

## PWYLLGOR CRONFA ELUSENNOL CHARITABLE FUNDS COMMITTEE

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	06 June 2022
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Charitable Funds Sub-Committee Update Report
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Mandy Rayani, Director of Nursing, Quality and Patient Experience
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	John Evans, Assistant Director Medical Directorate and Chair of the Charitable Funds Sub-Committee

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

Er Sicrwydd/For Assurance

### ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

This report provides the Charitable Funds Committee (CFC) with a summary of the Charitable Funds Sub-Committee's (CFSC) activity between 10<sup>th</sup> January and 3<sup>rd</sup> May 2022.

#### Cefndir / Background

The CFSC, in respect of its provision of assurance to the CFC, is responsible for providing quarterly written updates on the following areas of activity:

- Expenditure approved within the Sub-Committee's delegated limits of approval.
- Key decisions.
- 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.

This report provides a summary of the CFSC's activity and provides an opportunity for the CFC to review the activity and discuss any key decisions taken and any matters arising, which may require CFC consideration or approval.

#### Asesiad / Assessment

The CFSC met on two occasions during this reporting period; 7<sup>th</sup> March and 3<sup>rd</sup> May 2022. The Sub-Committee was quorate at both meetings.

#### **1. Expenditure Approved within the CFSC's Delegated Limits of Approval**

The following charitable expenditure requests were considered and approved within the CFSC delegated approval limits during this reporting period:

Meeting	Item	Comments	Decision
07-03-2022	CF02208  Sonosite Ultrasound System  Glangwili General Hospital (GGH) Unscheduled Care (Renal Unit)  £24,619 (VAT exempt)	The GGH Renal Unit is currently using an old ultrasound scanner on loan from Morrision Hospital, which has failed to function on a number of occasions. A new ultrasound scanner will improve the patient experience, enable a far better service to be delivered locally and minimise the amount of travelling time to Morrision Hospital for chronic and acute dialysis patients. The scanner will enable the clinical teams to maintain good vascular access for treatments, which is the single most important variable that determines the outcomes in dialysis patients. Poor vascular access results in poor dialysis, which in turn leads to poor quality of life, an increase in mortality, and an increase in inpatient admissions. The request was considered eligible for charitable funds as it demonstrated significant improvements to the patient experience.	APPROVED IN PRINCIPLE subject to a revised application being submitted to include the costs of an additional 2- year warranty and maintenance contract
03-05-2022	CF02203  MGPS 1000  Withybush General Hospital (WGH) Pharmacy  £17,995 (VAT exempt)	Request for replacement medical gas analysis equipment. The new equipment would replace a number of individual pieces of equipment that are close to being decommissioned or in need of replacement having been used for around 15 years. The equipment would provide the most modern and technologically advanced testing of the purity of medical gases used on inpatients throughout the Health Board. Since 2020, the service has experienced a 200% increase in workload and demand. The new equipment enables a more rapid testing service and will reduce the time staff are required to spend at each testing site. It will also be more cost effective and provide significant revenue cost savings due to the cost of consumables and annual maintenance charges. The request was considered eligible for charitable funds as it demonstrated significant cost savings as well as improvements to the patient experience.	APPROVED IN PRINCIPLE subject to confirmation received from Estates colleagues that this equipment cannot be funded from the Fire Improvement Programme
03-05-2022	CF02224  x 4 MAC VU360 electrocardio gram (ECG) machines  WGH Unscheduled Care  £32,200 (VAT exempt)	Request to provide the Same Day Emergency Care Unit (SDEC), Adult Clinical Decisions Unit (ACDU) and Wards 9 and 12 at WGH with their own dedicated ECG machines. These areas are currently having to share with other services resulting in delays with diagnosis and treatment for patients. An ECG assists physicians and other healthcare professionals to determine a patient's heart rate and rhythm to identify any acute or underlying pathology issues. Dedicated ECG machines would provide a more efficient service, reduce delays in diagnosis and treatment for patients, and improve the patient pathway and experience. The request was considered eligible for charitable funds as it demonstrated significant improvements to the patient experience.	APPROVED
03-05-2022	CF02230  Giraffe Omnibed	Request to purchase a replacement incubator at GGH SCBU. The unit has the ability to care for 4 babies requiring high dependency care and 1 baby requiring intensive stabilisation. There are currently 5	APPROVED

Care Station / Incubator	Omnibed incubators available in the high dependency room, however one of the existing incubators is faulty and cannot be repaired. The incubator is required to assist with the treatment of both sick and premature babies. The new incubator will provide additional functionality such as improved access, overhead heat to assist with maintaining body temperature, and the ability to be used as an 'open cot' to assist with baby cooling during hypoxic episodes. The request was considered eligible for charitable funds as it demonstrated significant improvements to the patient experience.
Special Care Baby Unit (SCBU) GGH	
£33,120.34 (VAT exempt)	

## 2. Key Decisions

No key decisions were made by the CFSC during this reporting period.

## 3. Chair's Actions Undertaken Outside of the Cycle of CFSC Meetings

The following charitable expenditure requests were considered and approved via Chair's Action during this reporting period, taking place outside of the cycle of CFSC meetings:

Date	Item	Comments	Decision
07-01-2022	CF02171  EasyOne Pro LAB DLCO Lung Function Testing equipment  WGH Unscheduled Care & Pembrokeshire Community Services  £28,978.00 inc VAT	Lung function testing is essential to support rapid diagnosis of lung disease in a predominantly outpatient setting and can also be used for inpatients, particularly when the unit is portable.  Funding would provide a regular respiratory clinic at South Pembrokeshire Hospital (SPH). This level of service has not existed at SPH before and would enable an improved local patient service and minimise the amount of travelling for Pembrokeshire patients. It will also enable rapid diagnosis and decision making without the need for patients to visit hospital twice.	APPROVED  Ratified by CFSC on 07-03-2022
07-01-2022	CF02177  Cardiovascular Disease Management course  WGH Unscheduled Care  £900.00	A six-month multi professional module to further develop knowledge and skills of a Cardiac Rehabilitation Nurse to facilitate the holistic management of patients in primary care who are at risk of developing or have established cardiovascular disease. The course will be delivered via webinar and self-study.  The Higher Award process does not accept requests from other education training programmes other than Swansea University. Given that this course is suitable for the role, it was decided that charitable funds was the most appropriate route of funding.	APPROVED  Ratified by CFSC on 07-03-2022

## 4. Key Risks and Issues/Matters of Concern

No key risks or issues/matters of concern were considered by the CFSC during this reporting period.

## 5. Matters Requiring CFC Consideration or Approval

The following matters were considered by the CFSC during this reporting period, for noting by the CFC:

- Discretionary Capital Programme (DCP) – the Head of Capital Planning, Capital Programme Manager and Head of Hywel Dda Health Charities met to discuss capital priorities that could potentially be supported from charitable funds during 2022/23. It was agreed that details of current unfunded capital bids are to be mapped against available charitable funds for discussion with the relevant fund managers. It was noted that the majority of charitable expenditure requests that meet the capital threshold do not appear on the capital list. However, they are submitted for consideration from charitable funds by fund managers rather than submitting for capital funding. It was also noted that the DCP scoring matrix focused on different priorities than those of the Health Board's charitable funds, which would be a key consideration during the mapping process in relation to eligibility for charitable funds. It was acknowledged that these conversations would continue during 2022/23 with capital and operations colleagues and that any relevant updates would be provided to the Sub-Committee if appropriate.
- Revenue consequences of charitable purchases – the CFSC Chair provided assurance to Members that the Sub-Committee's concerns regarding the revenue consequences of charitable purchases were highlighted at the March 2022 CFC meeting. Members were informed that Rhian Davies, Assistant Director of Finance, would establish a process within the Finance Business Partnering team to highlight and capture any revenue consequences to HDdUHB at the time a charitable funds purchase is made. Progress on this action would be reported directly to the CFC and subsequently to the Sub-Committee at its next meeting.
- The Sub-Committee work plan for 2022/23 was shared with Members for information.

## 6. Revisions to the CFSC's Terms of Reference

The annual review of the Sub-Committee's Terms of Reference, attached at Appendix 1, was undertaken at the 7<sup>th</sup> March 2022 meeting with the following amendments suggested for approval by the CFC:

- Membership: Replace the Director of Nursing, Quality & Patient Experience with the Assistant Director of Nursing Mental Health and Learning Disabilities.
- Removing 'all' from section 5.1.2. This is due to the fact that not all requests over £50,000 are able to be considered by the CFSC prior to submission to the CFC due to the scheduling of meetings:

*"Considering and recommending for approval all requests for expenditure over £50,000 against named charitable funds, within the scheme of delegation for authorisation of charitable funds expenditure."*

## 7. Requests for the Establishment of New Charitable Funds

No requests for the establishment of new charitable funds were received during this reporting period.

## 8. CFSC Meeting Dates for 2022/23

Charitable Funds Sub-Committee	Update report to Charitable Funds Committee
5 <sup>th</sup> July 2022	26 <sup>th</sup> September 2022
6 <sup>th</sup> September 2022	26 <sup>th</sup> September 2022
8 <sup>th</sup> November 2022	5 <sup>th</sup> December 2022
17 <sup>th</sup> January 2023	14 <sup>th</sup> March 2023
7 <sup>th</sup> March 202	June 2023

### Argymhelliad / Recommendation

The Charitable Funds Committee is requested to **NOTE** the content of this report in respect of the Charitable Funds Sub-Committee's provision of assurance.

The Charitable Funds Committee is also requested to **APPROVE** the proposed changes to the Sub-Committee's Terms of Reference.

### **Amcanion: (rhaid cwblhau)**

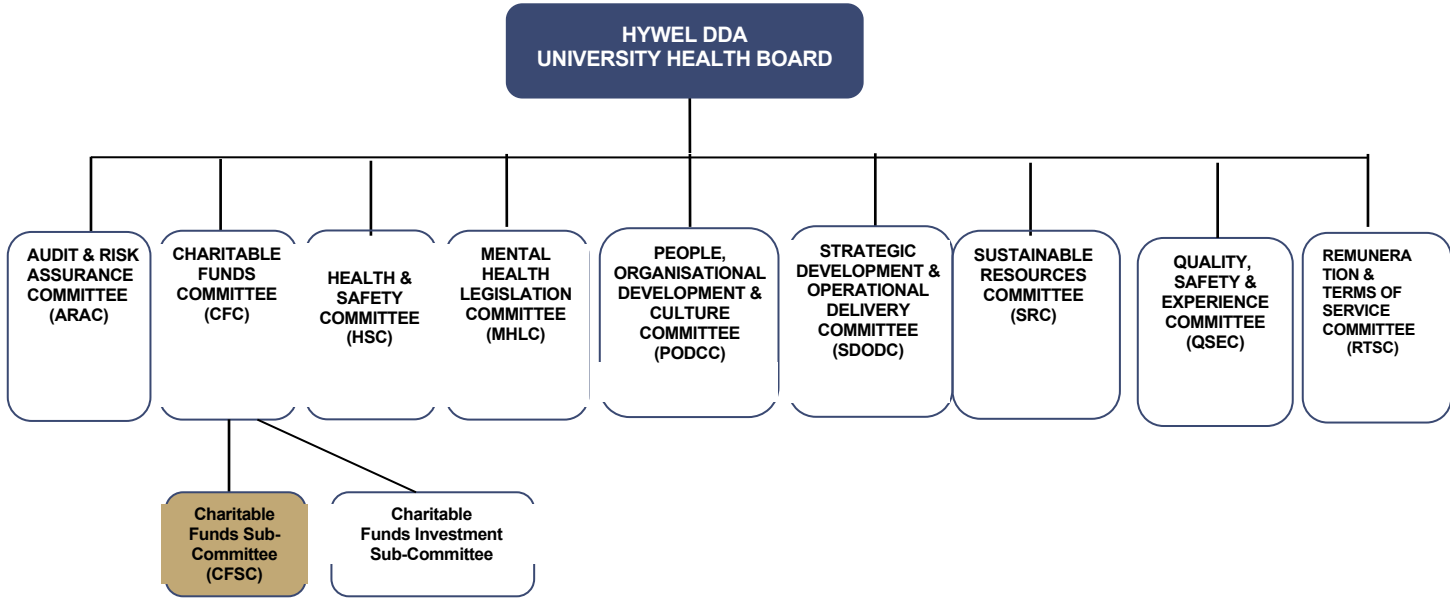
#### **Objectives: (must be completed)**

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	<p><u>Charitable Funds Committee</u> 12.6 The Committee shall establish the Charitable Funds Sub-Committee to ensure that the UHB's policies and procedures are followed in relation to specialist designated and restricted funds.</p> <p><u>Charitable Funds Sub-Committee</u> 10.4.1 The Sub-Committee Chair, supported by the Sub-Committee Secretary, shall report formally, regularly and on a timely basis to the Charitable Funds Committee on the Sub-Committee's activities. This includes the submission of a Sub-Committee update report as well as the presentation of an Annual Report within 6 weeks of the financial year.</p>
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable

Amcanion Cynllunio Planning Objectives	2E Evidencing impact of charitable funds
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019</a>	10. Not Applicable

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Provide independent oversight and ensure correct controls and governance arrangements are in place to provide assurance that charitable funds within HDdUHB are appropriately managed.
Rhestr Termiau: Glossary of Terms:	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.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Cronfa Elusennol: Parties / Committees consulted prior to Charitable Funds Committee:	Not applicable

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	Provide independent oversight and ensure correct controls and governance arrangements are in place to provide assurance that charitable funds within HDdUHB are appropriately managed.
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	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.
<b>Gweithlu: Workforce:</b>	Not applicable
<b>Risg: Risk:</b>	Reputational risk if charitable funds are not appropriately managed and governance controls are not followed.
<b>Cyfreithiol: Legal:</b>	Not applicable
<b>Enw Da: Reputational:</b>	Reputational risk if charitable funds are not properly managed and governance controls are not followed correctly.
<b>Gyfrinachedd: Privacy:</b>	Not applicable
<b>Cydraddoldeb: Equality:</b>	Equity of access by ensuring decisions made benefit patients and staff within HDdUHB.



## TERMS OF REFERENCE

### CHARITABLE FUNDS SUB-COMMITTEE

Version	Issued to:	Date	Comments
V1	Charitable Funds Committee	09.03.17	Approved
V2	Charitable Funds Committee	15.03.18	Approved
V3	Charitable Funds Sub-Committee	02.09.19	Approved
V4	Charitable Funds Committee	15.09.20	Approved
V5	Charitable Funds Sub-Committee	10.05.21	Approved
V6	Charitable Funds Committee	30.06.21	Approved
V7	Charitable Funds Sub-Committee	07.03.22	Approved
V7	Charitable Funds Committee	06.06.22	

## CHARITABLE FUNDS SUB-COMMITTEE

### 1. Constitution

- 1.1 The Charitable Funds Sub-Committee (the Sub-Committee) has been established as a Sub-Committee of the Charitable Funds Committee and constituted from 9<sup>th</sup> March 2017.
- 1.2 The Charitable Funds Sub-Committee consolidates the previous sub-committee functions held by:
- Acute Services Charitable Funds Sub-Committee
  - Carmarthenshire Community Charitable Funds Sub-Committee
  - Ceredigion Community Charitable Funds Sub-Committee
  - Pembrokeshire Community Charitable Funds Sub-Committee
  - Mental Health & LD Charitable Funds Sub-Committee

### 2. Membership

- 2.1 The membership of the Charitable Funds Sub-Committee shall comprise:

Title
Director of Nursing, Quality & Patient Experience
Assistant Director of Nursing, Mental Health and Learning Disabilities
Deputy Director of Operations
Senior Finance Business Partner (Accounting & Statutory and Reporting)
Assistant Director Medical Directorate (Chair)
Assistant Director of Therapies and Health Science
Assistant Director of Organisation Development (Vice-Chair)
Head of Capital Planning
Assistant Director of Primary Care
Assistant Director Strategic Partnerships, Diversity and Inclusion
Assistant Director Legal and Patient Support
<b>In attendance:</b>
Head of Hywel Dda Health Charities
Finance Business Partner (Accounting & Statutory and Reporting)
Assistant Finance Business Partner (Accounting & Statutory and Reporting)

- 2.2. Membership of the Sub-Committee shall be reviewed on an annual basis.

### 3. Quorum and Attendance

- 3.1 A quorum shall consist of no less than one third of the membership and must include as a minimum the Chair or Vice-Chair of the Sub-Committee.



- 3.2 The membership of the Sub-Committee must take into account the balance of skills and expertise necessary to deliver the Sub-Committee's remit and subject to any specific requirements or directions made by the University Health Board or Welsh Government.
- 3.3 Any senior officer of the University Health Board or from a 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.
- 3.4 The Sub-Committee may also co-opt additional independent external 'experts' from outside the organisation to contribute to specialised areas of discussion.
- 3.5 Should any 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.
- 3.6 The Chair of the Charitable Funds Sub-Committee shall have reasonable access to Executive Directors and other relevant senior staff.
- 3.7 The Sub-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.

#### **4. Purpose**

- 4.1 The purpose of the Charitable Funds Sub-Committee is to ensure that the UHB's policies and procedures are followed in relation to the expenditure of our named charitable funds.
- 4.2 In particular to:
  - 4.2.1 Apply the UHB's charitable funds within the budget, priorities and spending criteria determined by the UHB as corporate trustee, in line with the charity's scheme of delegation, and consistent with the requirements of the Charities Act 2011 (or any modification of these acts).
  - 4.2.2 Implement appropriate policies and procedures to ensure that all expenditure is reasonable, clinically and ethically appropriate.
  - 4.2.3 Agree issues to be escalated to the Charitable Funds Committee with recommendations for action.

#### **5. Operational Responsibilities**

- 5.1 The Sub-Committee will, in respect of its provision of assurance to the Charitable Funds Committee, also be responsible for:
  - 5.1.1 Providing scrutiny with a view to approving or rejecting all requests for expenditure over £10,000 and under £50,000 against named charitable funds, within the scheme of delegation for authorisation of charitable

funds expenditure.

- 5.1.2 Considering and recommending for approval all requests for expenditure over £50,000 against named charitable funds, within the scheme of delegation for authorisation of charitable funds expenditure.
- 5.1.3 Providing scrutiny and onward assurance to the Charitable Funds Committee on charitable expenditure.
- 5.1.4 Providing scrutiny with a view to approving or rejecting all unusual or novel expenditure requests of any value, and any expenditure requests resulting in ongoing charitable funds commitment, prior to Charitable Funds Committee consideration.
- 5.1.5 Considering with a view to approving or rejecting all requests for the establishment of new charitable funds.
- 5.1.6 Providing quarterly written updates to the Charitable Funds Committee.
- 5.2 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:
  - 5.2.1 Expenditure approved within the Sub-Committee's delegated limits of approval
  - 5.2.2 Key decisions.
  - 5.2.3 Chair's actions undertaken outside of the cycle of Sub-Committee meetings.
  - 5.2.4 Key risks and issues/matters of concern.
  - 5.2.5 Matters requiring Charitable Funds Committee consideration or approval
  - 5.2.6 Any revisions to the Sub-Committee's Terms of Reference.

## **6. Agenda and Papers**

- 6.1 The Sub-Committee Secretary will agree the agenda with the Chair at least three weeks before the meeting date.
- 6.2 The agenda will be based around the Sub-Committee work plan, identified risks matters arising from previous meetings, issues emerging throughout the year and requests from Sub-Committee members. Following approval, the agenda and timetable for papers will be circulated to all Sub-Committee members.
- 6.3 All papers should have relevant sign off before being submitted to the Sub-

Committee Secretary.

- 6.4 The agenda and papers for meetings will be distributed seven days in advance of the meeting.
- 6.5 The minutes and action log will be circulated to members within five days to check the accuracy.
- 6.6 Members must forward amendments to the Sub-Committee secretary within the next seven days. The Sub-Committee secretary will then forward the final version to the Sub-Committee Chair for approval.

## **7. Frequency of Meetings**

- 7.1 The Sub-Committee will meet on a bi-monthly basis and shall agree an annual schedule of meetings. Additional meetings will be arranged as determined by the Chair of the Sub-Committee in discussion with the Sub-Committee Lead.
- 7.2 The Chair of the Sub-Committee, in discussion with the Sub-Committee Secretary, shall determine the time and the place of meetings of the Sub-Committee and procedures of such meetings.

## **8. Chair's Actions**

- 8.1 There may be circumstances where decisions which would normally be made by the Sub-Committee need to be taken between scheduled meetings, and it is not practicable to call a meeting of the Sub-Committee. In these circumstances the Sub-Committee Chair may deal with these matters on behalf of the Sub-Committee as an exception rather than the norm.
- 8.2 The Sub-Committee Chair must ensure that any such action is formally recorded and reported to the next meeting of the Sub-Committee for consideration and ratification.
- 8.3 Chair's actions may not be taken where the Sub-Committee Chair has a personal or business interest in an urgent matter requiring decision.

## **9. Accountability, Responsibility and Authority**

- 9.1 The Sub-Committee Secretary be accountable to the Charitable Funds Committee for its performance in exercising the functions set out in these terms of reference.
- 9.2 The Sub-Committee shall embed the University Health Board and Hywel Dda Health Charities' vision, corporate standards, priorities and requirements, e.g. equality and human rights, through the conduct of its business.
- 9.3 The requirements for the conduct of business as set out in the University Health Board's Standing Orders are equally applicable to the operation of the

Sub-Committee.

## 10. Reporting

- 10.1 The Sub-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 Board through the:
- 10.1.1 joint planning and co-ordination of Board and Committee business;
  - 10.1.2 sharing of information.
- 10.2 In doing so, the Sub-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.
- 10.3 The Sub-Committee may establish groups or task and finish groups to carry out on its behalf specific aspects of Sub-Committee business. The Sub-Committee will receive written update reports following each meeting which details the business undertaken on its behalf.
- 10.4 The Sub-Committee Chair, supported by the Sub-Committee Secretary, shall:
- 10.4.1 Report formally, regularly and on a timely basis to the Charitable Funds Committee on the Sub-Committee's activities. This includes the submission of a Sub-Committee update report as well as the presentation of an Annual Report within 6 weeks of the financial year.
  - 10.4.2 Bring to the Charitable Funds Committee's specific attention any significant matter under consideration by the Sub-Committee.
  - 10.4.3 Ensure appropriate escalation arrangements are in place to alert the University Health Board Chair, Chief Executive or Chairs of other relevant Committees/Sub Committees of any urgent/critical matters that may compromise patient care and affect the operation and/or reputation of the University Health Board.

## 11. Secretarial Support

- 11.1 The Sub-Committee Secretary shall be determined by the Sub-Committee lead.

## 12. Review Date

- 12.1 These terms of reference and operating arrangements shall be reviewed on at least an annual basis by the Sub-Committee for approval by the Charitable Funds Committee.