is to make a positive difference to the health, wellbeing and experience of patients, service users and staff across Hywel Dda University Health Board.

Our **purpose** is to raise and distribute funds to enhance our local NHS services through:

- Offering additional patient comforts to make time spent in hospital more comfortable;
- Providing the most up-to-date medical equipment for diagnosis and treatment;
- Creating more welcoming surroundings for patients, their families and staff;
- Supporting staff learning and development and wellbeing initiatives;
- Enhancing care in our local communities;
- Funding research projects to improve our understanding of new and emerging treatments;
- Delivering healthy living and health promotion initiatives.

As a charity, we strive to actively demonstrate and apply the **core values** of Hywel Dda University Health Board in all aspects of our charity's operations and fundraising activities:

- Putting people at the heart of everything we do: improved patient and staff experiences are at the forefront of our work at all times.
- Working together to be the best we can be: we support Hywel Dda University Health Board to continually improve and enhance its services.
- Striving to deliver and develop excellent services: the allocation of our funds focuses on patients, service users and staff to deliver the very best healthcare we can.



Introduction	Our charity	Our current position	Our future direction	Staff lottery proposal	Resources

Our **measures of success** from 2020 to 2023 will focus on our:

- Increased income levels on an annual basis.
- Increased charitable expenditure on an annual basis.
- Increased profile which will enable us to raise and distribute increased levels of funds to enhance our local NHS services.







# 3. Our current position

The investment made in a paid fundraising function for the charity in recent years has allowed the charity to grow and increase its income levels:

# 3.1 Our income

£ Income	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20*	*to 31.01
Donations	485,048	557,571	510,243	654,677	777,566	765,959	747,117	
Legacies	161,311	272,857	226,332	523,113	444,162	779,564	908,228	
Investment income	215,948	200,103	211,928	233,533	254,843	316,935	-	
Grants	10,000	-	-	16,036	8,855	17,879	-	
Total £	872,307	1,030,531	947,873	1,427,379	1,485,426	1,880,335	1,655,688	

It is important to note that Hywel Dda Health Charities is not the only charity supporting the work of the UHB. There are over 30 external charities and community groups established with the sole aim of supporting our healthcare services across the region and collaboratively these groups donated over £500,000 to the UHB in 2018/19 which is not captured in the income levels above.

# 3.2 Our expenditure

The principal way Hywel Dda Health Charities supports Hywel Dda University Health Board is by providing financial support through grant making.

Hywel Dda Health Charities makes a significant contribution to local NHS services by supporting a wide range of expenditure ranging from items to make a patient's stay in hospital more comfortable to new medical equipment, improved facilities, specialist projects and learning and development opportunities for staff.



.20

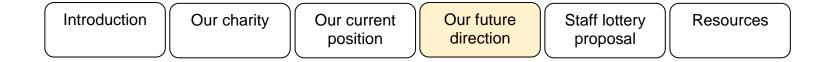
 Introduction
 Our charity
 Our current position
 Our future direction
 Staff lottery proposal
 Resources

However in recent years our levels of charitable expenditure have not increased in line with our income growth and it is important that the charity is able to further its charitable objectives and the wishes of its supporters by investing in services and activities above and beyond what the NHS can provide.

£ Expenditure	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20*
Support costs	98,554	96,158	81,506	75,828	89,777	74,815
Medical and surgical equipment	421,283	560,975	298,091	375,829	483,371	345,288
Office and computer equipment	71,555	73,839	75,801	104,944	152,337	92,320
Building and refurbishment	111,353	55,066	371,237	179,634	36,820	25,964
Staff education/ welfare	10,503	7,521	7,259	49,754	215,282	58,221
Patient education welfare	53,152	23,124	26,078	35,048	167,000	75,683
Miscellaneous	71,313	73,066	76,940	73,944	175,455	2,163
Total £	837,713	889,749	936,912	894,981	1,320,042	674,454







# 4. Our future direction

This section is intended to provide an overview of the proposed direction of travel for the charity over the next three years. Detailed action plans for each objective will be developed during the first quarter of 2020/21 to provide the blueprint for achieving our objectives. These action plans will set targets to be achieved which will be monitored and reported to the Charitable Funds Committee on a quarterly basis.

Our three-year objectives:

- 1. Income: Increase our income levels by 10% on an annual basis from April 2020 to March 2023.
- 2. Expenditure: Increase our charitable expenditure by 15% on an annual basis from April 2020 to March 2023.
- 3. Communications: Increase our charity's profile and raise awareness of the positive difference we make.

These objectives provide a clear direction for the charity. They are ambitious but achievable and with the right resources in place, will allow Hywel Dda Health Charities to build upon firm foundations to increase our income and charitable expenditure as well as make a positive difference to the health, wellbeing and experience of patients, service users and staff across Hywel Dda University Health Board.



Our charity O

Introduction

# 4.1 Objective: Increase our income levels by 10% on an annual basis from April 2020 to March 2023.

Our main focus will be on increasing our income from both new and existing opportunities and income streams. We will assess the value of investing in each source of income to focus on those with the biggest returns which will help us to deploy our resources effectively.

	How will we do it?
1.	Develop and launch a fundraising campaign to generate unrestricted general funds for the charity.
2.	Launch a capital fundraising appeal to raise funds for a new Chemotherapy Day Unit at Bronglais Hospital.
3.	Develop a range of local fundraising campaigns for specific purposes that will engage with staff and motivate others to support.
4.	Develop and launch the proposed staff lottery scheme to generate unrestricted funds to support staff health and wellbeing.
5.	Make it as easy as possible for people to donate by trialling new methods of giving including new digital platforms.
6.	Motivate others to plan and manage their own fundraising activities for the charity and provide a comprehensive support
	package for our fundraisers.
7.	Develop annual challenge events programmes to encourage others to take part in third party events in aid of the charity.
8.	Develop annual charity led events programmes, which delivers a good return on investment, to generate additional funds for the charity.
9.	Develop productive corporate partnerships offering both financial and non-financial support, managing all relationships to a high standard, growing our reputation as a desirable charity to work with.
10.	Maintain strong and effective relationships with external fundraising organisations constituted to support the work of the UHB to
	maximise their effectiveness and ensure both parties are working towards common goals.
11.	Develop a sensitive and tactful approach to proactively promote legacies and in-memoriam giving.
12.	Capture Gift Aid consent on all eligible donations to maximise income from the Gift Aid scheme.
13.	Maximise opportunities from grant giving trusts and foundations for eligible projects across the UHB.
14.	Integrate the Harlequin fundraising database into existing financial systems to record details of all supporters and charitable income across the whole of the UHB.
15.	Encourage regular and committed giving using the valuable supporter data gained from the fundraising database.
16.	Manage investments effectively to ensure the greatest return on our investments.



Our charity

Introduction

# 4.2 Objective: Increase our charitable expenditure by 15% on an annual basis from April 2020 to March 2023

Our main focus will be on ensuring that our grant-making procedures are user friendly, whilst maintaining good governance, so that staff are empowered to access our funds and be innovative and proactive in their approaches to making a difference.

	How will we do it?
1.	Review and refine the principles and criteria that govern the charity's grant making across all fund types to ensure that they are
	in furtherance of our charitable objectives and the wishes of our supporters.
2.	Review and refine the charity's grant-making procedures to ensure that decision-making is clear, timely and well-documented
	and record the charitable needs being addressed.
3.	Review and refine the charity's expenditure thresholds, scheme of delegation and the function of the Charitable Funds Sub-
	Committee to ensure that funds can be accessed in a timely manner for appropriate purposes in furtherance of our charitable objectives.
4.	Produce clear and user-friendly guidance to ensure that staff understand how to apply for a grant, our eligibility criteria and the decision-making processes.
5.	Establish improved systems to monitor grant expenditure and evaluate the effectiveness and impact of the grants awarded.
6.	Integrate the planning of proactive charitable funds expenditure into the remit of the UHB's Finance Business Partners to
	support their client departments to deploy charitable funding effectively in areas where it can make the biggest difference.
7.	Establish systems with the UHB's Finance Business Partners to ensure that fundraising priorities within client departments are
	captured on an annual basis to ensure that these can be met by proactive fundraising.
8.	Provide improved guidance to our fund managers to ensure that they understand their roles and responsibilities as custodians
	of our charitable funds.
9.	Work closely with clinical and operational colleagues to inspire them to be creative and innovative with our charitable funds and
	to help them identify and develop initiatives that make a positive difference.
10.	Fund projects via our proposed staff lottery scheme to support staff health and wellbeing.
11.	Ensure the charity's designated and restricted funds are being used to maximum effect within the charity.
12.	Ensure that the charity is futureproofed and can evolve in line with the UHB's health and care strategy A Healthier Mid and
	West Wales: Our future generations living well to ensure we can enhance our local NHS services whilst meeting the wishes of
	our supporters.



Our charity

Introduction

# 4.3 Objective: Increase the charity's profile and raise awareness of the positive difference we make.

Our main focus will be on maximising opportunities to extend our reach and become more visible internally and externally so that more people across our region are aware of the charity's existence, its purpose and the importance of their support. Effective marketing and communications will be critical to ensuring the charity is able to increase its income and expenditure levels to raise and distribute funds to enhance our local NHS services

	How will we do it?
1.	Relaunch the charity and our new graphic identity to establish a positive and engaging brand for the charity.
2.	Establish our position as the official charity of the UHB to maximise opportunities as a result of the high regard our local
	communities have for the NHS.
3.	Raise and maintain internal awareness of the charity and our purpose so that staff understand how we operate and can relate
	to, and feel a part of the charity.
4.	Use a range of communications methods to keep staff up-to-date with charity news and developments.
5.	Recruit charity 'ambassadors' from within the UHB to help cascade key charity information to colleagues within their services
	and to relay information from staff and fundraisers back to the charity.
6.	Increase and maintain the visibility of the charity across all UHB sites to ensure that we are the charity with the most prominent
	presence.
7.	Further develop the charity's online and digital presence to engage with existing and new supporters.
8.	Maintain regular contact with our donors to promote the impact of their support and opportunities to get involved in our work.
9.	Produce and issue regular positive news stories on the personal stories behind our fundraisers to motivate others to support
10.	Produce and issue regular positive news stories on the impact or our charitable expenditure and the difference it makes to our
	patients, service users and staff.
11.	Provide comprehensive marketing and communications support for all fundraising activities including appeals, campaigns and
	events.
12.	Recruit volunteer ambassadors to help raise our profile from within their own local communities in a variety of ways.







# 5. Staff lottery proposal

A priority within our three-year plan is to develop and launch a staff lottery scheme to generate unrestricted funds to support staff health and wellbeing.

A Hywel Dda Health Charities staff lottery scheme would provide the opportunity to raise unrestricted funds to invest in staff health and wellbeing initiatives via our charitable funds. Currently there is no designated charitable fund to support expenditure of this nature or health board wide charitable fund with this purpose.

Evidence suggests that the introduction of a staff lottery can be overwhelmingly positive for an organisation, not only because of increased income levels but also due to the sense of unity that the scheme creates as well as helping to raise the profile of the charity.

724 staff members took part in a recent staff poll via the UHB's intranet page which found that 72% of respondents would be interested in playing the staff lottery. The poll was held over a one-month duration in February 2020.

# 5.1 Key stakeholders

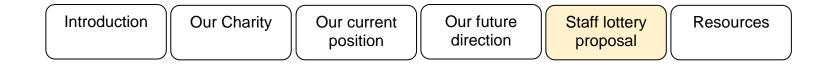
Whilst developing this proposal we engaged with a number of key stakeholders to determine support and understand any potential resistance to a staff lottery scheme:

Both the **Director of Public Health and Director of Workforce & Organisational Development** are supportive of the introduction of a staff lottery with the aim of supporting our workforce. The Executive Directors suggested that a cap is placed on the number of weekly plays staff members are allowed and that responsible gambling messaging are used in marketing and promotion.

The **Staff Benefits Team** is supportive of the introduction of a staff lottery. The UHB currently offers the Pembrokeshire Lottery scheme as a staff benefit. The Hywel Dda staff lottery scheme would also be promoted as a staff benefit and the team would facilitate this through their established communication channels.







We have contacted **union representatives** across all three counties and have taken their feedback for consideration in developing our proposal for the scheme. We will be presenting our proposals for the staff lottery scheme to a meeting of the **Staff Partnership Forum** on Monday 6<sup>th</sup> April 2020.

The UHB's **Finance & Payroll** teams are supportive of the establishment of a scheme and are able to provide the administration systems and support required for the smooth running of the lottery at no cost to the scheme. Both teams commented that it would be much easier to introduce and support the scheme if it was managed internally rather than being outsourced to an external agency.

**Occupational Health** colleagues are also fully supportive of the introduction of a staff lottery scheme and were excited with the prospect of staff being able to benefit from the lottery income as there is no dedicated staff health and wellbeing fund at the moment. The team would also be interested in joining the lottery Bids Panel.

## 5.2 Governance issues

#### 5.2.1 Licensing

Hywel Dda Health Charities already has the necessary small society lotteries license required to carry out a lottery with an income of less than £250,000 per annum. Details of each lottery draw would be reported back to the Local Authority under the terms of our lottery licence within three months of each draw.

# 5.2.2 Information governance

The UHB's Information Governance Manager has advised that a Data Protection Information Assessment would be required prior to the launch of a scheme as the scheme would be using and processing staff data for promotion and publicising winnings.

# 5.2.3 Responsible gambling

It is recommended that one person should be allowed a maximum of four 'plays' (numbers) per week. N.B. One 'play' is £1, so all staff will be permitted to have a maximum of four lottery numbers, totalling £4 per week.







## 5.2.4 Financial procedures

A new financial procedure will be developed to document the rules, regulations, systems and processes involved in the running of the staff lottery. The lottery would form part of the charity's internal audit.

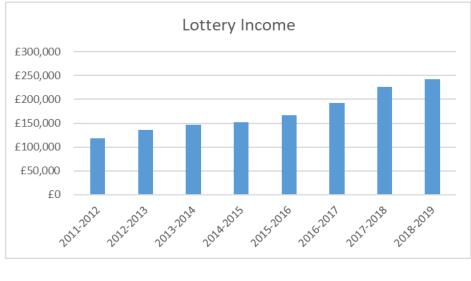
# 5.3 Case study - Cardiff and Vale UHB

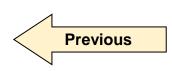
An example of the benefits of having a staff lottery scheme can be seen in Cardiff and Vale UHB which is run by the UHB's official charity.

The lottery was introduced in September 2005 to raise funds for the benefit of both staff and patients. Approximately 20% (3,500) of the UHB's of workforce play the staff lottery and there are currently 4,720 plays (numbers) allocated each week.

The staff lottery gives staff the chance to win £1,000 from weekly draws. In addition, two Super Draws are run each year which offer a brand new car in the summer and a grand prize of £10,000 in January.

The UHB's income from the staff lottery since its launch in 2005 is £2,171,198, which equates to an average income of £155,085 per annum. Every penny in profit, following the deduction of running costs and prize money, is distributed in the form of grants to benefit the UHB.







The UHB attributes the success of its lottery to having a dedicated internal team to oversee the scheme and associated support functions to promote and administer the lottery.

# 5.4 Our proposal

Our proposal is to establish an in-house staff lottery scheme which would be managed by the Hywel Dda Health Charities team with the support of Finance and Payroll colleagues.

The charity's Harlequin fundraising database is used successfully by many NHS charities to run their own internal staff lottery schemes and the software is designed as a fundraising tool that can be used to co-ordinate lottery draws, record participants, and manage lottery prizes and grants.

There are a number of external agencies that could be contracted to oversee all aspects of a staff lottery scheme but the costs associated with working with a third party exceed our projected internal costs.







#### 5.5 Affordability

#### 5.5.1 Anticipated income

Based on a staff population of 10,000 we would expect to see the following staff participation in the first four years of the lottery scheme. Please note that each year related to a full 12-month period from the lottery launch date.

Year 1: 12% staff participation Year 2: 15% staff participation Year 3: 18% staff participation Year 4: 20% staff participation

The anticipated staff participation would generate the following income levels:

Income year 1 (2021/22): £62,352 1,200 plays x £4.33 per month x 12 months

<u>Income year 2 (2022/23):</u> £77,940 1,500 plays x £4.33 per month x 12 months

<u>Income year 3 (2023/24):</u> £93,528 1,800 plays x £4.33 per month x 12 months

<u>Income year 4 (2024/25)</u> £103,920 2,000 plays x £4.33 per month x 12 months

Total income years 1 to 4: £337,740







# 5.5.2 Running costs

We recommend that a part-time band 4 Fundraising Support Officer role is created to support the smooth running of the scheme. This role would work alongside the current fundraising team and be responsible for the administration of the scheme and work alongside fundraising colleagues to promote the scheme and recruit staff members to sign-up.

The costs associated with establishing and running the scheme are as follows:

Expenditure year 1				
Item	Cost			
Fundraising Support Officer (Band 4 0.6 FTE)	£17,818			
Office Equipment	£750			
Travel	£2,400			
Database module (one-off cost)	£2,700			
Promotional Materials	£2,500			
Total	£26,168			

Expenditure years 2 – 4				
Item	Cost			
Fundraising Support Officer (Band 4 0.6 FTE)	£56,728			
Travel	£7,200			
Promotional Materials	£4,500			
Total	£68,428			

Total running costs years 1 to 4: £94,596







# 5.5.3 Prize giving

Based on our anticipated income levels, we recommend the following levels of prize giving.

Please note that these levels would be reviewed on an annual basis, to be re-considered should the income from the lottery exceed or not meet projections.

Prize giving year 1			
£500 weekly prize draws x 52	£26,000		
£1,000 introductory prize	£1,000		
£1,000 Christmas prize	£1,000		
Total prize giving	£28,000		

Prize giving years 2 - 4			
£500 weekly prize draws x 52	£26,000		
£2,000 Summer prize	£2,000		
£2,000 Christmas prize	£2,000		
Total annual prize giving	£30,000		

Total prize giving years 1 to 4: £118,000







# 5.5.5 Grant making

Based on our anticipated income and expenditure levels, please see below the estimated profits during the first four years of the staff lottery scheme available for grant making:

Grant making year 1					
Running Costs	£26,168				
Prize Money	£28,000				
Total Costs	£54,168				
Income	£62,352				
Total grants available	£8,184				
Grant making year 2					
Running Costs	£22,253				
Prize Money	£30,000				
Total Costs	£52,253				
Income	£77,940				
Total grants available	£25,687				
Grant making year 3					
Running Costs	£22,804				
Prize Money	£30,000				
Total Costs	£52,804				
Income	£93,528				
Total grants available	£40,724				
Grant making year 4					
Running Costs	£23,371				
Prize Money	£30,000				
Total Costs	£53,371				
Income	£103,920				
Total grants available	£50,549				
Total grant making years 1 to 4:	£125,144				







#### 5.5.5 Grant making (continued)

As part of the process of developing a staff lottery scheme a bids panel would be created to consider and approve applications for funding from the profits of the staff lottery. This would ensure that 100% of profits raised from the lottery are expended on staff related matters, recognising that this spend must also meet the public benefit test and our charitable objectives.

Consideration will be given to the format of soliciting and processing bids from the staff lottery as the scheme develops and the level of funding available is confirmed.

# 5.6 Recommendation

Based on the assumptions above it is recommended that a staff lottery scheme is established as an opportunity to raise funds to invest in staff health and wellbeing initiatives. It is anticipated that the staff lottery scheme will be launched over the summer months with the first draw taking place in September 2020.



# 6. Resources

To ensure that the Charitable Funds Committee is clear on its financial commitments on an annual basis, each year the Committee is presented with a paper detailing estimated governance, support, administration and fundraising expenditure for consideration and approval in advance of these costs being incurred.

This section provides estimated costs for the 2020/21 financial year which the Committee is asked to consider and approve as follows:

# 6.1 Finance function

The financial governance function for our charitable funds is provided by the University Health Board's finance team which provides the systems, processes and controls to ensure a sound framework for safeguarding the charity's financial assets.

A charge for this function is passed to the charity on an annual basis. The charge for the 2019/20 financial year was £88,732, as outlined in the Integrated Performance Report (agenda item 3.2).

The Committee is asked to consider and approve the 2020/21 financial year budget of £90,993 for the finance support function.

This budget includes a 3% increase from the 2019/20 financial year to reflect inflationary increases and is required to ensure that there is sufficient resources to support our operational teams on all charitable funds matters.





Introduction Our Charity	Our current position	Our future direction	Staff lottery proposal	Resources
--------------------------	----------------------	----------------------	------------------------	-----------

The finance function budget can be broken down as follows:

# **PROJECTED 2020/21 GOVERNANCE & SUPPORT COSTS**

Name Finance function	Days per Month	Total Budget £	Governance £	Support £
Charitable Funds Officer (Queries and fund analys	is) All	31,568	0	31,568
Creditors	6	9,883	0	9,883
Procurement	5	8,236	0	8,236
Charitable Funds Accountant (General supervision queries, annual accounts, trustee committee)	, 6	14,350	14,350	0
Finance Supervisory Support (Reconciliation/ledge control/gains/income)	r 8	15,147	7,574	7,574
General Offices	2	2,866	0	2,866
Finance Senior Lead	2	7,942	7,942	0
Overheads (HFMA / Training / Other)	n/a	1,000	1,000	0
тс	TAL	90,993	30,866	60,127





Introduction	Our Charity	Our current position	Our future direction	Staff lottery proposal	Resources
)					

The finance support function budget includes support from:

- Assistant Director of Finance to lead the charitable funds agenda from a finance perspective. Also a key attendee of the Charitable Funds Committee.
- Senior Business Partner (Accounting & Statutory Reporting) who will work closely with the Executive Lead for Charitable Funds and Assistant Director of Hywel Dda Health Charities to develop the charitable funds expenditure strategy and to oversee day-to-day operations. Also a key member of the Charitable Funds Sub-Committee.
- Finance Business Partner (Accounting & Statutory Reporting) to lead on the charitable funds accounts closure and preparation of the annual report.
- Assistant Finance Business Partner (Financial Accountant) to provide support for the financial reporting requirements such as committee reports and financial data analysis.
- Senior Accounts Assistant to support the Accounts Assistant with recording of online donations.
- Accounts Assistant to remain a full-time finance support for charitable funds.

# 6.2 Fundraising function

The fundraising function for the charity is provided by the Hywel Dda Health Charities team that is responsible for generating income to support the UHB to enhance our local NHS services as well as raising the profile of the charity.

A charge for this function is passed to the charity on an annual basis. The fundraising budget for the 2019/20 financial year was £216,788 (£189,223 pay costs and £27,565 non-pay costs) as outlined in the Integrated Performance Report (agenda item 3.2).

For the 2020/21 financial year, the Committee is asked to **consider the merits of an increased investment in the fundraising function of the charity** which is aimed at further developing and raising additional income to support the charity to achieve the objectives within our three-year plan.

The Committee is asked to **consider and approve the 2020/21 financial year budget** of £327,413 (£281,423 pay costs and £45,990 non-pay costs) for the fundraising **function** (see page 25 for detailed breakdown).





Introduction	Our Charity	Our current position	Our future direction	Staff lottery proposal	Resources

The requested budget is an increase of 48% in pay costs on the 2019/20 approved costs and contains an increase in staffing levels from 5.2 full-time equivalent staff to 7.6 full-time equivalent staff.

It is acknowledged that this is a significant increase in fundraising costs however the increase in capacity will allow for the team to have a much stronger and more visible presence in areas that need further development. Most importantly, the team will be able to test new models and methods of fundraising more effectively and will be able to better support staff and supporters who will in turn be able to support our charity more effectively.

An increased investment in the charity's fundraising function will also allow a more strategically managed and professional approach to increasing our charity's incoming resources as well as also having a significant impact on the charity's performance resulting in an increase in our incoming resources.

Benchmarking data from the Association of NHS Charities has evidenced that Hywel Dda Health Charities has spent less than the UK benchmark on fundraising costs in comparison to income generated over recent years. The table below shows our current status compared to the UK NHS charity benchmark of 17%. With greater investment in fundraising costs in future years, our fundraising costs will remain below the national UK NHS charity average with the predicted income growth figures.

	2015/16	2016/17	2017/18	2018/19	2019/20*	2020/21	2021/22	2022/23
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Donations	510	655	778	766	897	987	1,085	1,194
Legacies	226	523	444	780	908	999	1,099	1,209
Fundraising income	737	1,178	1,222	1,546	1,805	1,986	2,184	2,403
Net increase / (decrease) in income	-94	441	44	324	260	181	199	218
Fundraising costs	79	140	148	177	195	327	337	347
Return on Investmen	t (ROI) for	Fundrais	ing :					
ROI on investment for fundraising (fundraising costs vs income)	11%	12%	12%	11%	11%	16%	15%	14%
UK Benchmark **	25%	17%	17%	17%	17%	17%	17%	17%
Pence in every £ that goes to fundraising costs	11p	12p	12p	11p	11p	16p	15p	14p
* forecast to 31/3/20 ** estimated benchmark 2018-23								

Continue



Introduction	Our Charity	Our current position	Our future direction	Staff lottery proposal	Resources

The fundraising function budget can be broken down as follows:

# HYWEL DDA CHARITABLE FUNDS PROJECTED 2020/21 FUNDRAISING COSTS

Name Fundraising and support team pay		Days per Month	£	Governance £	Support £
Assistant Director Hywel Dda Health Charities		1 fte	66,989	0	66,989
Fundraising Manager		1 fte	48,690	0	48,690
Community & Events Fundraising Officers x 3		3 fte	105,815	0	105,815
Marketing and Communications Officer		1 fte	33,951	0	33,951
Fundraising Support Officer less 0.6 wte lottery funded		1 fte	29,696 -17,817	0	29,696 -17,817
Administration Officer		0.6 fte	14,099	0	14,099
	TOTAL	7.6 fte	281,423	0	281,423



#### Fundraising and support team non-pay

33000-Printing Costs		n/a	10,500	0	10,500
33010-Stationery		n/a	250	0	250
33020-Books, Journals & Subscriptions		n/a	3,000	0	3,000
33050-Design Costs		n/a	7,500	0	7,500
33610-Travel & Subsistence		n/a	8,400	0	8,400
34200-Training Expenses		n/a	500	0	500
34220-Conference & Seminars		n/a	1,000	0	1,000
35550-Computer Software/License Fees		n/a	3,840	0	3,840
Fundraising Events (new subjective code)		n/a	8,500	0	8,500
Fundraising Costs (new subjective code)		n/a	1,500	0	1,500
37470-Miscellaneous Expenditure		n/a	1,000	0	1,000
	TOTAL	n/a	45,990	0	45,990
GRANI	D TOTAL		327,413	0	327,413

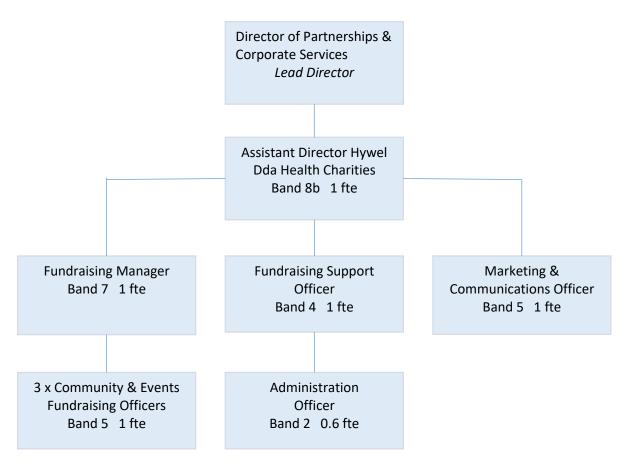




Introduction	Our Charity	Our current position	Our future direction	Staff lottery proposal	Resources
. )					

#### 6.2.1 Our proposed structure from April 2020

From the 2020/21 financial year the following staffing structure is proposed:







Introduction	Our Charity	Our current position	Our future direction	Staff lottery proposal	Resources
)					

#### **6.2.2 Assistant Director Hywel Dda Health Charities**

The Head of Hywel Dda Health Charities role was introduced in April 2016 in order to establish a senior position within the charity with overall responsibility for implementing the charity's annual work plans and leading the charity to a more stable and successful future.

The remit and requirements of this role have far exceeded the original expectations of what was required to grow and develop the charity. Following discussions with workforce colleagues in relation to the duties this role is performing, it is proposed that this role is re-banded from a grade 8a to a grade 8b and a corresponding title change to Assistant Director of Hywel Dda Health Charities.

The wider role of overseeing the breadth of the charity's work (strategic, operational, ambassadorial) as well as the commitment of the Charitable Funds Committee to grow the charity in terms of both income and expenditure signal the time for this role to now be equalised to other comparable roles across the UHB.

This post will replace the existing band 8a Head of Hywel Dda Health Charities position and is aligned with similar positions within the Partnerships & Corporate Services directorate as well as other directorates across the UHB.

The small increase in cost associated with this change would ensure that the leadership of the charity is more prominent and recognised as vital to the investment into our operational services and improving patient and staff experience. It would spearhead the range of additional fundraising roles that would lead to a step change in the capacity to generate significantly greater income as well as supporting the organisation to use its funds and spend more to have greater impact.

# 6.2.3 Fundraising Manager

It is proposed that this new role is introduced to manage the day-to-day fundraising activities of the charity with the aim of maximising charitable income. The role will manage and develop the fundraising team in order to deliver a broad and balanced portfolio of fundraising activities and ensure effective delivery of key objectives.

The introduction of the Fundraising Manager role will provide additional capacity to the Assistant Director Hywel Dda Health Charities and allow this role to operate more strategically.





Introduction	Our Charity	Our current position	Our future direction	Staff lottery proposal	Resources

The Fundraising Manager role will require an experienced, highly qualified and competent professional with broad fundraising experience.

This role will replace the band 6 Senior Fundraising Officer role which was introduced for a 12-month fixed term period during 2019/20 which has demonstrated the need for a senior fundraising lead within the fundraising team.

# 6.2.4 Community & Events Fundraising Officers

It is proposed that our three existing Community & Events Fundraising Officer roles are increased from 0.6 full-time equivalent to three full-time posts. This will allow us to have a full-time Fundraising Officer in each of our counties offering us consistency and additional capacity to implement our fundraising plans.

The Senior Fundraising Officer role temporarily introduced during 2019/20 also assumed the duties of one of our county Community & Events Fundraising Officers but this has proved unsustainable and demonstrated the need for a senior fundraising lead as well as dedicated Community & Events Fundraising Officers in each of our counties.

# 6.2.5 Fundraising Support Officer

It is proposed that this new role is introduced to support the smooth running of the staff lottery scheme. This role would be responsible for the administration of the staff lottery scheme and would work alongside fundraising colleagues to promote the scheme and recruit staff members to sign-up. A percentage of costs associated with this role would be recharged to the lottery scheme.

This role would also support the Community & Events Fundraising Officers and Marketing & Communications Officer with a wide range of fundraising and communications duties.

# 6.2.6 Administration Officer

This existing role is a shared role with the Communications Team and it is proposed that our contribution to the role will reduce by 0.2 full-time equivalent to support the increased administration support requirements of the Communications Team.

6.2.7 Marketing & Communications Officer - no change





#### PWYLLGOR CRONFA ELUSENNOL CHARITABLE FUNDS COMMITTEE

DYDDIAD Y CYFARFOD:	17 March 2020
DATE OF MEETING:	
TEITL YR ADRODDIAD:	Charitable Funds Investment Property
TITLE OF REPORT:	
CYFARWYDDWR ARWEINIOL:	Sarah Jennings, Director of Partnerships and Corporate
LEAD DIRECTOR:	Services
	Jennifer Thomas, Senior Finance Business Partner
SWYDDOG ADRODD:	Stephen Forster, Strategic Change Finance Director
REPORTING OFFICER:	Sian-Marie James, Assistant Director of Corporate Legal
	Services & Public Affairs

#### Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate) Ar Gyfer Trafodaeth/For Discussion

#### ADRODDIAD SCAA SBAR REPORT Sefyllfa / Situation

Discussions took place at the Charitable Funds Committee on 20<sup>th</sup> December 2018 regarding the investment property that is held within Hywel Dda Health Charities. It was agreed that the Committee considers its position in relation to property investment.

The Committee considered a paper at its meeting in September 2019 which presented options to release the property from the charity's accounts.

Following discussions on the history surrounding the property and the options available to the charity it was agreed that an additional paper would be submitted to a future Charitable Funds Committee meeting for further discussion.

It was suggested that Mr Stephen Forster, Strategic Change Finance Director, would have more information in this regard.

It was suggested that a final paper be brought back to the March 2020 meeting for decision.

#### Cefndir / Background

'Delfryn' is a property which is owned by Hywel Dda Health Charities. The property is situated in Penglais Road, Aberystwyth. All surrounding properties, bar one semi, are owned by Hywel Dda University Local Health Board (see site plan Annex 1).

The property was purchased using charitable funds in the 2001/02 financial year by the former Ceredigion and Mid Wales NHS Trust, a decision that was made by its Charitable Funds Committee at the time for charitable funds investment purposes. The rationale at the time was that the Trust's Charity had a significant cash sum in its bank accounts as a result of recent legacies and could, for a comparable return to investing it in the investment portfolio of stocks and shares, invest it in Delfryn which had recently come onto the open market.

The proposal had the added advantage at the time of helping to extend the footprint of Bronglais Hospital thus providing accommodation for the IT and Supplies Departments which had recently displaced from other Ceredigion Trust owned properties to make way for the substantial ward block and entrance expansion on the site. However, these exchequer NHS considerations were secondary to the investment benefits as since that time the property has been rented by the NHS Trust and since the 2010 merger, the University Health Board.

This Delfryn property is currently occupied by members of the IT department with associated equipment, and Hywel Dda Health Charities receives rental of £14,000 per annum from the University Health Board. The maintenance, repair, running costs and overheads for the property is also covered by the UHB as occupier.

#### Asesiad / Assessment

The options previously considered by the Charitable Funds Committee in September 2019 are as follows:

- Option 1 Do nothing and continue to receive rental from the Health Board
- Option 2 Sell at market value

Option 3 - Sell at District Valuation (DV) rate to the Health Board

Option 4 - 'Donate it' to the Health Board and transfer ownership from Hywel Dda Charities to Hywel Dda University Local Health Board.

It is for the Committee to consider the relative merits of the options but the following key criteria should be taken into account in arriving at a decision. Further detail specific to the NHS can be found on the Charity Commission website at <a href="https://www.gov.uk/government/publications/nhs-charities-guidance/nhs-charities-guidance">https://www.gov.uk/government/publications/nhs-charities-guidance/nhs-charities-guidance</a>

#### 1. Charity Independence

From 2018, the only trusteeship arrangement for NHS charities is for an NHS body to hold the charitable funds linked to its services in the capacity of a corporate trustee.

The dual role of statutory service provider and corporate trustee of charitable funds can create a conflict of interest for an NHS body when deciding how to apply the charitable funds. The Health Board is the (sole) Corporate Trustee and the responsibility lies with the Board collectively, who must agree by a majority decision. The Corporate Trustee exercises the power and makes the decision, in most cases on recommendation from the Charitable Funds Committee subject to its scheme of delegation. These decisions should be demonstrably independent of the NHS organisation's exchequer considerations and in line with its public objects and aims that underpin its fundraising.

#### 2. The Corporate Trustee's Responsibility

*Legal requirement*: these are the principles that the courts have developed for reviewing decisions made by the Corporate Trustee; it must:

- always act in the best interests of the charity
- act within its powers
- act in good faith
- make sure it is sufficiently informed
- take account of all relevant factors
- ignore any irrelevant factors

- manage conflicts of interest
- make decisions that are within the range of decisions that a reasonable trustee body could make

The Board must be able to document how it has followed these principles when making decisions.

# 3. Hywel Dda Health Charities Charitable Objects

These are registered with the Charities Commission as follows:

"The trustee shall hold the trust fund upon trust to apply income, and at its discretion, so far as may be permissible, the capital, for all or any charitable purpose or purposes relating to the national health service"

This gives the charity some leeway in the application of its funds but as our agreed policies and charities website state:

*"We exist to make a difference to the thousands of people cared for by the University Health Board across Carmarthenshire, Ceredigion, Pembrokeshire and beyond each year.* 

We do not replace NHS funding but use the generous donations we receive from patients, their families and our local communities to provide services and activities above and beyond what the NHS can provide.

We do this by providing funds in accordance with our charity's aims to:

•Maintain the best possible environment for care, including building and refurbishing hospital and community facilities

•*Provide the most up-to-date equipment* 

•Support the training and development of staff

•Fund research into, and development of, treatments

•Deliver healthy living and health promotion initiatives

We work closely with Hywel Dda University Health Board to ensure that our charity allocates funding to the areas where it can make the biggest impact to the treatment and care of patients across Carmarthenshire, Ceredigion and Pembrokeshire."

In the past, the charity has set out policies which aim where possible to focus charitable spending on those patient care areas that the monies were donated for.

Clearly therefore the Corporate Trustee is charged with taking donations and applying those donations for the benefit of patients over and above what the NHS can provide. In the past we have learnt the hard way that donor trust is vital and therefore our decision making has to be of the highest calibre, taking into account not just all relevant guidance but also the Committee's understanding of donor wishes and public sentiment.

# 4. Special Considerations when considering the acquisition or disposal of land (and the buildings on it)

There is nothing wrong with charities holding property either for charity operational reasons or investment. In fact the Charity's governing document the "Declaration of Trust" dated 29<sup>th</sup> March 2012 specifically allows for the purchase, maintenance, equipping, insurance and

disposal of property of the Charity as well as the holding of investments. In addition, it is worth noting that the Charity's agreed Ethical Policy places limits on the investment in tobacco or alcohol production, manufacturing or supply, but does not limit property investment.

The Corporate Trustee must always act in the best interests of the charity. How they demonstrate this is usually left to its discretion, but when it comes to selling, leasing or transferring their charity's land, the law sets out clear requirements to ensure that these important transactions are properly managed in the charity's interests and that the Corporate Trustee obtains the best price reasonable in the circumstances.

The Charitable Funds Committee, with delegated responsibilities from the Corporate Trustee, will want to be satisfied that any disposal will be in the charity's best interests. For example, you should consider whether it would be better to retain the land for longer and perhaps continue taking any income from it, so as to earn more for it later. Or, in spite of the money that could be realised, you might consider continuing to use it for the benefit of the charity. As Corporate Trustee, it is the Board's responsibility to think carefully before disposing of valuable assets of the charity which may be useful in the future.

In many cases, the Corporate Trustee can rely on the power contained in the Trusts of Land and Appointment of Trustees Act 1996 (TLAT 1996), commonly called the statutory power. In some cases the Corporate Trustee may be able to rely on the power in some other statutes, or there may be wider powers written into the governing document of the charity. This will usually be in the form of an explicit power or may be inferred from the 'sweeping up' power which permits the exercise of any other powers which further the objects of the charity.

Use of the power is dependent on the Corporate Trustee:

- •exercising it in a way which is compatible with the trusts of the charity
- •complying with the requirements of s117 121 of the Charities Act see section 2.5 and also sections 3 and 4
- •complying with the standard of care set out in the Trustee Act 2000

Even where there is power to dispose of the land, the Corporate Trustee would need Charity Commission consent if it disposes the property to a **connected person** -

<u>Connected person</u>: This is anyone closely connected to or associated with the charity. This could be someone working for the charity, paid or unpaid, as a trustee, officer or employee, or someone who has donated land to the charity. It extends to the spouses or civil partners of any of these as well as close relatives of trustees or donors of land and **also any institutions or businesses run by any of these people**. A disposal of land to a connected person can only be valid if it has been authorised by an order [of the Charity Commission or the Courts].

The disposal of this "land" i.e. Delfryn, would appear to be to a "connected person" being the Health Board in its statutory NHS duties. In any event the disposal decision is subject to a charge of conflict of interest and it would be wise before any decision is made to get appropriately skilled legal advice and consult the Charity Commission.

As touched on earlier, in 1996 Ceredigion and Mid Wales NHS Trust went through a similar dilemma when proposing to demolish two properties on the Bronglais site. One of these was called "The Gables", which had been owned by Dyed Powys Health Authority's charity for some years before passing to the Trust. The demolition was required and indeed desirable to build the northern wing of the hospital. The Charity Commission was consulted and the proper

decision making followed with over £130,000 paid to the charity by the NHS Trusts capital allocation to transfer ownership prior to demolition.

# 5. Purpose of holding the Property "Delfryn"

A careful distinction must be drawn in the case of Delfryn. It is <u>not</u> a property held expressly for the operational use of the charity. In fact it was bought as an **investment**, albeit with the added benefit that the NHS could rent the available space at market value in a property contiguous with the site (see attached site plan).

Although unknown at the time of investment this purchase was very fortunate some 10 years later with the new Day Surgery Unit being sited on the garden area of Delfryn and the other 3 adjoining houses. One of these houses is still in private hands and in order to do this the Trust bought a small area of the private garden at a cost of £50,000.

It should be noted also that the housing of Health Board IT services would not usually fit within the aims of the charity. However, in this case the charity's charitable objects are <u>immaterial</u> as it is not an operational asset of the Health Board Charity, but an investment.

Taking all of this together the Corporate Trustee should firstly consider appropriateness of holding this investment in the light of its economic value as much as the consequential benefits to the Health Board.

# 6. Economic & risk considerations

Property has for many years been a relatively low risk investment as it is backed by a tangible asset with historically sound and usually rising value. For Charities the advice is invariably to err on the lower side of the risk spectrum given the responsibilities in law.

Property is a legitimate investment vehicle. As a matter of fact the charity held nearly £0.5m of Property backed assets, in addition to Delfryn, within the General Fund portfolio managed by Sarasin as at December 2019. Yields are estimate to range between 1.8% and 7.7% p.a.

PROPERTY	%	£
AEW UK CORE PROPERTY FUND	0.47	26,777
CIVITAS SOCIAL HOUSING PLC	0.37	20,941
COIF CHARITIES PROPERTY-INC	0.58	32,984
CROWN CASTLE INTL CORP	0.66	37,736
DEUTSCHE WOHNEN SE	0.29	16,459
EQUINIX INC	0.95	54,120
MAYFAIR CAPITAL PROPERTY INCOME TRUST CHARITIES GBP	0.96	54,616
MITSUI FUDOSAN CO LTD	0.41	23,239
SARASIN IE SUSTAINABLE GLOBAL REAL ESTATE EQUITY - I INC	2.39	136,305
SIMON PROPERTY GROUP INC	0.2	11,378
THE CHARITIES PROPERTY FUND	1.03	58,856
UNIBAIL-RODAMCO-WESTFIELD	0.39	22,142
SUB-TOTAL	8.7	495,553

A further £0.181m is held by the Charity's Endowment Funds in the Sarasin portfolio across many of the same property investments.

Property valuations in Aberystwyth whilst not increasing massively are stable and the rent for "Delfryn" has more than doubled in the last 20 years, being independently reviewed on a regular basis.

The latest District Valuer valuation for the property is £182,250, therefore the rental return is 7.7% per annum with a very low risk, with the value of the property also appreciating over time (c 65% increase in book value since 2001/2, +3% per annum over 19 years). Long term return of approaching 10% per annum compares with c. 5% average long term return on the portfolio of stock and shares.

In previous discussions there was mention of the "burden of being a landlord". Few, if any landlords have such a benign environment to work within. The Health Board in its exchequer funded statutory role as opposed to the charity appears to bear the major risks, as it would continue to do if the property ownership was transferred to it, albeit the Charity would lose the ongoing rewards.

On the subject of insurance cover which was previously queried, the following confirmation from NHS Wales Shared Service Partnership, Legal and Risk Department is unequivocal.

"This is a nice, easy confirmation that I can provide. The purchase route, or the technical legal owner, is not the determining factor as to whether NHS Indemnity is applicable to a property. The factor is actually the command and control of the Health Board.

I also agree with your determination that the charity is effectively (for the purposes of indemnity) considered part of the HB.

I have no difficulty is confirming that the property is the subject of NHS Indemnity and thus part of the Welsh Risk Pooling arrangements. If you did change the use from the charity / staff occupation and let it to a third party there would be a requirement for that third party to insure their activities and any impact on the property.

I hope this is of assistance

Regards Jonathan

Jonathan Webb Head of Safety & Learning Pennaeth Diogelwch a Dysgu"

#### 7. Safeguarding the Charities Resources – Accounting Implications

It is important to consider the accounting implications of the four previously proposed options as given we are considering an investment asset, it is the case that the value of the designated funds within the charity are backed by the value of the investment. Any proposal to change the status quo will affect the value of the funds held which have been donated to the charity and its predecessors over time.

Option 1 - Do nothing and continue to receive rental from the Health Board

Option 2 - Sell at market value

Option 3 - Sell at District Valuation (DV) rate to the Health Board

Option 4 - 'Donate it' to the Health Board and transfer ownership from Hywel Dda Health Charities to Hywel Dda University Local Health Board. Option 1 - Clearly has no impact on current accounting and the value of the underlying funds are protected.

Option 2 – Could either increase or decrease the value of the funds. Contrary to the statement made previously that a "Significant capital donation will be received which could support the charity's future strategy" in fact the cash received would be needed to eliminate the investment asset in the Balance Sheet with only a marginal realised gain or loss, depending on final sale price, being reflected in the Statement of Financial Activities (SoFA).

Option 3 – This would largely be cost neutral to the charity, there being no available additional funds for the charity as per option 2. It would cost the Health Board significant Capital.

Option 4 – This would engender a significant loss on realisation to the charity with the Investment Asset value being written off to SoFA as a realised loss at full value. Fund holders funds, many of whom would have no knowledge or understanding of the charity's investments would have to be top sliced to recognise this loss. In the light of this and given the tenuous reasons for taking this option it is difficult to agree with the statement that this would be a "Benefit to Charity's profile within Hywel Dda, good for public relations". As we have found in the past even unintended consequences can lead to substantial public disquiet and a significant drop in donations.

# 8. Other Considerations

One of the considerations that was highlighted in the pros and cons list in the previous paper for options 3 and 4 was that these would be "in line with the Healthier Wales Strategy for Bronglais Hospital". Whilst maintaining the site integrity of Bronglais would support this, the only option of the four that does not is the sale on the open market option 2. Option 1, maintaining the status quo also maintains site integrity. This notwithstanding the consideration of Exchequer NHS Strategic Direction is not a primary consideration for the Board when acting as Corporate Trustee of the Charity.

#### Argymhelliad / Recommendation

This paper has attempted to concentrate on relevant legislation, guidance and facts. It does not recommend the route the Corporate Trustee should take. However, in summary there are three main considerations for the members of the Charitable Funds Committee to consider before making any decisions in relation to the future of the Delfryn property:

- 1. Bearing in mind that the property under discussion is an investment and not operational asset of the charity, is the direct holding of a property investment, as allowed for by legislation and guidance, as well as the Charitable objects and governing document of the charity, still in conflict with those objects? (note: we also hold property indirectly as property unit trust investments via Sarasin).
- 2. Given the evidence to the contrary in this paper, do members believe the investment property is returning a poor or high risk, return to the charity?
- 3. Does the Committee consider the administration of the holding of this investment to be any more a "burden" than it has been for the last 20 years, and furthermore would some form of sale or transfer to the exchequer Health Board materially lessen this burden?

If members are confident that the answer to questions 1, 2 and 3 are "no" the status quo remains. If "yes" then change is required and the question turns to what to do. In considering this a further series of questions need to be answered;

- 1. Looking at the options for change does the option 2 to sell on the open market offer good value for money and, irrespective of wider NHS Strategic aims, would it be one that the charity in its role as supporting and enhancing NHS Services in Ceredigion and the other two counties be happy to recommend?
- 2. In respect of option 3, having taken no legal advice to date, does the Corporate Trustee feel confident to proceed without asking the Commission for advice regarding the proposed transaction given the Corporate Trustee and the Health Board are very clearly "connected persons" and substantial conflicts of interest would seem to be in play?
- 3. In respect of option 4, do the members feel confident that incurring a £182,000 realised loss plus sale costs to the SoFA, apportioned to designated funds (in line with precedent in respect of apportioning the investment revaluation gains and rental income) would actually enhance or detract from the reputation of the charity?

It should be noted that considerations on the availability of NHS capital are not for the charity to consider. The Health Board in its exchequer NHS role would need to respond as prospective purchaser on the priority and availability of funds

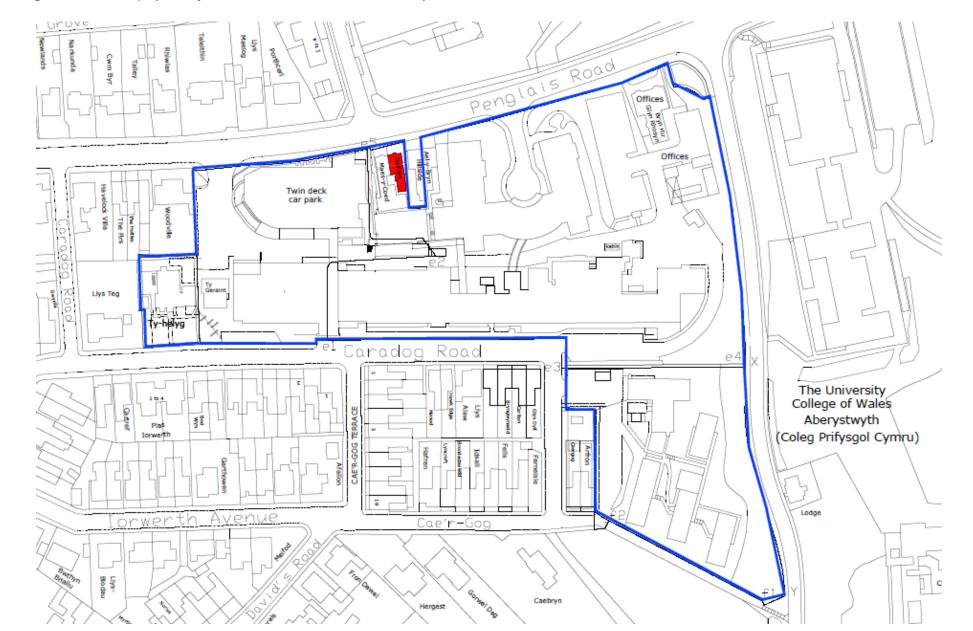
Options	Pros	Cons
Option 1	<ul> <li>Will continue to receive low risk rental income of £14,000 from the Health Board</li> <li>Charity continues to hold an asset worth £182,250 (current District Valuation for property)</li> <li>Does have the incidental advantage of supporting and enhancing NHS Health Services in Ceredigion by keeping prime clinical space free of administrative staff</li> <li>No adverse impact on the designated funds that the investment backs.</li> </ul>	
Option 2	<ul> <li>May receive more or less than District Valuation value for property; gains will need to be specifically applied for charitable benefit</li> <li>Any marginal gain would be accounted for by the Charity</li> </ul>	<ul> <li>Any marginal loss would be accounted for by the Charity</li> <li>Legal costs will be incurred to deal with the sale and transfer of ownership</li> <li>Estate agents costs will be incurred</li> <li>Does not have the incidental advantage of supporting and enhancing NHS Health Services in Ceredigion by keeping prime clinical space free of administrative staff</li> <li>Implications of loss of low risk rental income of £14,000</li> <li>Implications of loss of investment gains (or occasionally losses) on property revaluation</li> </ul>

As requested the Pros and Cons table has been redrafted:

Option 3	<ul> <li>Incidental advantage of supporting and enhancing NHS Health Services in Ceredigion by keeping prime clinical space free of administrative staff</li> <li>Any marginal gain would be accounted for by the Charity</li> </ul>	<ul> <li>Any marginal loss would be accounted for by the Charity</li> <li>Legal costs will be incurred in relation to transfer of ownership</li> <li>Health Board would need to be consulted on availability of Capital. May not be a priority.</li> <li>Implications of loss of rental income of £14,000 and loss of investment gains (or occasionally losses) on property revaluation</li> <li>Requirement to reinvest cash receipt within charitable investments.</li> <li>Cannot spend as if it were new donations.</li> </ul>
Option 4		<ul> <li>Significant legal and Charity Commission advice possibly including Commission Scheme/Order or Court Order will be needed to ensure the Corporate Trustee is protected from charges of conflict of interest.</li> <li>The charity designated fund-holders will see a decrease in fund value by £182,250 impacting on the work the Charity is able to fund.</li> <li>Implications of loss of rental income of £14,000</li> <li>Legal costs will be incurred in relation to transfer of ownership</li> <li>Likely to be detrimental to the charity's profile within Hywel Dda, very poor for public relations.</li> </ul>

It is recommended that any decision <u>that alters the status quo</u> made by the Charitable Funds Committee, although considered as within its delegated authority, must be approved by the Corporate Trustee (the Health Board) at a formal meeting. This would ensure that the Corporate Trustee agrees that the decision is acting in the best interests of the charity.

# Bronglais Site Map (Delfryn in red, site outline in blue)



Amcanion: (rhaid cwblhau)	
Objectives: (must be completed) Committee ToR Reference Cyfeirnod Cylch Gorchwyl y Pwyllgor	11.1 Overseeing the day to day management of the investments of the charitable funds in accordance with the investment strategy set down from time to time by the Trustees, and in accordance with the requirements of the UHB's Standing Financial Instructions.
Cyfeirnod Cofrestr Risg Risk Register Reference:	Not applicable for this paper
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	9. To improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
Amcanion Llesiant BIP: UHB Well-being Objectives: <u>Hyperlink to HDdUHB Well-being</u> <u>Statement</u>	Not Applicable
Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015 - Pum dull o weithio:	Please explain how each of the '5 Ways of Working' will be demonstrated Long term - the importance of balancing short-term
The Well-being of Future Generations (Wales) Act 2015	needs with the need to safeguard the ability to also meet long-term needs
- 5 Ways of Working:	Not applicable for this paper
	Prevention – the importance of preventing problems occurring or getting worse
	Not applicable for this paper
	Integration - the need to identify how the Health
	Board's well-being objectives may impact upon each of the well-being goals, on its other objectives, or on
	the objectives of other public bodies
	Not applicable for this paper

Collaboration – acting in collaboration with anyone else (or different parts of the organisation itself) which could help the Health Board to meet its well-being objectives
Not applicable for this paper
Involvement - the importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the Health Board serves
Not applicable for this paper

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth:	Ledger reports and investment reports
Evidence Base:	
Rhestr Termau:	Included within the body of the report
Glossary of Terms:	
Partïon / Pwyllgorau â	Executive Director of Finance
ymgynhorwyd ymlaen llaw y Bwrdd	Director of Partnerships and Corporate Services
Partneriaeth Y Prifysgol:	Investment Advisors
Parties / Committees consulted prior	Fundraising Team
to University Partnership Board:	-

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	The report sets out the financial position of the charity. Income generated from fundraising activities is a key source of income for Hywel Dda Health Charities. The charity is therefore duty bound to ensure that the correct controls and governance arrangements exist with regards to all aspects of fundraising.
Ansawdd / Gofal Claf: Quality / Patient Care:	Charity objects are in support of NHS services locally
Gweithlu: Workforce:	The charity has no employees but may access staff time via the University Health Board.
Risg: Risk:	Reputational risk if associated with unethical fundraising.
Cyfreithiol: Legal:	The charity's financial reporting is in line with charity law and guidance.
Enw Da: Reputational:	Reputational risk if associated with unethical fundraising.
Gyfrinachedd: Privacy:	No impact
Cydraddoldeb: Equality:	No EqIA is considered necessary for a paper of this type.



#### HYWEL DDA HEALTH BOARD – CHARITABLE FUNDS COMMITTEE WORK PLAN 2019-20

Currently, the Charitable Funds Committee meets quarterly. Based on this, the following table represents a proposal to incorporate the duties as outlined in the Committee's Terms of Reference into a basic work programme April 2019 – March 2020 (initials in brackets denotes leads).

Agenda Standing Items	Lead	18 <sup>th</sup> June 2019	20 <sup>th</sup> Sept 2019	16 <sup>th</sup> Dec 2019	17 <sup>th</sup> Mar 2020
Declaration of Interests	SH	$\checkmark$	✓	✓	✓
Monitor agreed actions from previous meetings	Secretariat	$\checkmark$	✓		✓
Review of CFC Terms of Reference	SJ				✓
Review of CFC membership annually	SJ				✓
Develop & monitor annual CFC work plan	Secretariat	√	✓	✓	✓
Hywel Dda Health Charities Fundraising Story	NLI	$\checkmark$	$\checkmark$	✓	
Approve Annual Report on Committee's activity for onward submission to the Board.	SJ				~
CFC Assurance Report for submission to ARAC in April 2020	SJ				
CF Annual Report and Accounts	JT/SJ		✓		
Self-assessment of IMs on CFC to take place	Secretariat				✓
Investment advisor Performance Update to be presented in person	JT	$\checkmark$			✓
Integrated Hywel Dda Health Charities Performance Report	JT/SJ	$\checkmark$	$\checkmark$	✓	✓
Approval of Policies and procedures relating to CF on behalf of the Board, as required	JT	$\checkmark$	✓	✓	✓
Approval of CF expenditure over £50,000 (if required)	Sub- Committee Chair	$\checkmark$	~	~	~
Review any approvals made outside the meeting via Chairs Action procedure.	SH	$\checkmark$	×	~	×
Accept and recommend other relevant strategies policies, procedures and reports relating to CF, as appropriate for	All	$\checkmark$	~	~	~



ratification by the HB Board, as required					
To regularly receive and monitor the Charitable Funds Risk	SJ	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$
Register					
CF Operations Sub Committee Update Report	GR	$\checkmark$	✓	✓	$\checkmark$
CF Operations Sub Committee Annual Report	GR				$\checkmark$
CFC Governance and Support Costs Budget for 2020/21	SJ/JT				$\checkmark$
To provide updates to the SC following each CFC meeting	GR	$\checkmark$	✓	✓	$\checkmark$
Reflective Summary of Meeting	IM/Exec	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$

Additional Agenda Items					
6 month impact report on IT Equipment for Patients with Learning Difficulties	CC	$\checkmark$			
Psychological Support for Cancer Patients 18 month evaluation of the pilot	KD/GB	~			
Benchmarking Exercise				$\checkmark$	
Strategic Planning Meeting					
Ceredigion Property Options	SJ/JT		$\checkmark$		✓
Bronglais Chemotherapy Unit Update	NLI	√(verbal)	$\checkmark$		
Pembrokeshire Cancer Services	NLI		$\checkmark$		
Aberaeron Integrated Care Centre	CS/PS/JH				<ul><li>✓ (Deferred)</li></ul>
Psychological Support for Cancer Patients Update	SJ				✓
Update on the Impact of Utilization of IT Devices	MR				✓
Hywel Dda Health Charities 3 Year Plan	SJ				✓
CFC Governance and Support Costs Budget 2020/21	SJ/HT				✓
Staff Lottery Business Case	NLI				✓
Visit to Ward 10	Secretariat				✓



Admin					
Update and monitoring reports for expenditure items over £50,000	Secretariat				
Agenda Setting Meeting with Chair & Exec Lead (at least 6 weeks prior to meeting)	Secretariat	$\checkmark$	~	$\checkmark$	~
Call for papers (at least 4 weeks before the meeting to receive papers at least 14 days before the meeting)	Secretariat	$\checkmark$	~	$\checkmark$	~
Disseminate agenda & papers 7 days prior to the meeting	Secretariat	$\checkmark$	✓	$\checkmark$	✓
Type up minutes and TOA within 7 days of the meeting	Secretariat	$\checkmark$	✓	$\checkmark$	✓
Circulate minutes & TOA to Committee for comments within 10 days of the meeting	Secretariat	$\checkmark$	~	$\checkmark$	✓
Check & send final version of minutes to the Committee Chair following comments received.	Secretariat	$\checkmark$	~	$\checkmark$	✓
Chase updates on TOA before the next meeting	Secretariat	$\checkmark$	✓	$\checkmark$	✓
Produce written update report for Board	Secretariat	$\checkmark$	$\checkmark$	$\checkmark$	✓
		(for 25/7/19	(for 28/11/19	(for 30/1/20	(for 26/3/20
		`Board)	Board)	`Board)	`Board)
Prepare schedule of meetings	Secretariat	$\checkmark$	/	$\checkmark$	
CFC annual work programme	Secretariat	$\checkmark$	✓	$\checkmark$	✓
Invite WAO			✓		



#### HYWEL DDA HEALTH BOARD – CHARITABLE FUNDS COMMITTEE WORK PLAN 2020-21

Currently, the Charitable Funds Committee (CFC) meets quarterly. Based on this, the following table represents a proposal to incorporate the duties as outlined in the Committee's Terms of Reference into a basic work programme - April 2020 – March 2021.

Agenda Item/Issue	Lead	16 <sup>th</sup> June 2020	15 <sup>th</sup> September 2020	30 <sup>th</sup> November 2020	9 <sup>th</sup> March 2021
Governance					
Apologies	Chair	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$
Declaration of Interests	Chair	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$
Minutes from previous meeting	Chair	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$
Table of actions	Chair	✓	$\checkmark$	$\checkmark$	$\checkmark$
Review of Terms of Reference	Chair				✓
Annual report to Board detailing work undertaken throughout year & Accounts	SJ/JT/Secretariat				✓
Sub-Committee Terms of Reference: <ul> <li>Charitable Funds Operations Sub-Committee</li> </ul>	GR			$\checkmark$	
Sub-Committee Update Reports: <ul> <li>Charitable Funds Operations Sub-Committee</li> </ul>	GR	~	~	✓	~
<ul><li>Sub-Committee Annual Report:</li><li>Charitable Funds Operations Sub-Committee</li></ul>	GR				$\checkmark$
Operational/Strategic Issues					
Hywel Dda Health Charities Fundraising Story	NLI	$\checkmark$	✓	$\checkmark$	$\checkmark$
CFC Assurance Report for submission to ARAC in April 2021	SJ				$\checkmark$
Self-assessment of Committee Effectiveness	Secretariat				$\checkmark$
Investment advisor Performance Update to be presented in person	JT	~			✓
Integrated Hywel Dda Health Charities Performance Report	JT/SJ	$\checkmark$	✓	✓	$\checkmark$
Approval of Policies and procedures relating to charitable funds	JT	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$



on behalf of the Board (as required)					
Approval of charitable funds expenditure over £50,000 (as	GR	$\checkmark$	✓	✓	✓
required)					
Review any approvals made outside the meeting via Chairs	Chair	$\checkmark$	✓	✓	✓
Action procedure.					
Accept and recommend other relevant strategies, policies,	All	$\checkmark$	✓	✓	$\checkmark$
procedures and reports relating to charitable funds, as					
appropriate for ratification by the HB Board (as required)					
To regularly receive and monitor the Charitable Funds Risk	SJ	$\checkmark$	✓	✓	✓
Register					
CFC Governance and Support Costs Budget for 2020/21	SJ/JT				✓
To provide updates to the Sub-Committee following each CFC	GR	$\checkmark$	✓	✓	✓
meeting					
Benchmarking Exercise				✓	
Strategic Planning Meeting					
Ceredigion Property Options	JT		✓		
Bronglais Chemotherapy Unit Update	NLI		✓		
Pembrokeshire Cancer Services	NLI		✓		
Aberaeron Integrated Care Centre	CS/PS/JH	$\checkmark$			
For Information					
Reflective Summary of Meeting	Chair/SJ	✓	✓	✓	✓
CFC Update Report to Board	Secretariat	$\checkmark$	✓	✓	✓
		(for July 2020	(for	(for January	(for March
		Board)	November 2020 Board)	2021 Board)	2021 Board)
CFC Workplan 2020/21	Secretariat	✓	<u>∠020 Doard</u>	✓	✓
Invite Welsh Audit Office	Secretariat		✓		
Administration					
Agenda setting meeting at least 6 weeks prior to meeting	Chair/Secretariat	✓	✓	✓	✓
Quality check agenda and papers before dissemination	Chair/Secretariat	$\checkmark$	✓	✓	$\checkmark$
Disseminate agenda & papers sever days prior to meeting	Secretariat	$\checkmark$	$\checkmark$	$\checkmark$	✓
Minutes and action log to be circulated within 14 days of the	Secretariat	$\checkmark$	$\checkmark$	$\checkmark$	✓
meeting to member					
Prepare Update Report to Board (must be signed off by Chair &	Secretariat	✓	✓	✓	✓



Lead Exec prior to submission)				
Prepare Forward Schedule of Meeting Dates for next financial	Secretariat		✓	
year				
Prepare Forward Annual Work Plan for next financial year	Secretariat			$\checkmark$

# Initials

Chair – Simon Hancock	Secretariat – Claire Williams
SJ – Sarah Jennings	CS – Claire Sinnett
JT – Jennifer Thomas	PS – Peter Skitt
GR – Gareth Rees	JH – Jina Hawkes
NL1 – Nicola Llewellyn	