

## MINUTES OF THE Charitable Funds Committee MEETING

Date of Meeting: **09:30, Tuesday 18 March 2025**  
 Venue: **Microsoft Teams Meeting/ Ystwyth Boardroom; Ystwyth Board Room Avocor (Hywel Dda UHB - Generic Account)**

Present: Delyth Raynsford (Independent Member) (Chair)  
 Iwan Thomas (Independent Member) (Vice Chair) (VC)  
 Rhian Davies (Assistant Director of Finance - Financial Planning & Statutory Reporting), acting as deputy for Huw Thomas, Director of Finance  
 Sharon Daniel (Interim Director of Nursing, Quality and Patient Experience)  
 Ms Anna Lewis (Independent Member)  
 Ann Murphy (Independent Member)

In Attendance: Sian-Marie James (Assistant Director of Corporate Legal Services and Public Affairs) (part))  
 Melanie Carroll-Cliffe (Head of Corporate Legal Services & Public Affairs) (part))  
 Andrew Carruthers (Chief Operating Officer) (part)  
 Rhodri Evans (Hywel Dda UHB - Independent Member) (part)  
 James Severs (Executive Director of Allied Health Professions and Health Science)  
 Carly Hill (Assistant Director) (Charitable Funds Sub-Committee Chair)  
 Timothy John (Senior Finance Business Partner (Accounting & Statutory Reporting))  
 Nicola Llewelyn (Head of Hywel Dda Health Charities)  
 Eldeg Rosser (Head of Capital Planning) (Part)  
 Antonia Cavalier (Client Director, CCLA) (part) (acting as deputy for Ms Daisy Mannifield)  
 Neil Mason (Head of Service: Older Adult Mental Health) (part)  
 Stuart Bancroft (Assistant General Manager, PPH) (part)  
 Gina Beard (Lead Cancer Nurse) (part)  
 Kathryn Lambert (Head of Arts and Health) (part)  
 Clare Strudwick (Committee Services Officer) (Secretariat)

### Minutes Item Ref.

### Action

#### CFC(25)82 **Welcome and Apologies**

Mrs Delyth Raynsford welcomed everybody to the meeting. Apologies had been received from:

**Mr Huw Thomas**, Director of Finance  
**Mr Anthony Dean**, Staff Side Representative  
**Mr Huw Thomas**, Executive Director of Finance  
**Ms Daisy Mannifield**, CCLA Client Investment Director

#### CFC(25)83 **Declarations of Interest**

There were no declarations of interest.

CFC(25)84 **Development of Therapeutic Gardens at Prince Philip Hospital (PPH)**

*(Mr Andrew Carruthers, Mr Neil Mason and Mr Stuart Bancroft joined the meeting. Item: CFC(24)84 took place in advance of CFC governance matters due to staff availability.)*

Mrs Delyth Raynsford thanked Mr Andrew Carruthers and his team for the preparation of such detailed and thorough papers.

Mr Carruthers reported a substantial review of the papers had been undertaken, with a focus on patient and staff benefit. Citing a recent research visit to Denmark in November, Mr Carruthers detailed the manner in which estate spaces were used to create environments that were both good for staff wellbeing as well as for patients' recovery and healing. The Danish hospital sensory garden has provided Mr Carruthers with a vision of what the PPH therapeutic gardens could provide both as a flagship project to be proud of, and as a facility providing a huge benefit for both patients and staff.

Mr Carruthers acknowledged concerns had been voiced regarding ongoing maintenance following project delivery and reported discussions were progressing regarding possible linkages to the HDdUHB Wellbeing team, social prescribing via a local GP as well as gardening clubs and both staff and local community volunteers.

Mr Carruthers stated that approximately £90,000 had been spent on perimeter fencing and upgrades to the area, demonstrating a clear Health Board (HB) commitment to protect and develop the area. Mr Carruthers reported there was a cost increase from the original paper, and whilst these costs were as accurate as possible, there was however a risk that costs could increase due to inflation.

Mr Carruthers clarified that the request to CFC was for support to progress to the tender position, not a request for the full sum of the entire project cost.

Mrs Raynsford commented on the details within the paper and stated that Members could reflect on the good work undertaken in such a short timescale.

Mr Stuart Bancroft expressed his support in how the paper focused on helping patients and their families to recover more quickly, as well as staff wellbeing and opportunities to volunteer. Mr Bancroft offered a personal example of how a hospital garden had benefited his own family citing that a hospital garden could pay dividends to both staff and families.

Mrs Raynsford thanked Mr Bancroft for providing reflection on the benefits and the difference that a therapeutic outdoor space could bring to both patients and families.

Mr Neil Mason reported that the gardens would represent a large area for patients of both wards to use, and that users of the garden would

be people with the most challenging and complex conditions, some of which may be receiving end of life care. Mr Mason detailed how with challenges to pathway flow, patients in the older adult client group are staying longer in hospital so the therapeutic gardens will contribute substantially.

Ms Daniel asked, given the objectives in the paper, how the impact regarding improvements for promoting multisensory space for patients and rehabilitation opportunities is to be quantified.

Mr Mason reported that there was a solid multinational evidence base to such benefits, however, to develop a linear scientific correlation would not be achievable due to the variables involved. Patient experience feedback would be used to demonstrate the benefits provided. Mr Mason acknowledged however that this could prove to be very challenging as people with severe advanced dementia would struggle to articulate.

Mr Mason confirmed to Mrs Daniel that the Arts in Health Team are involved with the project going forward.

Ms Ann Murphy stated her appreciation on the clarification that the entire amount of HDdHC monies would be spent on the sensory garden and the explanation that the site had been cleared using HB funding, stating the use of charitable funds to clear a HB site would not sit well with Independent Members (IM's).

Mrs Llewelyn clarified process and timelines, in that the current request was for the Committee to approve the project to proceed to tender stage, whereby firm project costs via a quotation from a framework contractor will be ascertained and a full and final business case will be brought back to CFC in June 2025 for decision.

**AC/  
NM/SB**

Mrs Llewelyn confirmed to Ms Anne Murphy that there was no closing date on fundraising for the therapeutic gardens project.

Mr Mason clarified to Mrs Rhian Davies that providing patients with access to the garden would be a normal part of the function of the ward and additional support would not be required for patients and individuals to access the garden. Furthermore, staff on both wards and the local community had already made considerable and prolonged effort to fundraise for the gardens.

Mrs Anna Lewis stated the vision for the gardens made the project far more compelling and softened the blow of the sheer scale of the investment, recognising that the cost had now been thoroughly scrutinised.

Mrs Lewis stated she would like to see further detail regarding sustainability as well as substantive detail around how the community will be involved to bring this project to life. Mrs Lewis requested that details of working with third sector organisations, ensuring community ownership of the project to enable a long-term impact to be brought back to CFC 17 June 2025 to provide confidence and assurance.

Mrs Lewis also stated, given the scale of investment, patient experience and impact should be returned to QSEC at a suitable time, (one to two years) with assurance to come back into CFC around patient experience and the impact of the investment that HDdHC have made. **NM/SB/SD**

Mrs Raynsford agreed regarding QSEC oversight as well as details regarding third party involvement.

Mrs Llewelyn reported that the large local charity Aberglasney had been approached and indicated a real interest to support the scheme in terms of expertise with regards to how key stakeholders such as patients, staff and family members can be involved in the design and choice of plants, specifically looking at plants that will bring back memories.

Mr Bancroft clarified the geographical location of Mynydd Mawr and Bryngolau Wards at PPH.

Mrs Raynsford stated patient, family and community involvement were key. Mrs Raynsford requested assurance and clarified the expectations that further information regarding ongoing costs, social benefits and any volunteer developments will be built up and presented to the 17 June CFC. **AC/SB/NM**

**Decision:**

The Charitable Funds Committee:

- **NOTED** the change of direction in the project brief which enhances the project and plans for the development of a sensory gardens experience for patients and staff at Mynydd Mawr and Bryngolau wards at PPH.
- **CONSIDERED** and **APPROVED** the request for the project to proceed to the Tender Review stage in line with the next steps outlined above to obtain assurance that can be taken from a guaranteed maximum price.

**CFC(25)85 Minutes from the Charitable Funds Committee Meeting held on 13 December 2024**

The minutes of the Charitable Funds Committee (CFC) meeting held on 13 December 2024 were reviewed and approved as a correct record of proceedings.

**Decision:**

**RESOLVED** - The minutes of the Charitable Funds Committee (CFC) meeting held on 13 December 2024 were accepted as an accurate record of the meeting.

**CFC(25)86 Matters Arising and Table of Actions from the Charitable Funds Committee Meeting held on 13 December 2024**

The Table of Actions arising from the CFC meeting on the 13 December 2024 was reviewed, with an update provided on the one outstanding action as follows:

**CFC(24) 53: Update on Expenditure Bronglais Hospital Fibroscan Ultrasound.** Mrs Sharon Daniel updated she had met with Mrs Donna Blinston (Advanced Nurse Practitioner, Hepatology) and Mrs Nicola Reeves (Lead Nurse, Hepatology) regarding the equitable use of the Fibroscan machine funded by CFC as a Health Board (HB) wide service. The new lightweight Fibroscan machine provided by the CFC in Ceredigion, had enabled outreach into the community to more vulnerable patients. Mrs Daniel reported she had been provided assurance that there was an equitable use of Fibroscan machines across the entire HB. Carmarthenshire and Pembrokeshire had both received the new Fibroscan machines at the end of the year via Discretionary Capital Funding.

Mrs Eldeg Rosser provided clarification to Mrs Raynsford regarding the process of purchasing equipment via the Capital Equipment Programme. Emphasising the difficulties in forecasting which arise as a result of not knowing the value of money available in advance.

Mrs Llewelyn stated the new business case template has a requirement for applicants to demonstrate that the CFC is the fund of last resort and Mrs Llewelyn works closely with Mrs Rosser, Mr Gareth Rees and the Operations Team to ensure the equipment being requested via CFC is a priority and not likely to be funded from another source.

Mr James Severs inquired if the same level of scrutiny, regarding the prioritisation of equipment was applied to Charitable Funds and which group had oversight of this.

Mrs Rosser detailed the reporting process whereby the Capital Planning Group, meets on a minimum of Bi-Monthly basis to decide equipment priorities. Findings are fed through to the Operational Teams and a balance prioritisation matrix is used to score and align the highest priorities. Those outcomes are fed into the Capital Planning Group, the Capital Sub-Committee and then to SDODC (Strategic Development and Operational Delivery Committee).

Mrs Raynsford stated considering budgetary pressures, it was extremely helpful to have this oversight and to understand the scrutiny for business cases coming to the charity.

**Decision:** The Table of Actions arising from the CFC meeting on the 13 December 2024 was reviewed.

**CFC(25)87 Ratification of any Approvals Made Outside the Meeting via Chair's Action**

**Decision:** There were no approvals made outside of the meeting via Chair's Actions.

**CFC(25)88 Hydrotherapy Pool at the Pentre Awel Village, Llanelli**

Ms Anwen Pearce updated the CFC on the progress of the hydrotherapy pool collaboration agreement between the HDdUHB and Carmarthenshire County Council (CCC), following the Executive Team's endorsement on 5 March 2025.

Ms Pearce reported the hydrotherapy pool construction is due to complete at the end of May with opening scheduled for Summer 2025. The

hydrotherapy pool Joint Working Group has (in conjunction with CCC) has progressed and developed a draft hydrotherapy pool procedure document, covering the operational and maintenance requirements of the pool. Mrs Sian-Marie James has commissioned legal and risk to draft the collaboration agreement and once finalised it will be assigned to be sealed by the Chair and CEO of HDdUHB.

With regards to the shortfall in funds for construction Ms Pearce reported that Welsh Government (WG) had funded the balance of the shortfall directly to CCC.

In reply to Mrs Raynsford, Mrs James reported she was satisfied with the careful wording in the detailed collaboration agreement and confirmed that the agreement was now with the Legal and Risk Team with a couple of queries to be urgently reviewed. The view was to swiftly return the document to CCC with the aim to complete following Board approval, as the Corporate Trustee would have to approve the release of the funds. Once the Corporate Trustee has agreed, then subject to their approval, the seal on the collaboration agreement will be completed before the end of the month.

Mrs James further clarified, the collaboration agreement between HDdUHB and CCC will continue for as long as the hydrotherapy pool is in existence.

Mrs Raynsford thanked Mrs James for her detailed information regarding timelines.

Ms Pearce in reply to Mr Iwan Thomas clarified that the additional £66,000 slippage money the HB received from WG towards equipment costs was for equipment included in the original plan and concerned items such as sensory equipment for the pool, associated equipment for physiotherapists and digital equipment such as water-resistant laptops.

Mrs Rosser reported an additional £1.3 million WG funding had been received for equipping the Clinical Delivery Unit (CDU).

Mrs Raynsford expressed her delight that the hydrotherapy pool is scheduled to open Summer 2025 and thanked the team for working through what had proved to be a longstanding issue.

Ms Pearce reported a plaque has been requested to be erected within the hydrotherapy pool area as recognition of the source of the funds.

Mrs Raynsford requested photographic evidence to be returned to the Pittsburgh Bank to evidence that funds from the J C Williams Trust (Elizabeth Williams Endowment) had been spent appropriately.

**AP/ER**

**Decision:**

The Charitable Funds Committee:

- **TOOK ASSURANCE** of the progress to date on the work that has been carried out to define and agree the operational and maintenance requirements within the Hydrotherapy Pool Procedures Document.

- **CONSIDERED** and **RECOMMENDED FOR APPROVAL** to the Board in its capacity as Corporate Trustee the release of the Charitable Funds totalling £1,543,382 to CCC, once the Collaborative Agreement is finalised and completed legally.
- **NOTED** the Board, in its role as Corporate Trustee of HDdHC, will be asked for their approval of the release of the funds to CCC when the Collaboration Agreement is agreed by both parties.

CFC(25)89 **Integrated Hywel Dda Health Charities Performance Report**

Mr Timothy John presented the new report developed by the Finance Team together with Mrs Llewelyn and welcomed any feedback with regards to the new document.

Mr John reported with regards to expenditure on charitable activities for the nine-month period to the end of December 2024, the total figure was £324,731. In comparison to the same period for 2023 there appears to be a significant shortfall, however as a percentage of incoming resources that expenditure is consistent with a small increase from 47% to 50%.

Mr John stated there was a total of £9,109,892 investments. £6,608,469 in liquid funds with approximately £5 million held on deposit with CCLA.

Mr John updated that Mr Huw Thomas, Ms Daisy Mannifield and he had met to review the amount of liquid funds being invested in CCLA's ethical fund as well as risk and how investments are managed. A paper regarding findings will come to the 17 June CFC exploring the options discussed.

TJ/HT

Mr John reported the benchmarks included in the report in, terms of income generated per pound of spend, for the period to the end of 31 December 2024 was £4.66 compared to a figure of £8.43 for 2023. Mr John stated the 2023 figure had been distorted by a significant legacy. Mr John iterated that he and Mrs Llewelyn had previously met with external health charities, and whilst acknowledging differences existed between comparable charities, that the general health charity benchmark was £4 earned for every £1 spent.

Mrs Llewelyn detailed the content of the annex documents provided.

Mrs Daniel and Mrs Raynsford both agreed they would like to see more representation of the donations and impact made included in the main body of the report and recognised in year, rather than as an annex.

Mrs Lewis sought clarification on what was included in the fundraising costs and what was the benefit derived from that spend.

Ms Tracey Davies reported the £219,547 related to the Fundraising Team and that the support costs were contained in the Statement of Financial Activities (Appendix 1). Support costs of £135,282 were detailed and £60,800 governance costs which included elements of the Fundraising Teams and the costs of the Finance Team.

Mrs Lewellyn, in answer to a query from Mrs Lewis regarding the return on investment on the £219,547, detailed that the fundraising, governance and support costs in the workplan have a portfolio of approximately £1.6 million

of legacy gifts pending receipt, which is actively and proactively managed by the Fundraising Team working closely with the Legal Team. The team is also involved in proactively fundraising as well as stewardship of donors and those fundraising in the charity's name. Giving the example of funeral donations, Mrs Lewellyn reported the financial system currently does not allow attribution of the amount in the donation line to the fundraising team's proactive involvement.

Mrs Llewellyn further clarified to Mrs Lewis that the benchmark figure of £4.66 reported is based on donation, legacy grant and income from other trading activities and excludes investment income.

Mrs Raynsford emphasised the need to ensure the report is as explicit as possible, both for Committee members and members of the public, in terms of providing clarity as to how much of each pound donated is spent on charitable endeavours.

Mrs Raynsford with regards to the charity's financial performance to 31 December 2024, emphasised the need to note the current challenging financial climate, especially for health charities.

Mrs Lewis, with regards to the work plan going forward, questioned whether value for money was being achieved with regards to overheads and whether it was possible to identify the absolute core fixed costs (which is unrelated to income) required to administer the charity and any variable cost overheads.

Mrs Daniel agreed it was important to be completely clear on the costs of the charity and this had been agreed to be progressed over the next 12 months.

Mrs Llewellyn in reply to Mr Rhodri Evans' query regarding the parameters against which to scrutinise, acknowledged the workplan as relatively modest in terms of aspirations for new activities. This is with a view to consolidate and understand why income is declining. However, Mrs Llewellyn reported that donations, with the exclusion of the BGH Chemo Appeal, are on par with the previous two years.

Mrs Llewellyn with regards to scrutiny stated performance reports will continue to come to committee on a quarterly basis acknowledging that those will reflect variability. Mrs Llewellyn outlined that some NHS charities employ a three-year benchmark for scrutiny rather than a quarterly benchmark.

Mrs Llewellyn stated the valid points raised by IM's at CFC today regarding the establishment of fixed and variable costs, as well as alternative ways to present the progress of the work plan and objectives, will be linked back into the quarterly performance reports. **TJ/NL**

Mrs Raynsford acknowledged NHS Charities are moving to between a three- and five-years benchmarking approach.

Mr Thomas emphasised the duty as Corporate Trustees to support the Charitable Funds Team, acknowledging the considerable amount of work they undertake. Mr Thomas stated there was the need to reach a point

whereby the data in the performance report is presented in the correct way to avoid duplication of conversations at CFC.

Mrs Raynsford drew attention to the total fundraising budget for the charity for 2024/2025 as £468,623 and that going forward there was a reduction of 2.8% to the figure of £455,629.

The CFC recommended for approval to the Board, in its capacity as Corporate Trustee, the proposed governance, support and fundraising costs budget for 2025/26, containing the finance team costs of £107,487 and the fundraising budget of £455,629.

### **Decision:**

The Charitable Funds Committee:

- **NOTED** the charity's financial performance to 31 December 2024.
- **NOTED** the progress made on the delivery of the charity's 2024/25 work plan.
- **SCRUTINISED** the charity's work plan for 2025/26 and the priority areas and measures that will be progressed during the next financial year that seek to stabilise and increase the charity's financial performance.
- **CONSIDERED** and **RECOMMENDED FOR APPROVAL** to the Board (in its capacity as Corporate Trustee) the proposed governance, support and fundraising costs budget for 2025/26.

### CFC(25)90 **HDdHC Investment Advisor Update (External CCLA)**

Ms Antonia Cavalier, Client Investment Director, CCLA reported it had been a particularly volatile year with Donald Trump's election, and this had been reflected in that the ethical fund valuation has shown variation in capital value, January 2025 had increased by 4% in comparison to February 2025 which had seen a decrease of 3%. Ms Cavalier reported an expectation of continued volatility, however there shouldn't be a volatility in the annual income from the ethical fund which is increasing by 3% this year.

Ms Cavalier stated with regards to the £5 million in the deposit fund, yield on that will depend on UK Central Bank policy and interest rate changes.

Ms Cavalier reported whilst 2024 had shown strong performance nevertheless performance had lagged on a couple of key benchmarks due to CCLA not investing heavily in 'magnificent seven' stock. Since January 2025, there has been a reversal on the value of the magnificent seven stock. Ms Cavalier reported that CCLA had sold their position in NVIDIA in January 2025, making an 800% return. Ms Cavalier stated whilst CCLA does have exposure to technology, it aims to have a portfolio which is broad and diversified both by asset class and within asset classes.

Ms Cavalier reported that CCLA have reviewed the investment case for all shares held in the portfolio to ensure those holdings still make sense, this has resulted in the sale of holdings in Era Energy and the Hong Kong insurance business AIA. Recent additions to holdings include Intermediate Capital Group and Diasorin.

Ms Cavalier stated that CCLA has reduced its equity position since the end of the year by approximately 5% this is currently held in cash whilst analysis is conducted on where to re-invest that amount.

Ms Cavalier reported the biggest risk going forward are trade war tariffs as ultimately these can be inflationary and could potentially be recessionary.

Ms Cavalier updated that CCLA's benchmarking work in 2025 will continue in areas of mental health, modern slavery and biodiversity losses with a new focus on the effects of air pollution on people's health.

Ms Cavalier, in response to an inquiry from Mrs Raynsford with regards to the possibility of a UK recession, stated that CCLA thinks globally rather than specifically to the UK. Ms Cavalier acknowledged there is a slowing of growth globally and Trump is accelerating that in the US, previous thoughts were for slow growth and an expectation to avoid recession, however thoughts around recession are definitely back. Ms Cavalier explained governments are still paying for pandemic costs with central banks aiming to both balance books and achieve growth. CCLA's 5% reduction in equities is a move to reduce risk, however volatility provides an opportunity to buy names that CCLA currently considers too expensive but will do well in the long term.

Mrs Daniels raised the issue of stability of global markets with regards to the risk register and CCLA's mitigation of risk by reducing equities by 5%. TJ/HT

Mr Timothy John agreed the need to monitor any mitigation actions that CCLA take and that these should filter through to the risk assessment within the HB organisation.

**Decision:** The Charitable Funds Committee **NOTED** the Investment Advisor Update Report and **ADVISED** the Board with regards to the challenging external financial environment.

CFC(25)91 **Interim Review of Charitable Funds Financial Administration and Governance Procedure.**

Mrs Lewellyn reported that following advice from the Corporate Governance Team, a staff consultation had been undertaken on the proposed changes to governance procedure.

Mrs Lewellyn reported that staff had made some very valid suggestions and that the paper was returning for approval of the three proposed amendments and the addition of policies referenced within the financial procedure. Mrs Lewellyn stated that a full review of the financial procedure will be completed before the end of 2025 in Quarter three.

**Decision:**

The Charitable Funds Committee **CONSIDERED** and **APPROVED** the proposed amendments to the Charitable Funds Financial Administration and Governance Procedure outlined within the report.

CFC(25)92 **Review of the Rationalisation of Charitable Funds**

Ms Rhian Davies reported the aim of the rationalisation of charitable funds is to ensure it is easier for people to spend charitable funds. Prior to this

process many funds held small balances or had been incorrectly restricted when the donations were made.

Ms Davies reported that following work in conjunction with Shared Services Legal and Risk, 48 incorrectly restricted funds had been closed and £2 million being reclassified as unrestricted.

Ms Davies clarified that the Charity Commission had not been contacted as part of this rationalisation process as the work undertaken was a correction of funds that had previously been mis-appropriately classified. At a future point should an assessment be made that funds need to be changed more fundamentally, then permission will be sought from the Charity Commission should that be required.

Ms Davies reported that the reclassification element will be discussed with Audit Wales as part of the 2024/2025 accounts.

Mrs Llewelyn clarified to Mrs Raynsford that staff had been wholly supportive of the new structures and an engagement process had taken place. In addition, work had been undertaken to align funds to the correct management structures and teams, renewing interest and understanding regarding the nature and value of those funds. Mrs Llewelyn is working with the new deputy Chief Operating Officer and new operations staff with the work of charitable Fund Managers included in staff inductions.

Mrs Llewelyn reported that the new fund structure enables the development of an expenditure plan for the General Fund, by clearly showing where money is held as well as any gaps within services or corporate teams, therefore enabling a focus on equal access to funding across the organisation. A paper on the expenditure plan will return to CFC 17 June 2025.

NL

Mrs Raynsford iterated the previous desire expressed at CFC, to see charitable funds spent more equitably on primary care and community services, and viewed the rationalisation process, if it provided access to funds more equally, as a positive move.

Mrs Raynsford noted and thanks all for the hard work that had gone into the rationalisation of charitable funds.

**Decision:**

The Charitable Funds Committee:

- **APPROVED** the proposed changes to the funds structure; and
- **NOTED** the correction of previously misclassified legacy funds.

**CFC(25)93 Covering SBAR for CFC Evaluation Reports Items 5.2 & 5.3**

*(Mrs Sian-Marie James left the meeting. Mrs Melanie Carroll-Cliffe joined the meeting. Mrs Gina Beard joined the meeting)*

**Decision:**

The Charitable Funds Committee:

- **NOTED** the content of the evaluation reports attached at Annex 1-2.
- **DISCUSSED** the positive impact of the approved charitable funds expenditure requests.

CFC(25)94 **Update on Expenditure: Phase 2 of the Cancer Psychological Support (CaPS) Project: Psychological Support for People Affected by Cancer and the Cancer Workforce**

Mrs Gina Beard presented the end of project evaluation report.

Mrs Beard reported what had started as a pilot project by HDdUHB has now become a service and part of the Cancer Improvement Plan for Wales with mainstream funding going forward via the annual plan.

Mrs Beard highlighted to Mrs Raynsford the impact of the CaPS programme by citing patient experience feedback from 2019, '*CaPS has literally saved my life.*'

Mrs Daniel congratulated Mrs Beard and the team on the progress made and the process of submission to the annual plan which has resulted in 100% mainstream funding going forward.

Mrs Beard in reply to Mrs Daniels query regarding sharing learning with other organisations, reported that as part of Lead Cancer Nurse Forum in Wales, Mrs Beard has fed back learning since the projects inception in 2018. Mrs Beard has contributed learning from the CaPS project to the Wales wide scoping being undertaken including Macmillan Cancer Support on the psychological needs of patients. Furthermore, Mrs Beard reported, as these are now mainstream services, Health Boards across Wales have been linking in to and learning about the HDdUHB model and patient experience evidence.

Mrs Daniel emphasised to Mrs Beard the need to ensure questions on the patient experience forms, particularly now this is at a national level, are sensitive enough to elicit the right information to improve the service moving forward.

**GB/SD**

Mrs Murphy congratulated Mrs Beard on the outcomes achieved from the £228,000 funding received and further congratulated Mrs Beard on receiving the King's Honours Award and a Bronze Investors in Carers.

**Decision:**

The Charitable Funds Committee:

- **NOTED** the content of the evaluation reports attached at Annex 1-2.
- **DISCUSSED** the positive impact of the approved charitable funds expenditure requests.

CFC(25)95 **Update on Expenditure: 'Heads Up!' - Cancer Services Hair Loss Support**

Mrs Gina Beard presented the mid-term project evaluation report reflecting how the project brings huge value to the charitable funds spend.

Mrs Beard explained how as a Chemotherapy Nurse she had received minimal training regarding counselling about hair loss, the biology of hair loss and simple practical things such as how to look after hair, skin, scalp and other important issues concerning self-esteem and body image. By linking in with Cancer Haircare charity the Heads Up! project was developed.

Mrs Beard reported the project has provided huge value, supporting the local economy by engaging with local hairdressers and resources to provide better support for patients but also by training up core hairdressers to provide an in-hospital service to patients.

Mr Thomas complemented Mrs Beard on a fantastic project and inquired whether there might be an opportunity to extend and expand the project to the wider community where traumatic events have resulted in alopecia. Mrs Beard clarified that chemotherapy related hair loss was quite unique in its biology and in terms of hair growth, however spread and scale had been achieved via Mrs Beard's involvement on the Working Group for the All Wales tender for wig supply which is not cancer specific.

Mrs Beard clarified to Mrs Raynsford that Heads Up did not include paediatrics.

**Decision:**

The Charitable Funds Committee:

- **NOTED** the content of the evaluation reports attached at Annex 1-2.
- **DISCUSSED** the positive impact of the approved charitable funds expenditure requests.

*(Mrs Gina Beard left the meeting.)*

CFC(25)96 **Update on the Arts and Health Capacity Building and Creative Activities for Staff Wellbeing projects**

Mrs Kathryn Lambert presented the update report clarifying there was no request for additional funding, the request was to extend the duration of the funding.

Mrs Lambert reported delays had arisen as a result of numerous challenges, however a Project Manager had now been appointed as a result of a highly competitive process whereby over 100 applications had been received.

Mrs Lambert confirmed that match funding from the Arts Council of Wales had been secured for the first two years of the post.

Mrs Lambert replied to an inquiry from Mr Thomas, that it had been a conscious decision to appoint a job share Project Manager to bring the benefit of two sets of; expertise, art forms, partnership expertise, as well as lived experiences and geographical differences. Additionally, this would enable the appointees to continue with their other creative practices and ensure their long term commitment to the Health Board.

Mrs Lambert confirmed to Mr Thomas one appointee was a resident of the region and the other successful candidate lived just outside in Powys. One of the successful candidates was a Welsh speaker at learner level.

Mrs Raynsford complemented Mrs Lambert on securing Arts Council funding in such a competitive field.

**Decision:**

The Charitable Funds Committee:

**CONSIDERED** and **APPROVED** the request to extend the duration of both charitably funded projects and **NOTED** the achievements to date.

#### CFC(25)97 **Charitable Funds Sub-Committee (CFSC) Update Report**

Ms Carly Hill confirmed that the CFSC Update report covered meetings from 14 January 2025 up to and including 4 March 2025. There were no issues to alert or advise members on from these meetings, there were two matters of assurance regarding expenditure requests that were approved. Ms Hill reported there was one issue of shared learning identified in relation to decontamination concerns regarding a probe that formed part of a charitable funds request and that corrective measures have been implemented through this learning and are detailed in the Update Report. A summary of expenditure was detailed in Appendix 1 of the papers.

Mrs Raynsford expressed concern regarding decontamination incident and requested for this to be picked up via the Quality, Safety and Experience Committee (QSEC).

CH

#### **Decision:**

The Charitable Funds Committee:

**NOTED** the content of this report in respect of the Charitable Funds Sub-Committee's provision of assurance.

#### CFC(25)98 **Charitable Funds Sub-Committee Annual Report**

Ms Hill presented the CFSC Annual Report, there were no issues where concerns were escalated to the CFC. The CFSC had met and been quorate on six occasions as detailed in the report. Ms Hill reported that a Staff Side Representative, Mr Anthony Dean had recently joined the CFSC.

Mrs Hill reported that £390,347.20 of expenditure had been approved by the CFSC during the period 2024/2025.

Mrs Raynsford thanked and complemented Mrs Hill on how the CFSC has strengthened in terms of providing scrutiny.

#### **Decision:**

The Charitable Funds Committee is **NOTED** the Charitable Funds Sub-Committee Annual Report for 2024/25 and **RECEIVED ASSURANCE** in respect of the work that the Sub-Committee has undertaken during 2024/25.

*(Mrs Carly Hill left the meeting.)*

#### CFC(25)99 **Charitable Funds Committee Risk Register**

Mr John reported regarding the stock market volatility risk, which had been raised and requested by Mr Huw Thomas at the December 2024 CFC. Mr John stated that he and Mrs Llewelyn had conducted extensive conversations with the Risk Assurance Team to ensure the correct approach had been adopted. The Risk Assurance Team had deemed stock market volatility risk as an ongoing issue and were happy it is being managed via the Health Board's own internal risk assessment processes. Mr John concluded that there was nothing of significant concern to raise to CFC in that respect.

Mrs Llewelyn reported that the risk of the charity not achieving value for money with regards to maintenance issues, has been addressed by the completed risk assessment form. The risk that was found important to add to the risk register in light of CFC conversations, was the risk concerning being able to sustain the paid fundraising function, in the light of income levels and return on investment. This risk has been added to the Risk Register via Datix and will be reported back to CFC on a quarterly basis.

**Decision:**

The Charitable Funds Committee:

- **REVIEWED** and **SCRUTINISED** the new risks that have been identified and received **ASSURANCE** that all relevant controls and mitigating actions have been identified.
- **DISCUSSED** whether the planned actions will be implemented within stated timescales and will reduce the risks further and/or mitigate the impact if the risk materialises.

This in turn will enable the CFC to provide the necessary **ASSURANCE** to the Board, or otherwise, that HDdUHB is managing any risks effectively.

**CFC(25)100 Charitable Funds Committee Annual Work Programme**

The CFC Committee Annual Work Plan for 2024/2025 was presented to the Committee for information.

**Decision:**

The Charitable Funds Committee **NOTED** the Committee Annual Work Plan for 2024/2025.

**CFC(25)101 MATTERS AND RISKS FOR ESCALATION TO THE BOARD**

**Decision:**

There were no matters and Risks for Escalation to the Board

**CFC(25)102 ANY OTHER BUSINESS**

Mr Iwan Thomas acknowledged this was the last meeting of CFC with Mrs Delyth Raynsford acting as Chair.

Mr Thomas extended his huge thanks to Mrs Raynsford on behalf of everyone for her valued contribution to the CFC Committee over the years.

**Decision:**

All members of CFC extended their thanks and well wishes to Mrs Raynsford on the occasion of her last Chairing of CFC.

**CFC(25)103 DATE AND TIME OF NEXT MEETING**

17 June 2025; 09:30 - 12:15