

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

Date and Time of Meeting:	27 th September 2021, 9.30am
Venue:	Boardroom, Ystwyth Building (via Microsoft Teams)

Present:	Mrs Delyth Raynsford, Independent Member (Committee Chair) (VC) Mr Iwan Thomas, Independent Member (VC) Ms Anna Lewis, Independent Member (VC) Ms Ann Murphy, Independent Member (VC) Mrs Mandy Rayani, Director of Nursing, Quality and Patient Experience (VC) Mr Huw Thomas, Director of Finance (VC)
In Attendance:	Mrs Nicola Llewelyn, Head of Hywel Dda Health Charities (VC) Mrs Jennifer Thomas, Senior Finance Business Partner (VC) Ms Rhian Davies, Assistant Director of Finance (VC) Mr John Evans, Assistant Director, Medical Directorate (VC) Ms Tara Nickerson, Fundraising Manager (VC) Mrs Angharad Davies, Children's Community Lead Nurse (VC) (part) Ms Rebecca McDonald, Paediatric Palliative Care Nurse (VC) (part) Mr Alexander True, Sarasin (VC) (part) Mr Tom Lindsey, Sarasin (VC) (part) Mrs Sarah Bevan, Committee Services Officer (Secretariat)

Agenda Item	INTRODUCTIONS AND APOLOGIES FOR ABSENCE	Action
CFC(21)41	The Chair, Mrs Delyth Raynsford, welcomed all to the meeting. Apologies for absence were received from: <ul style="list-style-type: none"> • Mr Steve Moore, Chief Executive • Miss Maria Battle, Chair 	

CFC(21)42	DECLARATIONS OF INTEREST	
	No declarations of interest were received.	

CFC(21)43	MINUTES OF THE PREVIOUS MEETING HELD ON 30th JUNE 2021	
	RESOLVED - that the minutes of the Charitable Funds Committee meeting held on 30 th June 2021 be APPROVED as an accurate record of proceedings. In terms of any Matters Arising and in relation to the query raised under CF(21)26 regarding how staff could be better informed of the work of the charity and how they could be encouraged to access charitable funds, Mrs Nicola Llewelyn informed Members that interviews for the Communications Officer would take place week commencing 27 th September 2021. In addition, the Fundraising and Finance teams are	

	<p>collaborating on the development of an electronic application form. Mrs Llewelyn informed Members that the charitable funds eligibility criteria is on the agenda for review at today's Committee meeting and that an internal campaign would be delivered shortly to highlight how staff can access and apply for funds.</p> <p>In relation to CF(21)33, Mrs Raynsford sought a further update on the Ceredigion property. Mr Huw Thomas responded that the issue regarding maintenance responsibilities of the property are yet to be resolved. Ms Rhian Davies added that the Finance team are working with the Estates Department and the agreement is currently being finalised.</p> <p>In relation to CF(21)35, Mrs Raynsford enquired as to the take up of the Hywel Dda Health Charities Lottery scheme to date. Mrs Llewelyn informed Members that, since its launch on 20th September 2021, 125 players have signed up to the scheme.</p>	
CFC(21)44	<p>TABLE OF ACTIONS FROM THE MEETING HELD ON 30th JUNE 2021</p> <p>An update was provided on the Table of Actions from the meeting held on 30th June 2021, with confirmation received that all outstanding actions have been progressed.</p>	
CFC(21)45	<p>CHARITABLE FUNDS COMMITTEE TERMS OF REFERENCE</p> <p>Members received the Charitable Funds Committee Terms of Reference, approved by the Board at its meeting on 29th July 2021. Mrs Raynsford informed Members of one recent amendment to the In Attendance section of the membership where reference to the Deputy Director of Operations is to be replaced by reference to the Chair of Charitable Funds Sub-Committee.</p> <p>Ms Ann Murphy enquired as to the staff side representative on the Committee. Mrs Llewelyn advised that Mr Adam Morgan held a dual role as an Independent Member and staff side representative prior to his departure from the Health Board. Mrs Mandy Rayani undertook to liaise with the Director of Workforce and Organisational Development regarding a staff side representative to sit on the Committee.</p> <p>The Committee NOTED the amendment to the In-Attendance section of the membership of the Charitable Funds Committee Terms of Reference.</p>	MR
CFC(21)46	<p>INVESTMENT ADVISOR PERFORMANCE UPDATE</p> <p><i>Mr Alexander True and Mr Tom Lyndsey joined the Committee meeting</i></p> <p>Members were presented with the Investment Advisor Performance Update report. Mr Alexander True highlighted the following points and key risks from the Executive Summary:</p>	

- The combined value of the portfolio is £9million with a strong performance demonstrated in 2020. The short term relative performance for the first half of 2021 has been challenging, however there has been recent improvement with a portfolio increase of 8.2% to date.
- Income distributions were maintained in 2020.
- Risks associated with government bonds being fully valued.
- Global outlook:
 - Concerns around risk to Chinese growth in the short term.
 - Key risk of inflation with unexpected inflationary pressures in the United States, higher raw commodity prices and supply chain bottlenecks which are likely to persist for the next 12-18 months.
 - Monetary policy will remain accommodative for the next 18 months.

Mr Thomas recognised the strong performance and the increase in the value of the portfolio since the end of March 2021. However, as the Hywel Dda Health Charities becomes more active, Mr Thomas enquired whether there is an appropriate reserve strategy in place to identify how much the Health Board should be investing with Sarasin, and any potential alternative options for investment. As an example, Mr Thomas suggested that, should the Hywel Dda Health Charities Lottery scheme be successful, Sarasin could potentially invest this income on behalf of the Health Board.

Mr Thomas added that the Health Board has a focus on social value and enquired how Sarasin can ensure that the companies it invests in are being driven in the direction of providing social value. Mr True responded that Sarasin has passed the Financial Reporting Council (FRC) UK Stewardship Code test, which validates the work undertaken by Sarasin under the social value umbrella.

Mr Thomas highlighted that the Hywel Dda Health Charities' Annual Report presents clear links between investment approach and the Well-being of Future Generations (Wales) Act 2015 and suggested that case studies could be presented to illustrate the positive impact on society. Ms Davies undertook to liaise with Sarasin following the meeting to identify how this impact can be demonstrated in future reporting.

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With regard to peer groups, Mr Iwan Thomas enquired whether there are any comparable key markers within the Health Board's peer groups from which learning can be taken. Mr True drew Members' attention to the presentation slide on strategic asset allocation considerations, providing an overview of the Health Board's reserves over the short, medium and long term. Ms Davies undertook to liaise with Sarasin to translate the high level investment and to explore the development of a reserve strategy for the Health Board.

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	<p>Mrs Raynsford thanked Sarasin representatives for their presentation to the Committee.</p> <p><i>Mr Alexander True and Mr Tom Lindsay left the Committee meeting.</i></p> <p>Mr Thomas advised Members that investment options closer to home exist, such as investment in solar energy, and that it may be useful to liaise with other charities to understand how they invest locally.</p> <p>Mr Thomas also advised Members that alternative investment advisors to Sarasin are available. Ms Davies added that the Health Board's contract with Sarasin is due to expire in December 2021, therefore, the subsequent tender process may be a timely opportunity to consider the successful investment advisor's risk strategy. Members were requested to forward any matters they wish to be considered for inclusion in the tender documentation to Mr Thomas.</p> <p>Regarding the use of an investment advisor, Mrs Llewelyn informed Members that all Wales NHS charities utilise the same approach. However, a different approach has been adopted by some independent English NHS charities, with no corporate trustee, and Mrs Llewelyn advised that case studies could be provided should Mr Thomas require these.</p> <p>Members acknowledged the technicality of the information provided by Sarasin and the use of high level investment advisor language. Mrs Rayani commented that the data presented within the reports needs to be translated in a clear way to the Committee, particularly for those Members without a financial background, in order to understand the content. Mr Thomas undertook to consider this requirement for inclusion within the tender documentation.</p> <p>Mr Thomas reiterated the importance of developing and contributing to social value. Mr Iwan Thomas highlighted the opportunity of investing back into communities, via a clear social value manifesto, which considers the added socioeconomic benefits for communities. This would lead to an improved connection with communities and longer term investment returns. Mrs Rayani agreed that it would be useful to explore the benefit to patients and the population from investment returns, however advised that the Hywel Dda Health Charities team are required to deploy their time to expenditure and supporting fundraising options. Mr Thomas undertook to consider establishing a small informal working group to explore this further. Mrs Llewelyn suggested that Community Foundation Wales would be useful to consider in this context and undertook to pass on their details to Mr Thomas.</p>	<p>All</p> <p>HT</p> <p>HT</p> <p>NLI</p>
	<p>The Committee NOTED the content of the Investment Advisor Performance Update.</p>	

Members were presented with the Charitable Funds Sub-Committee Update Report, providing a summary of the Sub-Committee's activity between 1st June and 10th September 2021.

Mr John Evans highlighted the following key points:

- The Sub-Committee considered and approved in principle a charitable expenditure request for additional charitable funds for the development of an outdoor roof terrace area at Ward 10 in Withybush General Hospital (WGH). Mr Evans informed Members that the driver for the increase in costs could be attributed to the rise in building material costs.
- The Sub-Committee considered and approved a charitable expenditure request for the first year costs for a Band 5 staff nurse in the Intensive Treatment Unit (ITU) at WGH to undertake an MSc in Critical Care at Cardiff University. This would enhance the skills of the existing workforce and support the service to move forward with improvements in quality of care and patient safety. The higher award request could not be funded from Hywel Dda University Health Board's (HDdUHB) higher award allocation as it was not deemed that a higher award of this nature was essential study.
- The Sub-Committee discussed a concern raised by the Sustainable Resources Committee at its meeting on 23rd August 2021 regarding the revenue consequences of charitable expenditure and the ongoing revenue costs associated with all charitable purchases. The Sub-Committee considered this in terms of purchases, not only for medical equipment, to avoid a financial burden on departments and to support revenue budgets going forward. Mr Evans advised that the Sub-Committee felt that staff should not be deterred from making requests as a result of this concern.

In relation to the revenue consequences of charitable expenditure, Mrs Rayani assured Members that having met with Mr Thomas to discuss this issue, a scoping exercise of purchases is currently underway.

In relation to the request for the nurse undertaking an MSc in Critical Care, Ms Murphy enquired whether there is a condition within the bid to pay back funds should the nurse depart the Health Board. Mrs Llewelyn responded that there is a percentage payback clause in place for a number of years following qualification and assured Members that approvals of such requests are in line with the Health Board's Learning and Development Policy.

In terms of the membership of the Sub-Committee, Mrs Raynsford raised an issue of equity as the majority of bids appear to be hospital based. Mr Evans responded that a communications exercise is currently being undertaken, in conjunction with primary and community care, in terms of the messaging to staff regarding charitable funds. Mrs Llewelyn assured Members that this issue had been considered as part

	<p>of the review of the Sub-Committee's terms of reference and that the membership now comprises a more balanced representation of the Health Board. Mrs Raynsford highlighted the importance of geographical representation of the three counties and Mrs Rayani confirmed that further work is to be undertaken regarding community colleague engagement.</p>	
	<p>The Committee NOTED the Charitable Funds Sub-Committee Update Report.</p>	

<p>CFC(21)48</p>	<p>FAMILY COUNSELLOR PAEDIATRIC PALLIATIVE CARE REQUEST</p>	
	<p><i>Mrs Angharad Davies and Ms Rebecca McDonald joined the Committee meeting</i></p> <p>Members received the Family Counsellor Paediatric Palliative Care Request report, requesting the Committee to consider funding a pilot project for a family counsellor over a period of twenty four months.</p> <p>Mrs Angharad Davies informed Members that the project will aim to facilitate and provide psychological support to meet the mental, emotional health and well-being needs of children and young people (CYP) and their families who are living with a life limiting or life threatening diagnosis This is currently being managed on a locality based framework with families facing lengthy waiting times as a result. The team has also witnessed an increase in family crisis, which is manifesting itself within the home environment and having a detrimental impact on children, occasionally leading to self-harm. This has in turn resulted in increased admissions to secondary care and an increased reliance on primary care services.</p> <p>Ms Rebecca McDonald highlighted the benefits of the family counsellor role, including:</p> <ul style="list-style-type: none"> - Integration within the paediatric palliative care team and bereavement service will alleviate the potential stigma associated with receiving psychological support and improve engagement with the service. - Improving the probability of positive health outcomes for CYP and families in the short, medium and long term by enhancing the physical, mental, and emotional health and wellbeing of CYP and their families, symptoms of which have been exacerbated by the COVID-19 pandemic. - Enabling early access to psychological support, which will minimise and/or prevent any anxiety, distress and unnecessary suffering. - Maximising resilience, enhancing coping skills and enabling CYP and families, particularly siblings who are often overlooked, to develop strategies to manage anxiety and stress. This in turn would lead to overall improvements in their quality of life. - Improving research and enhancing the current evidence base. 	

In relation to outcomes measurement, Mr Thomas suggested the team involved link in with the Head of Value Based Healthcare to enable a measured assessment of the impact of this post and to establish a robust dataset for the consideration of future investment.

Ms Murphy enquired about participation with third sector partners, such as Sandy Bears in Pembrokeshire and Mrs Angharad Davies confirmed that the team currently work alongside third sector organisations. Patients and families are signposted to services in the community and charities offering opportunities above and beyond that which the NHS can provide such as days out, complementary therapies, young carer support, and parent and sibling groups.

Mrs Angharad Davies informed Members that there are currently 30 patients on the caseload, which does not include family members.

With regard to the funding streams, Mrs Llewelyn informed Members that the Paediatric Palliative Care team is currently in collaboration with Charitable Funds officers to launch a specific campaign to raise further funds for the service. Substantive funding for this role will also be considered and reflected within the Directorate's Integrated Medium Term Plan (IMTP) as the pilot progresses.

With regard to the evaluation of the pilot, Ms Anna Lewis highlighted the importance of tracking progress with data to ensure that an informed decision process is undertaken at the conclusion of the pilot. Mrs Rayani advised that links with the third sector and a workforce plan should be considered as part of the evaluation of the pilot in order to inform the exit strategy should the funding stream through the IMTP not be available. Mrs Angharad Davies informed Members that the majority of local charities work within strictly defined geographical areas.

Members raised queries regarding the logistics of a part time post to ensure equity of service for the three counties and details of when the post could commence. Mrs Angharad Davies acknowledged that there would be internal and external interest in the post and concluded by advising that the pilot would be an opportunity for the Health Board to be considered the gold standard for paediatric palliative care.

The Committee agreed to support the proposal in principle and requested an update to be presented to the Committee in 12 months' time.

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	<p>The Committee APPROVED IN PRINCIPLE the funding of £55,996 for a part time family counsellor (0.6wte) for a twenty four month pilot project, to facilitate and provide psychological support to meet the mental and emotional health needs and well-being of children and young people and their families living with a life limiting or life threatening diagnosis, subject to establishing links with the Value Based Healthcare team and the development of a workforce plan and exit strategy as part of the evaluation process.</p>	
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<p>CFC(21)49</p>	<p>CHARITABLE FUNDS RISK REGISTER</p> <p>Members received the Charitable Funds Risk Register report, outlining the two current risks in the domain of charitable funds.</p> <p><i>Risk 743: Risk of reputational damage and decrease in charitable giving if the Health Board (HB) becomes implicated by default, in events outside of the HB's control, due to association, or perceived association with any external charitable organisations.</i> Members were reminded that the Committee received an update on this risk at its meeting on 9th March 2021. As the risk score of 6 was within the Health Board's risk tolerance level of 8, the Committee agreed that Risk 743 could be closed and that a risk-based approach be undertaken to manage any future issues that may arise relating to the risk at an operational level with appropriate management actions.</p> <p>Mrs Llewelyn assured Members that all actions required to mitigate the risk have been undertaken and recommended that this risk be closed, and that a risk-based approach is undertaken to manage any future issues that may arise relating to the risk, with appropriate management actions being implemented at an operational level. Mrs Llewelyn advised that recent discussions with the Head of Hywel Dda Health Charities, Head of Assurance and Risk, Local Counter Fraud Specialist and Head of Corporate and Partnership Governance, concluded that whilst the existing control measures identified were adequate, utilising a risk based approach, there would be further awareness raising on key HDdUHB policies and procedures, e.g. Standards of Behaviour Policy and Charitable Funds Financial Administration and Governance Procedure, to ensure that staff across HDdUHB understand their roles and responsibilities regarding declarations of interest and managing any potential conflicts of interest, in addition to the operations and fraud considerations of external charities operating across the HDdUHB.</p> <p><i>Risk 1130: Failure to increase charitable funds income and expenditure.</i> Members were reminded that this new risk associated with the delivery of the Hywel Dda Health Charities planning objective for 2021/22 (PO 2E) was presented to Committee at its meeting on 30th June 2021 with a risk score of 9. Members were assured by the actions implemented to mitigate the new risk and agreed that the risk could be managed at directorate level, with any concerns escalated to the Committee as and when required.</p>	
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	<p>The Committee:</p> <ul style="list-style-type: none"> • REVIEWED and SCRUTINISED Risk 743 and 1130 to seek assurance that all relevant controls and mitigating actions have been identified. • DISCUSSED and AGREED that Risk 743 could be closed and that a risk-based approach be undertaken to manage any future issues that may arise relating to the risk at an operational level with appropriate management actions. 	
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CFC(21)50	APPROVAL OF CHARITABLE FUNDS EXPENDITURE OVER £50,000	
	There was no charitable funds expenditure over £50,000 requiring approval.	

CFC(21)51	REVIEW OF CHARITABLE FUNDS EXPENDITURE ELIGIBILITY CRITERIA	
	<p>Members received the Review of Charitable Funds Expenditure Eligibility Criteria report, proposing amendments to the Hywel Dda Health Charities' charitable funds expenditure eligibility criteria. It was noted that the purpose of the criteria is to aid colleagues on what can be considered appropriate when applying for charitable funds.</p> <p>Mrs Llewelyn informed Members that a requirement of the Hywel Dda Health Charities' planning objective 2E is to review charitable funds expenditure guidance for staff and fund approvers. As the current version of the Hywel Dda Health Charities' charitable funds expenditure eligibility criteria had last been reviewed in March 2018, it is considered timely that a review is undertaken of the charitable fund's expenditure eligibility criteria.</p> <p>The eligibility criteria provides charitable funds approvers and HDdUHB staff with guidance on the type of charitable expenditure that the charity is able to support, to ensure that all expenditure is in line with the charity's objectives and carried out for the public benefit.</p> <p>Although the intended beneficiaries of NHS charities are NHS patients, NHS charitable funds can be applied for the benefit of NHS staff "as long as a direct benefit to staff translates demonstrably to relief of sickness of NHS patients". The proposed amendments to the eligibility criteria provide clarification on what is considered eligible and ineligible expenditure relating to staff benefit to ensure that the intended charitable outcome is not too remote from the immediate and direct effect of the expenditure on NHS patients.</p> <p>The Committee approved the proposed amendments to the Charitable Funds Expenditure Eligibility Criteria.</p>	

The Committee **NOTED** and **APPROVED** the proposed amendments to the Hywel Dda Health Charities' Charitable Funds Expenditure Eligibility Criteria.

CFC(21)52 INTEGRATED HYWEL DDA HEALTH CHARITIES PERFORMANCE REPORT

Members were presented with the Integrated Hywel Dda Health Charities Performance Report, providing an update on the charity's performance and position as at 31st July 2021.

Mrs Thomas highlighted the following key financial performance considerations:

- Overall increase of £97,000 of the net assets of the charity and a £10.6million value of total funds held.
- Overall income from donations, grants and legacies has decreased by 72.9% in comparison to the same period the previous financial year. Ms Thomas assured Members that increases in legacy are expected during the current financial year and that mitigating actions are in place to increase income levels, e.g. the Hywel Dda Health Charities Lottery and the Bronglais General Hospital (BGH) Chemotherapy Day Unit capital fundraising appeal.
- Work is currently being undertaken to identify what is eligible for charitable fund bids and target those areas to increase expenditure.
- The development of an electronic application form.
- Close working relationships continue to be established with Finance Business Partners to encourage appropriate expenditure and to support their client departments to deploy charitable funding effectively in areas where it can make the most difference.
- No risks identified for governance and support costs.

Mrs Llewelyn informed Members of the following shortlisted proposals bidding for the further allocation of £96,804 from the NHS Charities Together Stage 2 Community Partnership Grants, for which Hywel Dda Health Charities is eligible to apply:

- The Safeguarding team's proposal for an independent domestic violence advocate, hosted by third sector organisations, for WGH and BGH Accident and Emergency departments to provide follow up contact and support for staff responding to instances of domestic violence at a cost of £63,000 over two years. Mrs Llewelyn assured Members that the proposal meets the three priorities outlined in section 4.1 of the report. Mrs Raynsford enquired as to the funding source for provision in Glangwili General Hospital (GGH) and Prince Philip Hospital (PPH), to which Mrs Llewelyn responded that this is provided by primary care cluster funding that could not stretch to other areas. Mrs

	<p>Rayani informed Members that the Carmarthen model is currently being funded as a pilot scheme and advised that, due to the recent increase in domestic violence, this additionality is required in WGH and BGH whilst the pilot is running, and its benefit can be realised.</p> <ul style="list-style-type: none"> • The Nutrition and Dietetics team’s proposal to develop a pilot to support the Dyfed Drug and Alcohol Service (DDAS) by providing training to the service, ensuring they can support service users with nutrition and eating habits, with the view to preventing admissions or referrals into services already under extreme pressure. The proposal is for a two year pilot, costing £21,000, covering all three locality areas. • Funding is sought for the aforementioned Paediatric Palliative Care Family Counsellor proposal, with the view that money from the NHS Charities Together funding stream could fund 6-12 months of the two year bid and therefore lessen the burden on charitable funds. <p>In terms of the decrease in income from donations, grants and legacies, Mrs Raynsford enquired whether this represents a national trend which Mrs Jennifer Thomas confirmed is the case. Mr Thomas advised of local competition from other charities and provided the example of charities supporting the mental health of farming and rural communities. Mrs Llewelyn confirmed that all NHS charities are in a similar position, experiencing similar reductions in income. NHS charities received substantial support last year, which resulted in local charities taking a backseat, allowing them time to reconsolidate and return with a new focus and increased momentum of their appeals. Mrs Llewelyn emphasised the importance of the Communications team in promoting and raising awareness of the Hywel Dda Health Charities.</p> <p><i>Mr Iwan Thomas left the Committee meeting</i></p> <p>In conclusion, Members were requested to confirm their support of the proposals, particularly the additional funding sought for the Paediatric Palliative Care Family Counsellor bid.</p>	
	<p>The Committee:</p> <ul style="list-style-type: none"> • NOTED the content of the Integrated Hywel Dda Health Charities Performance Report; • RECEIVED ASSURANCE on the charity’s performance; • SUPPORTED the three proposals bidding for the further allocation of £96,804 from the NHS Charities Together Stage 2 Community Partnership Grants. 	
<p>CFC(21)53</p>	<p>DRAFT ANNUAL REPORT AND ACCOUNTS 2020/21</p> <p>Members received the Draft Annual Report and Accounts 2020/21, providing an overview of the Hywel Dda Health Charities accounts. Mrs Thomas informed Members that the final accounts are currently being audited by Audit Wales and would be available for presentation to the Committee at its meeting on 30th November 2021.</p>	

	<p>Mrs Thomas provided a brief overview of the statement of financial activities in comparison to the previous year, notably the increase in legacies received within the acute settings and in Ty Bryngwyn and Minafon Surgery. Mrs Thomas informed Members that expenditure on charitable activities has decreased, primarily as a result of the completion of several capital schemes within 2019/20. Mrs Thomas further informed Members of the growth in investments in year and increases in cash balances at year end, due to higher than average donations and grants received during the latter part of the year, resulting in an overall increase of £2.6 million of net assets from the previous year.</p> <p>Mrs Raynsford requested that the final Annual Report and Accounts 2020/21 is moved up the agenda for the next Committee meeting to ensure that sufficient time and attention is afforded to the documents.</p> <p>Ms Murphy commended the clarity of the report in illustrating the positive impact of the Hywel Dda Health Charities.</p> <p>Mrs Rayani drew Members attention to pages 36-42 of the report, highlighting the numerous funding streams available, and the resulting challenge in terms of managing expenditure, and assured Members that this would be streamlined going forward.</p>	
	The Committee NOTED the Draft Annual Report and Accounts 2020/21.	
CFC(21)54	CHARITABLE FUNDS COMMITTEE WORK PROGRAMME 2021/22	
	The Charitable Funds Committee Work Programme for 2021/22 was received for information.	
	The Committee NOTED the Charitable Funds Committee Work Programme for 2021/22.	
CFC(21)55	MINUTES FROM THE CORPORATE TRUSTEE MEETING HELD ON 29TH JULY 2021	
	Members received the unapproved minutes from the Corporate Trustee meeting held on 29 th July 2021 for information.	
	The Committee NOTED the unapproved minutes from the Corporate Trustee meeting held on 29 th July 2021.	
CFC(21)56	REFLECTIVE SUMMARY OF MEETING	
	<p>Mrs Rayani provided a reflective summary of the meeting, highlighting the following:</p> <ul style="list-style-type: none"> - Charitable Funds Committee Terms of Reference: Mrs Rayani undertook to speak to the Director of Workforce and Organisational Development regarding staff side representation within the membership. 	

	<p>Family Counsellor Paediatric Palliative Care Request: Committee approval of the proposal in principle, subject to establishing links with the Value Based Healthcare team and the development of a workforce plan and exit strategy as part of the evaluation process, and subject to the outcome of the bid to the NHS Charities Together Stage 2 Community Partnership Grants funding stream to fund 6-12 months of the two year pilot.</p> <ul style="list-style-type: none"> - Investment Advisor Performance Update: the upcoming tender process for the Hywel Dda Health Charities' investment advisor provision. - Risk Register: Committee approval of the closure of Risk 743, subject to monitoring at a departmental level. - Integrated Hywel Dda Health Charities' Performance Report: Committee support of the three bids for the NHS Charities Together Stage 2 Community Partnership Grants. - Draft Annual Report and Accounts 2020/21: The Committee received the Draft Annual Report and Accounts 2020/21, prior to presentation of the Final Annual Report and Accounts 2020/21 at the next Committee meeting. 	
CFC(21)57	<p>ANY OTHER BUSINESS</p> <p>Ms Tara Nickerson informed Members that the Free Will campaign commencing on 1st October 2021 would be offering fifty free wills to staff and members of the public and will contribute to increasing the legacy income of the Hywel Dda Health Charities.</p>	
CFC(21)58	<p>DATE AND TIME OF NEXT MEETING</p> <p>30th November 2021, 9.30am – 12 noon.</p>	