

Bundle Charitable Funds Committee 4 October 2019

Meeting to be held on 4.10.19 in the Board Room, Carlton Court, St Asaph Business Park

Agenda attachments

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- 2 CF19/32 Minutes of the previous meeting held on 20th June 2018:
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- 4 CF19/32.2 Matters Arising and Summary Action Plan
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- 5 CF19/33 Charitable Funds Accounts 2018/19
Amanda Hughes, Wales Audit Office in attendance for this item
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- 7 CF19/33.1 Annual Report, Financial Statements and Letter of Representation
Please note that the Annual Report is not finalised. An updated version will be sent to Committee members prior to the meeting.
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Ms R Hughes

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10th December 2019 at 9.30am, Boardroom, Carlton Court

Charitable Funds Committee Agenda

**Meeting to be held on Friday 4th October 2019 at 9.00am
Carlton Court**

CF19/31	Apologies & Declarations of Interest	-
CF19/32	Minutes of the previous meeting held on 20th June 2019: CF19/32.1 Accuracy CF19/32.2 Matters arising and summary action plan	
CF19/33	Charitable Funds Accounts 2018/19 CF19/33.1 Annual Report, Financial Statements and Letter of Representation CF19/33.2 Wales Audit Office ISA260 Report <i>Amanda Hughes, Wales Audit Office in attendance for this item</i>	
CF19/34	Charitable Funds Finance Report Q1 2019/20 <i>Ms R Hughes</i>	
CF19/35	Charitable Funds Fundraising Report Q1 2019/20 <i>Ms K Thomson</i> <i>Ms R Willmot, PhD Student at Bangor University in attendance for this item</i>	
CF19/36	Third Sector Groups Report <i>Ms K Thomson</i>	
CF19/37	Legacy Strategy <i>Ms K Thomson</i>	
CF19/38	Charitable Funds Advisory Group: CF19/38.1 Minutes from 18th July 2019 CF19/38.2 Draft minutes from 5th September 2019 <i>Ms R Hughes</i>	
CF19/39	Charity Risk Register <i>Ms R Hughes</i>	

CF19/40	Rothschild Portfolio Report: Report to 30th June 2019 <i>Ms R Hughes</i>	
<u>Items for Decision</u>		
CF19/41	Request for Expenditure Approvals:	
.1	Applications approved by the Charitable Funds Advisory Group For Ratification	
.2	Minor Works Scheme at Ysbyty Alltwen	
.3	Olympus Stack and Diathermy Unit for Urology Diagnostic Unit at YGC	
.4	Assessing the Mental Health of Patients on the Alaw Cancer Care Unit: 2 Year Project <i>Ms R Hughes</i>	
<u>Items of Governance</u>		
CF19/42	Committee Terms of Reference <i>Ms R Hughes</i>	
<u>Items for Information</u>		
CF19/43	Issues of significance to report to the Health Board	-
CF19/44	Date of next meeting: 10 th December 2019 at 9.30am, Carlton Court	-

Disclosure:
Betsi Cadwaladr University Health Board is the operational name of Betsi Cadwaladr University Local Health Board

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CHARITABLE FUNDS COMMITTEE

Draft Minutes of the meeting held on Thursday 20th June 2019 in the Boardroom, Carlton Court

Present:

Ms Jackie Hughes	Independent Member (Chair)
Ms Lyn Meadows	Independent Member
Ms Helen Wilkinson	Independent Member (Part meeting)
Mrs Sue Hill	Interim Executive Director of Finance

In Attendance:

Ms Kirsty Thomson	Head of Fundraising
Ms Faye Pritchard	PA to Executive Director of Finance
Ms Nia Thomas	Head Of Organisational & Employee Development (Part meeting)
Ms Annick Crisford	Rothschild (Part meeting)
Mr Tom Stott	Rothschild (Part meeting)

Agenda Item	Action
CF19/17 Apologies for absence & Declarations of interest	
CF19/01.1 Apologies of absence were noted from Ms Deborah Carter, Mr Mark Wilkinson, Ms Helen Wilkinson for part meeting, Mr Tony Uttley and Ms Rebecca Hughes.	
The committee agreed for the Interim Executive Director of Finance to speak to both The Executive Director of Planning & Performance (Mr Walk Wilkinson) and the Interim Executive Director of Nursing & Midwifery (Ms Deborah Carter) regarding their attendance, as their attendance is crucial to the committee meetings.	SH
The committee also agreed for the Terms of Reference to be reviewed at the next committee meeting, since having a number of new Executives in posts.	Chair
The Head of Fundraising (Ms K Thomson) informed the committee of a Declaration of Interest. Ms K Thomson is now a Trustee of the Association of NHS Charities. The Association is the membership organisation for NHS charities across the UK and is leading on organising the NHS Big Tea initiative.	

<p>CF19/18 Minutes of the previous meeting held on 7th March 2019:</p> <p>CF19/18.1 Accuracy The minutes were approved as an accurate record, subject to removing Ms Bethan Russell Williams' name off apologies as she'd already left the Health Board, and to amend Mr M Wilkinson's initials from a typographical error.</p> <p>CF19/18.2 Matters arising and review of summary action plan The committee reviewed the summary action plan in detail and updated accordingly.</p>	
<p>CF19/19 Charitable Funds Finance Report Q4 2018/19 <i>Mrs S Hill</i></p> <p>The Committee received the Charitable Funds Finance Report for Q4 2018/19 and Mrs S Hill stated some key trends from the report.</p> <p>The figures presented in this report are draft figures for 2018/19. Adjustments are made to the charity's position up until the draft Financial Statements are produced in July. These draft Financial Statements are then also subject to audit and a final view taken on the figures at that stage.</p> <p>Income from Donations and Fundraising is £312,000, 20% lower than in 2017/18 and Legacy income is £235,000, 28% lower than in 2017/18, which is concerning.</p> <p>With regards to the decrease in income from Fundraising, Ms Lyn Meadows expressed her concern over the need for a big project as soon as possible in order to engage. Ms K Thomson confirmed to the committee that there are currently four groups (Younger persons, Older persons, Cancer and I Can MHL) that will have business plans to submit.</p> <p>Mrs S Hill suggested that the four groups are invited to the next Charitable Funds Committee meeting to present a positive short presentation of their plans and discuss any support that they require from Charitable Funds Committee, with Charity department input in advance.</p> <p>Grant funded charitable expenditure of £1,731,000 is £928,000 (35%) lower than the same period last year.</p> <p>Investments show an overall gain of £374,000 (5%) on the 2017/18 portfolio closing value.</p>	<p>KT</p>

<p>Total cash at bank has increased by £34,000 over the period due to income received being higher than actual cash expenditure.</p> <p>Outstanding commitments have decreased by £517,000 (36%) compared to the end of the last financial year. 2017/18 ended with some significant commitments (Hybrid Theatre - £500,000, Staff Engagement project - £417,000 and Dewi Ward development - £105,000) which have not been replicated in 2018/19. The largest commitment at the 31st March 2019 remains the contribution towards the Hybrid Theatre at YGC, which now has £308,000 outstanding.</p> <p>Available unrestricted reserves total £4,343,000 compared to a target level of £3,060,000.</p> <p>Mrs S Hill drew the committee's attention to page 6 'Available General Funds totalled £444,000 at the 31st March 2019. The first call on this for 2019/20 will be the approved charity costs budget of £437,000'.</p> <p>She stated that we need to be generating more funds to support work of the Fundraising team. '3.1 Fund balances by division/directorate' table on page 7 also shows funds lower than last year.</p> <p>*ACTION* The Chair requested for three columns to be added to include percentages to be clear who's spending on a regular basis, as the worry is if expenditure is bigger than the income.</p> <p>*ACTION* The Chair requested the wording of North Wales Clinical Services to be changed so we do not have two North Wales wide sections.</p> <p>'3.2 Income and expenditure trends by division/directorate from 2016/17 onwards' – As the 'Other' category covers The Hybrid Theatre and Staff Engagement Strategy, the Chair's requested for more of a breakdown to differentiate.</p> <p>In 2018/19, legacies accounted for 31% of donated income, compared to 34% for 2017/18, 38% for 2016/17 and 50% for 2015/16. Our reliance on legacies has decreased over the years, highlighting the need to look to other sources to provide a sustainable income stream, whilst also maximising what we can receive from legacies.</p> <p>In memory donations continue to be our largest donation area, totalling £455,000 in 2018/19.</p> <p>Over half of donated income arises from donations in memory (36%) and unsolicited donations (21%). Both of these categories are where the donation has not been instigated by Awyr Las, highlighting the underlying support for the charity across North Wales.</p> <p>Appendix 2 'Outstanding Commitments' – Staff Mental Health and Wellbeing Awareness - Ongoing project, twelve month extension awarded due to project lead sickness. Mrs S Hill stressed the importance of finding another Project Manager in the interim.</p>	<p></p> <p>RH</p> <p>RH</p> <p>RH</p> <p></p> <p>RH</p>
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<p>*ACTION* The committee requested for the Estates lead to give the committee an update by middle to end of July 2019, regarding the number of projects delayed which appears to be due to capacity issues in Estates.</p> <p>The committee approved and noted the report and the actions being taken.</p>	KT
<p>CF19/20 Charitable Funds Fundraising Report Q4 2018/19 <i>Ms K Thomson</i></p> <p>Ms K Thomson presented the Charitable Funds Fundraising Report Q4 2018/19, starting with the good news and general update.</p> <p>80 members of staff, Robin volunteers and Awyr Las supporters took part in the Awyr Las Zip Line Challenge on 15th June 2019 as part of the ZipRoc event, which generated £17k.</p> <p>The event was really positive in terms of engagement, and the committee expressed their gratitude and thanks to Zip World and agreed that Zip World need to be thanked via a letter from the Board as it was a huge benefit to the charity and the Health Board. The Head of Fundraising also confirmed that the success is to be included in the CEO's 'My Week' bulletin.</p> <p>Ms K Thomson informed the committee that she's arranged a meeting with AM's regarding Third sector groups.</p> <p>It was agreed that there needs to be two different Collaborative Working Agreement Registers going forward.</p> <p>The committee discussed the NHS Big Tea party events, and Mrs S Hill requested to see what sites need to be targeted to register for a party. The potential of Tea party events being hosted during Board meetings or at other committee level meetings was discussed in order to adapt to the Executives diaries.</p> <p>Ms K Thomson stated that there are prizes at the Big Tea party events such as winner of cake competition wins an iPad and £250 for fund of choice.</p> <p>Social media shows an uphill trajectory, with an increase in number of likes. Ms K Thomson informed the committee to be mindful of more being done online and that Digital Strategy is being amended to reflect this.</p> <p>*ACTION* Bring a new agenda item to next committee meeting 'Update on Strategic Priorities', as Ms K Thomson wants the paper to be presented to the Executive Team in October 2019.</p> <p>The committee agreed for a revised Staff Lottery Scheme paper to come back to the next committee meeting following some work prior to the paper going to Local Partnership Forum meeting on 25th April 2019.</p>	<p>KT</p> <p>KT</p> <p>KT</p> <p>KT</p> <p>KT</p> <p>KT</p> <p>KT</p>

<p>With regards to the Awyr Las Strategic Priorities the committee agreed for Ms K Thomson to draft an e-mail on behalf of the Chair to send out to Executives and Independent Members regarding needing an Executive and an Independent Member sponsor for each of the four schemes (I CAN Mental Health, Early Years, Older People and Cancer care).</p> <p>The committee discussed the importance of each area including a story of what was included, target dates, escalation etc. in order to encourage others.</p> <p>The Chair suggested actively including in the Leadership Walkarounds by visiting the services e.g. The I Can service on sites etc. Also during Walkarounds try and encourage holding and supporting them with a Tea Party.</p> <p>The committee approved and noted the report and the actions being taken.</p>	KT
<p>CF19/21 Third Sector Groups Report <i>Ms K Thomson</i></p> <p>Ms K Thomson presented the Third Sector Groups Report for the Charity as at the 31st March 2019 to provide Committee members an overview of activity carried out by the Partnership Support Manager along with proposed and scheduled activity.</p> <p>The committee agreed to agree outside of the meeting and feedback to Ms K Thomson if you want anything done differently.</p> <p>*ACTION* List actions at the end of the report for committee to approve.</p>	KT
<p>CF19/22 Legacy Strategy <i>Ms K Thomson</i></p> <p>Ms K Thomson presented the Legacy Strategy, which is an update of the Legacy Marketing Plan for 2018/21. This document provides a roadmap to promote legacy giving internally and externally. Ms K Thomson informed the committee that this is a <i>high</i> priority at the moment and the committee agreed to continue on with activity as planned.</p> <p>*ACTION* The Chair requested to include list of planned actions at the end of the document</p> <p>*ACTION* The Chair requested to include numbers with percentages in the mass mailings table.</p> <p>Ms K Thomson offered to present in PowerPoint presentation format for next committee meeting, to pick up activity being done in more depth across the Fundraising team.</p> <p>The committee approved and noted the report and the actions being taken.</p>	<p>KT</p> <p>KT</p>

<p>CF19/23 Charitable Funds Advisory Group: <i>Mrs S Hill</i></p> <p>CF19/23.1 Minutes from 21st March 2019</p> <p>The committee approved the minutes from 21st March 2019 meeting.</p> <p>CF19/23.2 Draft minutes from 23rd May 2019</p> <p>*ACTION* Ms K Thomson to ask Ms Wendy Marles if there's an action log that concerns people that don't attend the meetings to ensure actions are seen, as page one suggests the committee approving Key Performance Indicators from Ms K Thomson.</p> <p>*ACTION* The committee agreed for Ms R Hughes to look at the attendance lists of the Charitable Funds Advisory Group meetings as the attendees seem to mostly be from Therapies and Primary Care.</p> <p>Ms H Wilkinson requested for the current Terms of Reference for the Charitable Funds Advisory Group meeting to be circulated to all committee members.</p> <p>The committee approved the draft minutes from 23rd May 2019 meeting.</p>	<p>KT</p> <p>RH</p> <p>RH</p>
<p>CF19/24 Charity Risk Register <i>Ms R Hughes</i></p> <p>There were no red risks identified, therefore the Charity Risk Register was not presented at this meeting.</p> <p>The committee agreed to only review red risks at committee meetings as a standing item, but in March (annually) to review all risks so that the committee continues to be sighted on them.</p>	
<p>CF19/25 Rothschild Portfolio Report: Report to 31st March 2019 <i>Ms Annick Crisford & Mr Tom Stott, Rothschild in attendance for this item</i></p> <p>Ms Annick Crisford presented the report to the committee, noting the highlights:</p> <p>The first quarter of 2019 saw equity markets have their best quarter for a decade following declines of a similar magnitude over the final quarter of 2018. The BCUHB</p>	

<p>portfolio has benefited from the strength in equity markets over Q1 of 2019 and appreciated by +6.2%.</p> <p>Most assets classes performed strongly over the first quarter of 2019, bouncing back from their year-end lows. Global equity markets, which had their best quarter since 2009 rallied alongside government bonds, corporate credit, hedge funds and commodities. However, the economic backdrop was notably more mixed, with economic data appearing to slow.</p> <p>Ms A Crisford stated that when we consider the companies that we invest in on behalf of BCUHB, and we estimate the plausible long term projected returns we should expect to receive as investors, these remain comfortably above prospective inflation rates, even if some headroom has been lost at the start of this year. We also consider that whilst the global economy may be slowing, it is not collapsing, which suggests we should not yet be poised for a more dramatic reversal in profits.</p> <p>Overall, the portfolio maintains a solid allocation of 68.1% to return assets. Rothschild continue to expect these assets to drive long-term performance, but, they are also likely to be volatile over shorter periods. The portfolio remains focused on the selection of high quality businesses that are trading at valuations which we believe should enable attractive forward looking returns over the long term. The 'return' assets have performed strongly on Q1 2019.</p> <p>The portfolio continues to maintain a notable allocation of 31.9% to diversifying assets -these assets are included to provide real diversification and protection in difficult market conditions. The diversifying assets in the portfolio are primarily held to protect against a pronounced and protracted market sell-off.</p> <p>Ms A Crisford informed the committee that she'll liaise with Ms R Hughes in updating the authorised signatories list, with the recent changes in committee membership and Executive posts.</p> <p>Ms L Meadows expressed her valid concerns over non ethical companies investing into BCUHB's portfolio, and the Chair expressed concern over the textile industry and sweat shops, but both Ms A Crisford and Mr T Stott confirmed that they have robust processes in place to test a company's validity.</p> <p>The Chair noted that it's reassuring to know that a robust process is in place when selecting companies.</p> <p>Mrs S Hill offered Ms A Crisford and Mr T Stott the option of Skyping into the Charitable Funds Committee meetings in future to save on travel but she confirmed that they like to meet their clients at least annually. Ms A Crisford noted that they're happy to skype into any of the quarterly meetings if needs be.</p> <p>The committee noted the report.</p>	<p>AC/ RH</p>
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<p>Ms Annick Crisford & Mr Tom Stott left the meeting.</p>	
<p>CF19/26 Staff Engagement Strategy Update <i>Ms Nia Thomas (Head Of Organisational & Employee Development) and Ms Joy Lloyd (Senior Organisational Development Manager) in attendance for this item</i></p> <p>Ms Nia Thomas presented the report to the committee, noting key highlights. She reiterated that this is the end of funding reports as funds have now come to an end.</p> <p>This is the final report on implementing some of the key elements of the Staff Engagement Strategy. The committee supported three key elements (Four initially but decided against), which were crucial to support the organisation's effort to develop a listening methodology, deliver a high quality operational and clinical leadership training and development programme and develop cultural analysis tools which supports baseline measurements and identifies improvement trajectories over time.</p> <p>Page four of the report shows that there are currently 39 case studies on the Intranet, some completed and some still in-progress, and all staff can go in and look at all of these, which shares best practice across the organisation. Page five shows all key deliverables as achieved which is what we wanted to achieve.</p> <p>The programme has been re-evaluated and a new programme commenced in March 2019, which includes two cohorts in July 2019 and November 2019. Detail of this is included in appendix 1, and in total 85 leaders (Bands 8a and above) are booked on across 5 cohorts. Cohort 2 started this week, and cohort 3 starts in September.</p> <p><i>Ms Helen Wilkinson joined the meeting.</i></p> <p>The OD team will continue to deliver the programme. Cultural diagnostic tool – first survey live at the moment, which has been extended due to poor response.</p> <p>Ms N Thomas extended the invite to the committee of upcoming Pass it On events, which shows continuous journey of the team. *ACTION* Ms S Hill suggested an OD newsletter once a month to update on ongoing work and progress.</p> <p>Ms N Thomas informed the committee that press releases and social media coverage has shown great positivity of what they're doing in their teams.</p> <p>There are currently two strategies – Public Engagement strategy and Staff Engagement strategy, and Ms K Thomson suggested contacting Ben Dempsey (Communications Officer) to discuss the opportunity of bringing both together as</p>	<p>NT</p>

<p>one, and check if the Communications team are doing anything internal, which can be emphasised by using internal communications too.</p> <p>Ms L Meadows alerted the committee to the top of page 14 in the report – CFAG £150k approx. dedicated for Staff Engagement.</p> <p>Go through Charitable Funds Advisory Group meeting, then it'll come to Charitable Funds Committee meeting. The application just needs to be strengthened.</p> <p>*ACTION* Ms H Wilkinson requested more information on the role of the Charitable Funds Advisory Group and the Charitable Funds Committee meetings.</p> <p>*ACTION* Ms K Thomson to share Internal Audit report which includes the Charitable Funds Advisory Group meeting requests three years ago.</p> <p>Ms N Thomas asked the committee if future reports are required and the committee agreed that a Benefits Realisation report will be required on the £155k. Ms K Thomson and Ms N Thomas to meet outside of meeting what to include.</p> <p>The committee noted the report.</p> <p><i>Ms Nia Thomas & Ms Joy Lloyd left the meeting.</i></p>	<p>KT</p> <p>KT/ RH</p> <p>KT</p> <p>KT/ NT</p>
ITEMS FOR DECISION	
<p>CF19/27 Request for Expenditure Approvals: <i>Ms S Hill</i></p> <p>1. Applications approved by the Charitable Funds Advisory Group For Ratification</p> <p>The committee approved the applications, on the basis that further clarification is sought on the Staff Development fund for the Filing Storage Cabinet bid.</p> <p>2. Replacement Patient Chairs – Alaw Day Unit – for approving</p> <p>The committee approved the bid.</p> <p>3. Additional Equipment – Hybrid Theatre – for noting</p> <p>The committee approved the bid.</p> <p>Ms H Wilkinson requested for the language to be amended going forward concerning applications being '<i>approved</i>' by the Advisory Group and for '<i>ratification</i>' at the committee. The Charitable Funds Advisory Group are making the recommendation to the committee.</p>	<p>RH</p> <p>RH</p> <p>RH</p>

<p>*Action* Cancer centre gardens/ acronyms need to be clearer. 'North Wales wide services'.</p> <p>*Action* Change division to service and location be clearer and more transparent about what we're doing.</p>	RH
ITEMS FOR INFORMATION	
<p>CF19/28 Issues of significance to report to the Health Board</p> <ul style="list-style-type: none"> - Executive attendance at this committee. - Thank Zip World formally for their support. 	
<p>CF19/29 Date of next meeting:</p> <p>Thursday 17th September 2019 at 09:30am, Boardroom, Carlton Court.</p>	
IN COMMITTEE SESSION	
<p>CF19/30 In Committee Strategy Review</p> <p>CF19/30.1 Awyr Las Strategy Summary 2016-21</p> <p>CF19/30.2 Awyr Las Communications Strategy 2016-21</p> <p>It was agreed to postpone this session to after the In Committee Health Board meeting next Thursday 27th June 2019. Ms F Pritchard to arrange the meeting between Ms S Hill, Ms J Hughes, Ms L Meadows and Ms H Wilkinson.</p> <p>*Action* Ms S Hill requested a brief supplementary update paper from Ms K Thomson in advance of the meeting on Thursday 27th June for them to discuss during the meeting of where we're at with what we'd said we'd do, including RAG rating status.</p>	<p>FP</p> <p>KT</p>

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Actions from 13.03.17 meeting				
K Thomson	CF18/45.2 Matters arising and review of summary action plan (17.12.18) Ms K Thomson to send updates via e-mail to Mr R Favager as and when there's been significant moves forward, in order to provide assurance. A new revised timescale date has been set for all agreements to be signed by the end of February 2019, to be available for next Committee in March.	18.09.17		Closed
Actions from 17.12.18 meeting				
K Thomson	CF18/48.1 Fundraising Report Q2 2018/19 Ms K Thomson to provide the Committee with a paper which includes the Give 70 Campaign, to show comparisons with other Health Boards and what we can learn from others.	18.06.19	This piece of work is underway. Ms Thomson is surveying Welsh NHS Charities during an all Wales NHS Charities Meeting on 20.02.19 and other NHS Charities at an Association of NHS Charities Conference on 13.03.19. BCUHB Staff surveys on Give 70 and its legacy have begun and will continue to be carried out in March 2019. This is included in the Awyr Las Fundraising Report.	Closed
K Thomson & R Hughes	CF18/48.1 Fundraising Report Q2 2018/19 Members of the Finance team to work with Fundraising team members to ensure system controls are in place over the receipt of monies from in aid of events.	18.06.19	This work has begun and systems controls are in place, explained in the Head of Fundraising's Report. A complete review of the standard operating procedures for thanking, banking and donor support will be carried out in April 2019. The review will be included in the Head of Fundraising's Charity Committee Report in June 2019. The review into thanking and banking is underway and is reported in the Awyr Las Fundraising Report.	Closed

		20.06.19	The Head of Fundraising has liaised with the internal audit team and the General Office Manager to agree new ways of working to ensure systems controls are in place for all receipt of monies, in line with the Fundraising Regulator Code of Fundraising Practice, which comes into effect on 1 st October 2019. All General Office staff will receive training in October on the new systems, which will be introduced in phases.	Closed
K Thomson	CF18/48.1 Fundraising Report Q2 2018/19 Ms K Thomson is to draft a letter, working with Governance, and share with the Committee prior to the Chairman signing, around the BCU stance on professional fundraising services on our sites.	31.12.18	Meetings have been held with representatives from local charities and an update on this is included in the Awyr Las Fundraising Report.	Closed
Actions from 07.03.19 meeting				
G Lewis Parry	CF19/02.2 Matters arising and review of summary action plan Ms G Lewis-Parry raised an issue of concern over the charities that do not have SLA's with BCUHB but operate on BCUHB premises. Ms G Lewis-Parry will liaise with the Hospital Management team at YGC.	20.06.19	Grace Lewis Parry has confirmed that she's linked in with YGC Hospital Director Ellen Greer. Ms Nia Williams from Fundraising team is currently liaising with Ms Ruth Robinson from Contracting team on wider action plan on SLA/ Third sector strategy.	Closed
R Hughes	CF19/03.1 Charitable Funds Finance Report Q3 2018/19 It was requested that the Finance Report splits the cancer funds up by location in future reports.	20.06.19	This has been included in the Quarter 4 Finance Report.	Closed
G Lewis Parry	CF19/03.2 Charitable Funds Finance Report Q3 2018/19 Ms G Lewis-Parry suggested informing Dr Evan Moore (Executive Medical Director)	20.06.19	Grace Lewis Parry has confirmed that Livsey Trust was referenced in the vascular Board paper on 28 th March 2019, raised in the Chair's Assurance Report and in media coverage.	Closed

	to reference the Livsey paper at the next Board meeting.			
K Thomson	CF19/04.1 Charitable Funds Fundraising Report Q3 2018/19 Ms K Thomson to recirculate the Charity strategy to all committee members.	20.06.19	The Charity Strategy is included in the meeting's papers of 20 th June 2019.	Closed
K Thomson	CF19/04.2 Charitable Funds Fundraising Report Q3 2018/19 Ms K Thomson to e-mail round to all committee members the template used for Joint Collaborative Working agreements.	20.06.19	Ms K Thomson circulated to all committee members two different templates on 20 th June 2019.	Closed
K Thomson	CF19/04.3 Charitable Funds Fundraising Report Q3 2018/19 After the June 2019's Charitable Funds Committee meeting, an in-Committee Strategy discussion will take place.	20.06.19	This is included on the agenda for meeting on 20 th June 2019.	Closed
K Thomson	CF19/04.4 Charitable Funds Fundraising Report Q3 2018/19 Under 'Opportunities for Improvement' the committee asked for the wording to be changed to 'Awyr Las complaints', with a table to be added to show total number of complaints received, resolved and what sort of complaint it was e.g. Verbal, via the Charity Commission etc.	20.06.19	This has been completed and included within.	Closed
K Thomson	CF19/04.5 Charitable Funds Fundraising Report Q3 2018/19 The committee raised their concern of the outstanding unsigned 25 Collaborative Working agreements. All outstanding agreements must be signed by June	20.06.19	This is reported in the Meeting papers on 20 th June 2019, as a new register has been established for these 25 collaborative working agreements.	Closed

	2019 committee meeting			
K Thomson	CF19/04.6 Charitable Funds Fundraising Report Q3 2018/19 The committee discussed that it would be useful to have information such as target dates and benefits realisation to illustrate all that's been achieved in the 'Third Sector Groups' section of the report, specifically relating to the Annual operating plan. It would be useful for risks and trends to also be included	20.06.19	The Third Sector Groups Report has been adapted to reflect the wishes of the new Committee.	Closed
K Thomson	CF19/04.7 Charitable Funds Fundraising Report Q3 2018/19 The committee agreed that a separate report for third sector groups would be clearer for audit purposes, as an appendix to the main Fundraising report	20.06.19	This is now included within the agenda as a standing item.	Closed
K Thomson	CF19/04.8 Charitable Funds Fundraising Report Q3 2018/19 The KPIs (Key Performance Indicators) were discussed – it was requested to add a row in totalling the figures of each column costs. With regards to the 'Internal Engagement KPI's', the committee requested that the 'Measurement' column be filled out in more depth as to what the KPI is and include costs.	20.06.19	The KPIs section has been removed from the Fundraising Support Team paper to ensure the papers aren't unnecessarily lengthy.	Closed
K Thomson	CF19/04.9 Charitable Funds Fundraising Report Q3 2018/19 With regards to one of the strategic priorities 'I CAN campaign' of MHL D, the committee requested to see clear stories of where funding is going.	17.09.19	An I CAN grant scheme has been established and the deadline date extended to 12 th November so all MHL D staff can apply for existing funds and request that their projects be prioritised for future funding.	Closed
K Thomson	CF19/04.10 Charitable Funds Fundraising Report Q3 2018/19	20.06.19	Action completed by the Fundraising Team.	Closed

	The committee discussed the importance of circulating dates to all Board members regularly of key Aywr Las events to ensure that diary time is set aside, such as The Big Tea Party and World Mental Health Day (ICAN walk).			
K Thomson	CF19/05 Legacy Strategy The committee requested the link to the Strategy document be added in to the legacy document.	20.06.19	Action completed.	Closed
R Hughes	CF19/07 Charity Risk Register Ms G Lewis-Parry suggested the option of reviewing only the score 16+ risks on the Charity Risk Register quarterly, and once a year all open risks in the Charity Risk Register.	20.06.19	This has been agreed with the Executive Director of Finance via Rebecca Hughes.	Closed
R Hughes / K Thomson	CF19/09.2 Gwynt Y Mor Community Fund - Motiv8 Project The committee discussed the potential of a joint application with Conwy County Council and/ or Gwynedd County Council as they run Motiv8 events too. Ms R Hughes and Ms K Thomson to explore if engagement has been carried out	20.06.19	The applicants confirmed that engagement with the Council has been carried out and the Conwy wellbeing team are part of the Motiv8.	Closed
J Hughes / R Favager	CF19/09.3 Gwynt Y Mor Community Fund - Motiv8 Project The committee approved the bid in principal, subject to additional work being carried out, along with a clear Exit strategy established. Ms J Hughes and Mr R Favager to review and sign off outside of the committee meeting.	20.06.19	Approval was received following additional information from the applicants.	Closed
K Thomson	CF19/11 Staff Lottery Ms J Hughes suggested that this item to go on next Local Partnership Forum	20.06.19	Action completed. The paper went to Local Partnership Forum meeting on 25 th April 2019.	Closed

	meeting agenda and the committee agreed.			
F Pritchard	CF19/14.1 Staff Engagement Strategy Update To invite Ms Sue Green (Executive Director of Workforce and Organisational Development) and Ms Nia Thomas (Head Of Organisational & Employee Development) to June 2019 Charitable Funds committee.	20.06.19	This is included as an agenda item on 20 th June 2019.	Closed
F Pritchard	CF19/14.2 Staff Engagement Strategy Update Ms F Pritchard to share feedback from committee with Ms N Thomas and Ms S Green.	20.06.19	Feedback was shared via e-mail following the committee meeting on 7 th March 2019.	Closed
Actions from 20.06.19 meeting				
S Hill	CF19/17.1 Apologies for absence & Declarations of interest Interim Executive Director of Finance to speak to both The Executive Director of Planning & Performance (Mr Mark Wilkinson) and the Interim Executive Director of Nursing & Midwifery (Ms Deborah Carter) regarding their attendance.	01.09.19	This has been discussed with the EDoPP and the EDoNM	Closed
Chair	CF19/17.2 Apologies for absence & Declarations of interest The committee agreed for the Terms of Reference to be reviewed at the next committee meeting.	01.09.19	Included as agenda item CF19/40 Committee Terms of Reference.	Closed
K Thomson	CF19/19 Charitable Funds Finance Report Q4 2018/19.1 Younger persons, Older Persons, Cancer, I CAN MHLA to be invited to the next Charitable Funds Committee meeting.	01.09.19	The Head of Fundraising will provide a presentation to demonstrate how the 4 priority areas are being promoted, and how new priorities within these 4 areas will be selected in the future.	

R Hughes	CF19/19 Charitable Funds Finance Report Q4 2018/19.2 Add three columns to include percentage of Fund, to make the report easier to review.	01.09.19	Included within CF19/34 Finance Report.	Closed
R Hughes	CF19/19 Charitable Funds Finance Report Q4 2018/19.3 Revise the description of North Wales Clinical Services to be changed so it does not have two North Wales wide sections.	01.09.19	Included within CF19/34 Finance Report.	Closed
R Hughes	CF19/19 Charitable Funds Finance Report Q4 2018/19.4 As the 'Other' category covers The Hybrid Theatre and Staff Engagement Strategy, the Chair requested a more detailed analysis.	01.09.19	Included within CF19/34 Finance Report.	Closed
R Hughes	CF19/19 Charitable Funds Finance Report Q4 2018/19.5 Appendix 2 'Outstanding Commitments' – Staff Mental Health and Wellbeing Awareness - identify another Project Manager to cover sickness.	01.09.19	The Project Manager has now returned and all funds have been committed to specific projects.	Closed
K Thomson	CF19/19 Charitable Funds Finance Report Q4 2018/19.6 The Estates lead to provide an update by end of July 2019, regarding the number of projects delayed.	01.09.19	Outstanding. The Head of Fundraising will liaise with Estates on this matter to ensure a report on current projects is available before the December Charity Committee.	December 2019
K Thomson	CF19/20 Charitable Funds Fundraising Report Q4 2018/19.1 Zip World need to be thanked via a letter from the Board as it was a huge benefit to the charity and the Health Board.	01.09.19	Two official letters of thanks have been sent to Zip World to thank them for their support of Awyr Las.	Closed

K Thomson	CF19/20 Charitable Funds Fundraising Report Q4 2018/19.2 It was agreed that there needs to be two different Collaborative Working Agreement Registers going forward.	01.09.19	There are now three Registers for working with external groups: The Awyr Las Collaborative Working Agreement Register (already operational); the External Charities supporting BCUHB register; the BCUHB Charity Desks register.	Closed
K Thomson	CF19/20 Charitable Funds Fundraising Report Q4 2018/19.3 Which sites haven't registered for a Tea party to be shared with Committee members.	01.07.19	A Tea Party Update is included in Fundraising Report	Closed
K Thomson	CF19/20 Charitable Funds Fundraising Report Q4 2018/19.4 A new agenda item to next committee meeting 'Update on Strategic Priorities'	01.09.19	Included in the Fundraising Report	Closed
K Thomson	CF19/20 Charitable Funds Fundraising Report Q4 2018/19.5 A revised Staff Lottery Scheme paper to come back to the next committee meeting.	01.09.19	The Staff Lottery Scheme is included within the Fundraising Report. The Head of Fundraising is involved in a Staff Lottery working group of NHS Charities which is meeting on 24/09/19 to discuss findings. A full business case will be brought to the December Charity Meeting.	December 2019
K Thomson	CF19/20 Charitable Funds Fundraising Report Q4 2018/19.6 Ms K Thomson to draft an e-mail on behalf of the Chair to send out to Executives and Independent Members regarding needing an Executive and an Independent Member sponsor for each of the four schemes.	01.09.19	This was put on hold until the team has the online system in place to effectively collate and prioritise all funding requests. The online system is currently being tested and will be operational by November. Executive and Independent Members will then be needed to sponsor the priority areas and an email will be sent by Ms Thomson. Ms Thomson will present the online system at this October Charity Committee.	December 2019.
K Thomson	CF19/21 Third Sector Groups Report	01.09.19	Included in the October report as requested.	Closed

	List actions at the end of the report for committee to approve.			
K Thomson	CF19/22.1 Legacy Strategy The Chair requested a list of planned actions at the end of the document.	01.09.19	Included in the October report as requested.	Closed
K Thomson	CF19/22.2 Legacy Strategy The Chair requested inclusion of numbers with percentages in the mass mailings table.	01.09.19	Included in the October report as requested.	Closed
K Thomson	CF19/23.2.1 Charitable Funds Advisory Group Draft minutes from 23rd May 2019 Ms K Thomson to ask Ms Wendy Marles if there's an action log that concerns people that don't attend the meetings to ensure actions are seen.	01.09.19	All actions are now shared with all in the Advisory Group (including non-attendees) and anyone cited in an action	Closed
R Hughes	CF19/23.2.2 Charitable Funds Advisory Group Draft minutes from 23rd May 2019 The committee agreed for Ms R Hughes to look at the attendance lists of the Charitable Funds Advisory Group meetings.	01.09.19	The attendance list has been reviewed. Additional members have been invited to join the group.	Closed
R Hughes	CF19/23.2.3 Charitable Funds Advisory Group Draft minutes from 23rd May 2019 The current Terms of Reference for the Charitable Funds Advisory Group meeting to be circulated to all committee members.	01.09.19	Circulated via email 31.07.19.	Closed
A Crisford/ R Hughes	CF19/25 Rothschild Portfolio Report: Report to 31st March 2018 Update the authorised signatories list, with the recent changes in committee	01.09.19	Following confirmation of the Executive members who will sit on the Charitable Funds Committee, the due diligence documentation required for submission to Rothschild to amend the signatories	31.10.19

	membership and Executive posts.		is being collated.	
N Thomas	CF19/26.1 Staff Engagement Strategy Update An Organisational Development department newsletter once a month to update on ongoing work and progress.	01.09.19	Verbal update to be provided.	
K Thomson	CF19/26.2 Staff Engagement Strategy Update Ms K Thomson to contact the Communications team to discuss the opportunity of bringing both strategies together as one.	01.09.19	Ms Thomson has liaised with the Communications Team and has restructured the existing Charity Support Team to ensure greater staff engagement. The Awyr Las Support Team and the Communications team continue to work together to ensure Awyr Las is seen as a corporate communication priority.	Closed
R Hughes	CF19/26.3 Staff Engagement Strategy Update Clarification on the role of the Charitable Funds Advisory Group and the Charitable Funds Committee meetings.	01.09.19	The Charitable Funds Advisory Group Terms of Reference were sent to all Committee members. The Charitable Funds Committee Terms of Reference are included as agenda item CF19/40 Committee Terms of Reference for the Committee to review.	Closed
K Thomson	CF19/26.4 Staff Engagement Strategy Update Ms K Thomson to share Internal Audit report which includes the Charitable Funds Advisory Group meeting requests three years ago.	01.09.19	Shared with all committee members on 25/06/19	Closed
K Thomson/ N Thomas	CF19/26.5 Staff Engagement Strategy Update Benefits Realisation report will be required on the £155k. Ms K Thomson and Ms N Thomas to meet outside of meeting what to include.	01.09.19	A Staff Experience Grant will be open for all staff to apply to from 01/10/19 to 12/11/19, see www.awyrlas.org.uk/staffexperience after 01/10/19. All staff will be able to apply for up to £2,000 and will need to provide an explanation of how they will monitor and measure effectiveness, providing a short benefits realisation report at the end of their grant period. £24,500 has been made available for this round of grants, and if successful a further round will be opened in March 2020.	Closed

R Hughes	CF19/27 Request for Expenditure Approvals: Applications approved by the Charitable Funds Advisory Group For Ratification The committee approved the applications, on the basis that further clarification is sought on the Staff Development fund for the Filing Storage Cabinet bid.	01.09.19	The department chose not to use their own funds to purchase the filing cabinets and instead requested General Funds. The departments' funds are earmarked for educational events, departmental training, conferences and health promotion material, including local sexual health campaign. The filing cabinets have not been bought as the department is waiting on a Health Board wide solution for notes storage, pending release of the embargo on notes destruction.	Closed
R Hughes	CF19/27.1 Request for Expenditure Approvals: Additional Equipment – Hybrid Theatre – for noting Ms H Wilkinson requested for the language to be amended going forward concerning applications being ' <i>approved</i> ' by the Advisory Group and for ' <i>ratification</i> ' at the committee.	01.09.19	Included in CF19/41 Requests for Expenditure Approvals.	Closed
R Hughes	CF19/27.2 Request for Expenditure Approvals: Additional Equipment – Hybrid Theatre – for noting Cancer centre gardens/ acronyms need to be clearer. 'North Wales wide services'. Change division to service and location be clearer and more transparent about what we're doing.	01.09.19	Included in CF19/41 Requests for Expenditure Approvals.	Closed
F Pritchard	CF19/30.2.1 Awyr Las Communications Strategy 2016-21 It was agreed to postpone this session to after the In Committee Health Board meeting next Thursday 27 th June 2019. Ms F Pritchard to arrange the meeting between Ms S Hill, Ms J Hughes, Ms L Meadows and Ms H Wilkinson.	24.06.19	Meeting took place on 27.06.19	Closed
K Thomson	CF19/30.2.2 Awyr Las Communications Strategy 2016-21	01.09.19	K Thomson provided briefing to S Hill in advance of meeting.	Closed

	Ms S Hill requested a brief supplementary update paper from Ms K Thomson in advance of the meeting on Thursday 27 th June.			
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Charitable Funds Committee

4th October 2019

CF19/33



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Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

To improve health and provide excellent care

Report Title:	Annual Report and Accounts for 2018/19
Report Author:	Rebecca Hughes, Charity Accountant
Responsible Director:	Sue Hill, Executive Director of Finance
Public or In Committee	Public
Purpose of Report:	The attached Annual Report and Financial Statements, which have been subject to audit, provide the formally reported position for the Charity for 2018/19.
Approval / Scrutiny Route Prior to Presentation:	The Annual Report and Charitable Funds Financial Statements for 2018/19 are brought for approval by the Charitable Funds Committee.
Governance issues / risks:	<p>Attached are</p> <ol style="list-style-type: none"> 1. The Charitable Funds Annual Report and Financial Statements for 2018/19, along with the Letter of Representation. 2. The Wales Audit Office ISA260 Report. <p>The Board (as Charitable Trustees) will formally receive the accounts at a meeting to be arranged in early 2020.</p>
Financial Implications:	There are no financial implications for the Health Board from this paper.
Recommendation:	The Committee is asked to approve the Charitable Funds Annual Report and Financial Statements for 2018/19.

Health Board's Well-being Objectives <i>(indicate how this paper proposes alignment with the Health Board's Well Being objectives. Tick all that apply and expand within main report)</i>	✓	WFGA Sustainable Development Principle <i>(Indicate how the paper/proposal has embedded and prioritised the sustainable development principle in its development. Describe how within the main body of the report or if not indicate the reasons for this.)</i>	✓
1.To improve physical, emotional and mental health and well-being for all	✓	1.Balancing short term need with long term planning for the future	✓

2.To target our resources to those with the greatest needs and reduce inequalities	√	2.Working together with other partners to deliver objectives	√
3.To support children to have the best start in life	√	3. those with an interest and seeking their views	√
4.To work in partnership to support people – individuals, families, carers, communities - to achieve their own well-being	√	4.Putting resources into preventing problems occurring or getting worse	√
5.To improve the safety and quality of all services	√	5.Considering impact on all well-being goals together and on other bodies	√
6.To respect people and their dignity	√		
7.To listen to people and learn from their experiences	√		
Special Measures Improvement Framework Theme/Expectation addressed by this paper			
<i>Not applicable</i>			
Equality Impact Assessment			
<i>Not applicable – the report does not impact directly on staff or patients</i>			

Disclosure:

Betsi Cadwaladr University Health Board is the operational name of Betsi Cadwaladr University Local Health Board



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University Health Board

Charitable Funds Annual Report and Accounts 2018/19

Rebecca Hughes
Charity Accountant
Betsi Cadwaladr University Health Board

1.0 Introduction

The purpose of this report is to provide an overview of the key aspects of the Charitable Funds Annual Report and Accounts for 2018/19, to support approval by the Committee.

The accounts were prepared and submitted to the Wales Audit Office (WAO) at the end of July 2019, with the audit work taking place throughout August and September. The timing for the submission of the accounts has been brought forward from previous years as WAO have been able to accommodate an earlier audit.

The Charitable Funds Committee has delegated authority to approve the final accounts. The Board (as Charitable Trustees) will formally receive the accounts at a meeting to be arranged in early 2020. The deadline for submission to the Charity Commission is the 31st January 2020. The accounts are not submitted to Welsh Government.

2.0 Statement of Financial Activities

The Statement of Financial Activities (SoFA) summaries the charity's income and expenditure for the year. Income for the year totalled £2.0m, expenditure was £2.2m, with gains on investments of £0.4m, giving a net increase in funds of £0.2m (decrease in funds of £0.5m in 2017/18).

2.1 Incoming Resources

Total income of £2.0m shows a decrease of 20% year on year (£2.5m in 2017/18). Of this, £0.2m relates to a fall in donations, £0.2m due to a decrease in legacies and £0.1m as a result of less fundraising income.

Legacies in particular are a volatile and unpredictable source of income that can vary greatly from year to year. Part of the charity's strategy is to increase the legacy income it receives, but work done now takes on average 7 years to show any effect and so this is a long term plan.

2.2 Expenditure

Expenditure of £2.2m was 29% lower year on year (£3.1m in 2017/18). 'Note 7. Analysis of expenditure on raising funds' and 'Note 8. Analysis of charitable activity' provide the breakdown of expenditure between the running costs of the charity, fundraising costs and grants made.

The primary reason for the decrease in expenditure is a reduction in grants awarded of 37% (£1.7m in 2018/19 compared to £2.7m in 2017/18). The analysis of this over the different grant categories is shown below.

Type of Grant	2018/19 £'000	2017/18 £'000	Movement £'000
Grants for NHS Capital expenditure	159	1,104	(945)
Staff education and welfare	521	652	(131)
Patient education and welfare	962	886	76
Medical research	102	(13)	115
Other	0	30	(30)
Total	1,744	2,659	(915)

The largest reduction has been seen in grants for NHS Capital. Capital grants were boosted in 2017/18 by the £0.5m Hybrid Theatre at YGC and the £0.1m Dewi Ward Development. There have been no significant capital schemes funded by the charity in 2018/19.

2.3 Movement in Investments

Many of the donations and legacies that the charity receives cannot be spent immediately, as they need to be accumulated to fund the most appropriate purchases. These donations are therefore invested in order to generate income and protect their value in real terms. During 2018/19 gains on these investments totalled £0.4m compared to a gain of £0.1m in 2017/18. Stronger markets throughout the twelve months have increased the reported gain. The charity takes a moderate risk, long term strategy with its investments.

3.0 Balance Sheet

The funds of the charity at the end of the year totalled £7.8m, comprising £4.4m of unrestricted funds and £3.4m of restricted funds. Restricted funds are those that have a legal restriction placed on them, such as legacies. These funds are further split into general funds and designated (earmarked) funds, which are identified to specific areas and/or services.

3.1 Fixed Assets

During 2017/18 a piece of land located in Porthmadog was donated to the charity. The land was valued by the District Valuer and was brought onto the charity's balance sheet at £0.1m. The charity is currently still holding this land, although there are parties interested in purchasing it.

The year-end balance held in investments was £8.0m, which is an increase of £0.4m from 2017/18.

3.2 Current Assets

Debtors, as analysed in 'Note 16. Analysis of current debtors' have decreased by 58% to £0.4m (£0.8m in 2017/18). This is due to a decrease in accrued income for legacies, where we have been confirmed as a beneficiary in a Will and probate has been granted, but the distribution of the estate had not been completed.

Cash balances of £0.9m held have increased by 4%. Cash held at the end of the year is higher than would usually be held, but is required to pay creditors that fall due at the start of the new financial year.

3.3 Liabilities

Creditors, as can be seen in 'Note 18. Analysis of liabilities', amounted to £1.5m which is an 18% decrease year on year (£1.8m in 2017/18). This primarily due to a decrease in accruals for grants owed to NHS bodies, which are the funding commitments made by the charity and corresponds to the reduced expenditure seen during the year.

4.0 Other Notes

Other key items included in the financial statements are as follows.

4.1 Related Party Transactions (Note 2)

This note identifies the transactions made with the Health Board. As the Health Board and Charitable Funds accounts are produced under different accounting regulations, there is a timing difference as to when a grant that has been awarded by the charity is recognised. Therefore, this note contains two disclosures; one that mirrors that in the Health Board accounts and one that agrees to the expenditure reported through the charity accounts.

This note also includes details on Board members' interests where appropriate.

4.2 Post Balance Sheet Events (Note 22)

Due to the time delay between the balance sheet date and the sign off of the accounts, plus the materiality of the investments to the charity, a post balance sheet event is always recorded showing the movement in the value of the investments over this time.

5.0 Conclusion

The Charitable Funds Accounts have been prepared in accordance with the timetable set by the Charity Commission and in line with Charities SORP.

The Annual Report and Accounts, along with the Letter of Representation are submitted for approval by the Committee and signature by the Chair of the Charitable Funds Committee and the Executive Director of Finance, on behalf of the Committee.

The Board will formally receive the Accounts in early 2020. The audited Accounts will be submitted to the Charity Commission prior to 31st January 2020.

6.0 Recommendation

The Charitable Funds Committee is asked to approve the Charitable Funds Annual Report and Accounts for 2018/19, along with the Letter of Representation.



Awyr Las Blue Sky

Elusen GIG Gogledd Cymru
The North Wales NHS Charity



Annual Report & Accounts 2018/19



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Welcome from the Honorary President of



I am proud of many things we have all achieved in Wales, but I believe one of the finest things we have here in Wales is our National Health Service.

I am delighted that you are reading this Annual Report, because if you are it surely means that, like me, you truly care about ensuring that the most vulnerable in North Wales can receive the very best care and treatment when they need it most.

NHS Charities have now been in existence for 70 years, the same length of time as the NHS itself.

We in North Wales are blessed with a dedicated team of nurses, doctors, surgeons and support staff who show incredible compassion and commitment, innovation and professionalism.

I strongly believe we should all celebrate their achievements, but I feel we also need to recognise the limitations of our NHS.

The NHS has never been able to fund **everything** we would like to have in our hospitals or in our community healthcare services.

I feel we are fortunate to have Awyr Las, our NHS Charity, which plays a crucial role in enhancing our healthcare services in North Wales.

Donations to this charity give our various NHS teams the resources they need so that they might constantly strive towards better healthcare provision in North Wales, and improve the health and wellbeing for all families across the region.

In this report, you will see some fantastic examples of how this is happening.

In 2018, the year we celebrated the 70th anniversary of the NHS, I had the pleasure of supporting the Awyr Las #Give70 fundraising campaign.

I met many of the charity's frontline decision makers: the nurses, doctors and surgeons who are responsible for prioritising how donations should be directed to best help our patients.



I took part in the first NHS Big Tea in July and witnessed the pleasure on patients' faces when staff and volunteers organised Tea Parties and additional activities on hospital wards.

I was impressed to see others, including local businesses and community organisations, also getting behind this important initiative.

I chose to become involved in Awyr Las because I wanted to show my appreciation and also because I've seen first-hand the difference that donations given through the charity make to patients and their families.

Small changes, from additional arts supplies to keep children occupied or the introduction of complementary therapies for people undergoing cancer treatment. And then the large, for example new specialist equipment and modernised facilities.

These changes are funded through the charity and all have an impact on patients.

Many of us aren't even aware that we've been touched by the generosity of donors giving to Awyr Las when we go to our hospitals and use our community services.

In the past five years, the charity has funded over **£12 million** of improvements to local NHS healthcare services.

This includes funding for state-of-the-art equipment, new facilities, special projects and additional services, education, and research programmes.

This year, Awyr Las has been able to give **£1.7 million** to support NHS services across North Wales.

I am immensely proud of the impact that the charity has had on our local healthcare services, and I think all of us who have given through Awyr Las should be.



None of the impactful improvements we hear about in this report would be possible without the passion of those who are the beating heart of the charity: frontline NHS staff and the volunteers that support them. It certainly would not be possible without people like you.

On behalf of all of the NHS staff and patients that have benefitted from Awyr Las, I'd like to say a **huge thank you** to all those who give tirelessly to support the charity.

To the patients their families and friends. To NHS staff and their associates.

To our school children, local community groups and businesses; our national Foundations and Trusts.

These are wonderful people.

Since I was a young man I have worked hard to make sure the care and treatment that patients receive here in North Wales is always improving.

I pledge to continue to do that by continuing to campaign for our NHS and by supporting Awyr Las. In recent years, I have come to realise that the important extras the charity offers, which go **over and above** what the NHS can provide, do not just brighten patients' days.

Sometimes the equipment, improvements and research that Awyr Las funds give patients extra days, sometimes years, with their loved ones. That, to me, is priceless.

Here's to Awyr Las, our North Wales NHS Charity, and to our National Health Service. As we prepare to enter a new decade, may both continue to be cherished by us all and be enabled to flourish, so that **everyone** in North Wales has the opportunity to lead healthy, happy lives.

RT HON LORD BARRY JONES P.C.
HONORARY PRESIDENT



What the Charity does



Number of funds



412

Income in 2018/19



£2M

Acute hospitals in
North Wales



3

Community sites in
North Wales



45

Population served
by BCUHB



678K

Ensuring people across North Wales benefit from better NHS services when they need them the most.

Awyr Las (officially titled Betsi Cadwaladr University Health Board Charity and other related Charities) is a registered Charity (registered number 1138976) and is constituted under a trust deed dated 23rd September 2010.

Within the Charity group registration, there are two subsidiary charities: Betsi Cadwaladr University Health Board Charity and The North Wales Cancer Appeal.

The Betsi Cadwaladr University Health Board (BCUHB) is the Charity's legal corporate trustee. This means that, whilst the Board members are responsible

for the administration of the funds, they are not individually trustees of the Charity.

Awyr Las is the umbrella charity for over 400 Charitable Funds. Together, these funds support wards, units, departments, specialities and community projects right across North Wales.

Donations given through the Charity help dedicated NHS staff in hospitals and in communities across North Wales to offer an enhanced healthcare service, offering patients and their families the very best care and treatment available.

The Charity's priorities are decided by frontline nursing and medical staff.





96%
OF
**DONATIONS
WERE GIVEN TO
DESIGNATED
FUNDS**



What is funded

Awyr Las funds state-of-the-art equipment and new facilities; extra staff training and world-class research; special projects and additional services; complementary therapies and extra patient comforts which all go over and above what NHS core funding can provide.

Since 2010 Awyr Las has funded over £25m of improvements to healthcare services across the region thanks to the generosity of local people, national Foundations and grateful patients from far and wide.

This support has made a real difference to the lives of patients and their families, and has benefitted some of the most vulnerable people in our community.

As the Charity does not replace statutory NHS funding, your donations genuinely improve the care available to local people in ways that would not otherwise be possible.

Funding allocation

The charity funds healthcare projects in hospital environments and the community.

Internal

Funding available to BCUHB members of staff to use for the benefit of their patients within a hospital or community healthcare setting.

External

Funding available to local Third Sector Organisations working in partnership with BCUHB on health-related projects based anywhere in North Wales, or higher education institutions hosting BCUHB research projects.

Up to £5,000

Projects costing £5,000 and under can be authorised by Fund Advisors (BCUHB staff that act as guardians for their funds). This enables frontline staff to quickly access funding that will enable them to implement ideas that will make a tangible difference for their patients.

More than £5,000

Higher value projects go through the Charity's formal application and scrutiny process. This ensures projects are robust, will make best use of the charity's funds, and reduces duplication.

Designated funds

These funds belong to the ward, service or department that the fund is aligned to. When donors choose to give to a specific healthcare area, their donation goes into a designated fund. Designated funds can only be used to fund projects within that healthcare area.

Non-designated funds

When a donor chooses to give to the charity without specifying a healthcare area, their gift is put towards non-designated funds. These important donations help all BCUHB staff to access grants for the benefit of their patients, even if they do not have a designated fund to draw upon.



**Awyr Las
Blue Sky**



Values, Mission & Purpose

The Charity's overarching mission is to enhance BCUHB's ability to improve the health and wellbeing of people across North Wales and deliver excellent care.

The Charity exists for two reasons, both of which are equally important and both of which have a huge impact on the care and treatment that patients receive.

TO ENSURE THAT BCUHB CAN MEET ITS STRATEGIC PRIORITY OF IMPROVING HEALTHCARE

TO ENSURE THAT THOSE WHO WANT TO GIVE BACK TO SPECIFIC HEALTHCARE SERVICES ARE ABLE TO DO SO IN A WAY WHICH SUPPORTS LOCAL PRIORITIES

NHS Charities have been in existence since 1948 and have always played an important role in the above, but now they are needed more than ever. As we are living longer, many of us with complex health issues and diseases, there is a very real need for support from charitable sources in order to provide excellent care.

The Charity has traditionally focused on supporting secondary care, particularly cancer services, but there are two pressing issues which the Health Board needs to address:

- Ninety percent of the care people receive is from primary care and community services, and with predicted rises in cases of dementia and other mental health issues, cancer, diabetes and heart conditions there will be ever increasing demands on these services.
- There are also evident health inequalities in North Wales, with those living in the least deprived areas likely to live 13 years longer in better health than those living in the most deprived areas.

The challenge that faces the Charity is to effectively continue to provide the support needed on wards and departments in secondary care settings **and** secure the support to address the two pressing needs: to improve primary & community care provision and to reduce health inequality.



GUIDING PRINCIPLE

Patients are at the heart of Awyr Las



GUIDING PRINCIPLE

Frontline NHS staff are the lifblood of Awyr Las

2





The Charity's Support Team - made up of finance, fundraising and administrative support staff - exists to ensure that the charity's mission can be carried out.

The Support Team:

- Manages the charity's financial accounts, investment portfolio and grants programmes;
- Provides assistance to and guidance for the Fund Advisors who oversee the Charity's different funds;
- Helps fundraisers who want to organise events and activities in aid of the Charity;
- Organises fundraising events and initiatives to raise money in aid of the Charity;
- Promotes the Charity to raise money and raise the profile of giving to all healthcare services, and;
- Keeps in touch with supporters.

The Support Team also ensures that Awyr Las maximises your donations, for example by reclaiming thousands of pounds in Gift Aid annually. Additionally, the Support Team provides assistance to independent charities, like the Leagues of Friends, which provide direct charitable support to BCUHB.

THE CHARITY'S VALUES REFLECT THOSE OF THE HEALTH BOARD

1. Put patients first
2. Work together
3. Value and respect each other
4. Learn and innovate
5. Communicate openly and honestly



**£10,861
OF GIFT AID
RECLAIMED
FOR THE CHARITY**



GUIDING PRINCIPLE

**Be true to those who
support Awyr Las**





The year at a glance

INCOME & SOURCES

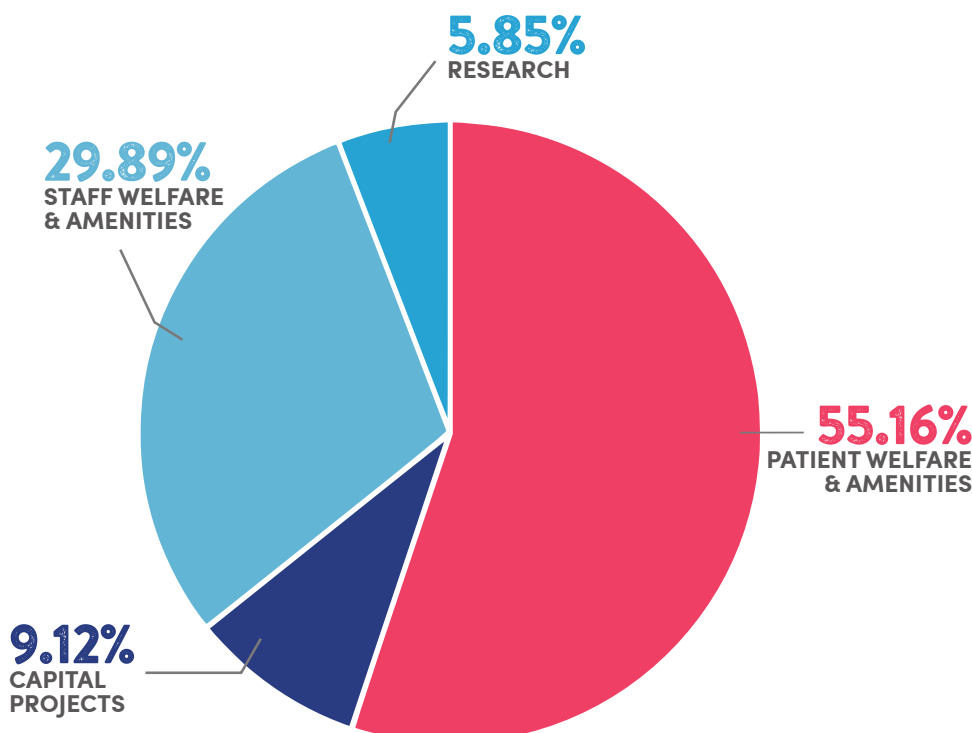
£1,950,000

The charity's total income from donations, legacies & fundraising*

*excludes investments



DISTRIBUTION OF EXPENDITURE 2018/19



Capital projects
£159,000

Staff welfare
£521,000

Research
£102,000

Patient welfare
£962,000

This year, Awyr Las funded

£1.7M

of services, improvements
and activities across
North Wales



SUPPORTING A WIDE RANGE OF HEALTH-RELATED ACTIVITIES:

-  Enhanced Patient Care
-  Equipment & Facilities
-  Improved Environments
-  Arts in Health
-  Training & Education
-  Research & Development



EXPENDITURE IN PRIORITY AREAS



Cancer Care - £416,572 // 23% of total expenditure



Early Years - £272,623 // 15% of total expenditure



Mental Health - £60,688 // 3% of total expenditure



70 years of the NHS

Celebrating a special milestone

The 5th July 2018 marked 70 years since the birth of the NHS. Colleagues from wards, departments and services across BCUHB joined in the celebrations, alongside patients, local businesses, voluntary organisations and the wider community.



The #Give70 campaign was launched in April and encouraged BCUHB staff and the general public to take part in the anniversary celebrations.

Individuals were invited to do simple things to say thank you to the NHS services that mean the most to them.



The campaign used the milestone as an opportunity to ask individuals to undertake a fundraising activity that was 70 themed.

From pledges to run 70 miles before the anniversary month was over, to activities that aimed to raise £70; the involvement #Give70 generated was varied, generous and creative.

Staff were encouraged to hold tea parties for their patients and team members, with 85 different wards and departments holding a party on the anniversary. Over 200 people attended the main "Big 7Tea" parties, held in the main entrances of the 3 acute hospitals.

We held a
'WHERE THERE'S TEA THERE'S HOPE'
themed event.



Staff dressed up as characters from "Call the Midwife" at our event!

We had a display board with information about births throughout the past 70 years and vintage medical equipment on display.

As a thank you for their hard work, we invited retired staff to attend and be served tea & cake.

The day was a great success with past, present and future staff catching up and sharing stories. It was thoroughly enjoyed by all. We raised £1,630 for the Maternity Unit from this great day which we think is a fantastic achievement.

SUSAN HUGHES
MIDWIFE
MATERNITY UNIT
YSBYTY GWYNEDD





ON YOUR MARKS, GET SET, BAKE!

As part of the celebrations, BCUHB staff and their friends & family were invited to submit entries into the first Awyr Las Cake Decorating Competition.

Nineteen talented bakers took part, with a public vote on Facebook deciding the top 3.

OVER
5,000
PEOPLE
VOTED

5.2K

#NHS70 Park Run



350
RAN
THE
PARKRUN



On Saturday 9th June over 350 people (many in NHS themed fancy dress!) took part in a special Parkrun at Erddig to celebrate the anniversary of the NHS.

This was part of a UK-wide initiative which saw over 145,000 people take part in a Parkrun near them to mark #NHS70.

Thank you to Conwy Parkrun and Erddig Parkrun volunteers who joined in the celebrations locally!



Grants

This year, Awyr Las distributed £1.7m of grants across the Charity's four priority areas: Cancer Care, Early Years, Mental Health and Older People. The largest area of spending was Patient Amenities & Welfare, representing over half (55.16%) of the Charity's expenditure.



"The new laser has been a revelation to our service.

It is an essential bit of equipment for providing the most up to date and clinically proven treatments for all patients when they are diagnosed with head and neck cancers."

**PROFESSOR ARVIND ARYA
MSC MD FRCS (ORL-HNS)**

**CONSULTANT ENT
HEAD & NECK / THYROID SURGEON**

The incidence of oropharyngeal cancers (OPC), primarily of the tonsil and tongue, is rapidly increasing.

Laser surgery has been proven to be a successful treatment for OPC and is becoming more commonplace in our clinical practice. Because of a rise in the number of OPC cases that were being diagnosed, the ENT team did not have the theatre equipment required to offer

all patients the life-saving laser treatment. Only one laser was available, enabling the team to perform one operation per operating list. This sometimes resulted in delays to surgery. With funding from Awyr Las, the ENT team purchased a new CO2 Laser. Use of the new equipment reduces the need for chemotherapy and radiotherapy.

KEY INFO



PROJECT
CO2 Laser

COST
£55,235

THEME
Cancer Care

SITE
Ysbyty Glan Clwyd

This is a better outcome for patients, reducing the length of treatment required and minimising the likelihood of complications after treatment. The laser equipment benefits all patients across North Wales, thanks to the centralisation of head and neck cancer services to Ysbyty Glan Clwyd.

The North Wales Clinical Research Centre (NWCRC), based in Wrexham, provides a world-class facility for undertaking clinical research, education & training, based on an innovative concept for collaborative working and increasing the transfer of knowledge.

It comprises research laboratories, clinical suites for undertaking non-laboratory based research, hot-desk facilities, offices, meeting and seminar rooms. The NWCRC provides a facility and service, allowing BCUHB staff to undertake laboratory based and non-laboratory based research investigations.

The aim of the NWCRC is to promote clinical research at BCUHB, and to encourage staff within the health board to undertake research activities, and to develop NWCRC as a centre of excellence for clinical research (locally, nationally and internationally).

Awyr Las provided £25,000 to purchase the initial equipment required to set up the centre to enable research to be undertaken.

KEY INFO

PROJECT

Start-up equipment for the NWCRC

COST

£25,000

THEME

Research & Development

SITE

North Wales Clinical Research Centre

Professor Stephen Hughes, Academic and Scientific Director of the NWCRC said: “It’s amazing to finally have the centre open. With this facility we now have a clinical research centre with fantastic equipment that allows the opportunity for our staff to be able to conduct cutting edge clinical research.

“Crucially, undertaking clinical research will benefit the people of North Wales at a national level and beyond. The aim of the research centre is to primarily provide a world class facility for our patients and members of the public, ensuring that North Wales is actively involved in undertaking cutting-edge clinical research.

“We have worked hard to get this facility open and we are looking forward to welcoming the public to the centre to see what we have happening.

“By having a research active Health Board, in turn will attract the very best clinicians and allied health professionals to the area, and will hopefully provide an opportunity for expansion and create new jobs.”





Grants

KEY INFO



PROJECT

Complementary Therapies

COST

£59,296

THEME

Cancer Care

SITES

Ysbyty Glan Clwyd

Ysbyty Gwynedd

Ysbyty Maelor



98%
OF PATIENTS
SAID IT
WORKED
WELL
FOR THEM

The side effects of cancer and its treatments are often painful and debilitating, but through complementary therapies, we can offer respite, comfort and emotional support to patients when they need it the most.

Complementary therapies can help to rekindle the spirit in patients living with cancer, support them in making lifestyle changes, and motivate them to move forward in life.

While our NHS provides the life saving and life prolonging drugs,

frontline staff, and basic facilities, we rely on the generosity of members of the public to ensure that we can continue to provide much valued added extras like complementary therapies, which are making a real difference to local cancer patients.

The provision of a complementary therapy service at all 3 acute sites has been made possible entirely by the support of generous communities, patients and families.

Inspired thinking offering massage to patients.

Very relaxing and takes thoughts and feelings of the chemotherapy away.

Wonderful. Thank you.

**PATIENT
SHOOTING STAR UNIT
WREXHAM**



Chronic kidney disease (CKD): Can we target blood vessel health to prevent disease progression and improve renal replacement therapy?

CKD is a disease of progressively worsening kidney function, which increases the risk of heart disease and death and results in the need for a kidney transplant or dialysis (also known as renal replacement therapy). CKD has many possible causes including common conditions such as high blood pressure, diabetes and obesity.

There has been some previous research suggesting that exercise may help to delay the progression of kidney disease, but the results have been inconclusive and further, larger studies are needed. We also need to understand better the mechanism by which exercise might be beneficial; previous research has shown that exercise can improve the health of blood vessels in patients with chronic kidney disease and this may lead to improvements in kidney function.

This study is a collaboration between Bangor University and King's College, London. Researchers are going to see if a 12 month structured exercise programme can help improve blood vessel health and kidney function in patients with chronic kidney disease.

It is hoped that the results of these studies will show that increased physical activity helps slow down the progression of kidney disease in our patients and will make a difference to patients' lives by delaying the need for renal replacement therapy. Eventually, this may lead to exercise therapy being offered as part of routine care to all patients with CKD.

KEY INFO



PROJECT

Chronic kidney disease research project

COST

£29,041

THEME

Research & Development

SITE

Bangor University

Parents and carers are always encouraged to stay on the ward when their children are admitted. In many cases, this involves staying the night. By using money from the Ysbyty Gwynedd Children's Unit fund, we were able to purchase 6 foldaway beds that are both comfortable and compliant with infection prevention and manual handling requirements. The new beds are in daily use on the ward, ensuring families can stay together when their child is poorly.

LIZ FLETCHER

ASSISTANT AREA DIRECTOR (WEST)
CHILDREN'S SERVICES



KEY INFO



PROJECT

Beds for parents & carers

COST

£5,129

THEME

Early Years

SITE

Ysbyty Gwynedd





Grants: Hearts & Minds

In 2018/19, Awyr Las introduced a new small grants scheme: Hearts & Minds. The scheme was designed to be accessible to all staff, and would award small amounts of funding to frontline staff wishing to trial innovative or creative ideas. The scheme was made possible by a number of donors, with a large proportion of the funding was provided by Grŵp Cynefin.

In total, 52 applications were submitted representing projects across North Wales, in both acute hospitals and community sites.

Applicants were invited to submit requests for up to £1,000 towards a project that would benefit their patients.

The criteria was flexible, with the only stipulation being that projects must benefit patients in the following healthcare areas:

- Mental health
- Learning disability
- Stroke
- Dementia care

The quality of the applications very high.

Twelve applications were funded through the Hearts and Minds Fund, with an additional £5,000 of undesignated charitable funds being allocated for this purpose.

A further 4 applications were funded by approaching relevant Fund Advisors and requesting support from funds they oversee.

A total of £12,530 was granted to 16 of the 52 applicants.



Aromatherapy on the Acute Medical Unit

Louise Lewis, a Dementia Support Worker on Ysbyty Glan Clwyd's Acute Medical Unit (AMU), had an idea to use aromatherapy to help patients arriving on the ward to relax.

Lousie explained:

"AMU is an extremely busy unit. We accept patients from the Emergency Department who are being admitted into hospital. Patients can be transferred to and from AMU any time of the day or night. When they arrive with us, patients can be very tired, agitated, confused and upset.

"My Hearts & Minds idea was to make AMU a more calming and settled environment for patients by placing aromatherapy kits in every room. I already massage patients' hands and feet, and play relaxing music. The aromatherapy complements this and helps aid rest and relaxation for the patients."



KEY INFO

PROJECT
Aromatherapy on AMU

COST
£1,000

THEME
Mental Health

SITE
Ysbyty Glan Clwyd

PATIENT FEEDBACK

"It was wonderful coming from the ED into a lovely relaxing room. My husband is a lot more settled than he was."



The Ysbyty Glan Clwyd Stroke Unit team explored the therapeutic benefit of drumming to provide sensory feedback to affected upper and lower limbs following a stroke.

Structured drumming sessions were provided for patients on the unit. Following each session, staff conducted a short interview with each patient and explored the positive aspects of engaging in the group and to discuss how it could improve.

The feedback from patients was very positive and demonstrated that engagement with lively, stimulating music intervention improved their overall feeling of well being.

Kirsty Edwards, Occupational Therapist, said:

"As a team, we are so grateful to have been awarded the Hearts and Minds grant to pilot the effect of active music intervention on post-stroke rehabilitation.

"We hope that stroke patients in a ward environment will benefit physically and psychologically through engagement with lively, stimulating and interactive music intervention.

"Beth, our lead Occupational Therapist in Stroke at Ysbyty Glan Clwyd was awarded the first Welsh Stroke Researchers Cochrane fellowship last year.

"The award has allowed her to work on a systematic review with the Cochrane Stroke and Dementia Groups. The primary aim of the project is to support the fellows in completing a Cochrane review, but other important aims are to foster multidisciplinary and cross-border collaborative working.

"Beth is reviewing the effectiveness of aromatherapy based interventions and the review is now in the final stages prior to publication."

KEY INFO



PROJECT

Music therapy to aid stroke recovery

COST

£1,000

THEME

Stroke Care

SITE

Ysbyty Glan Clwyd



PATIENT FEEDBACK

- "The vibration in my affected arm was a good sensation"
- "Uplifted the mood of the ward"
- "Music is a great therapy"
- "It helped me to relax - to focus on doing something 'for me'"
- "The sound of the drum encouraged my participation"



#TeamIrfon



Sybil Jones attends the Alaw Cancer Care Day Unit every Friday for chemo injections and bone strengtheners, and receives reflexology, which is funded through donations given to #TeamIrfon.

Sybil said:

"Sam provides reflexology for patients like me. She always manages to fit me in, even though her wonderful soothing foot reflexology is in demand from all of us on the Unit.

"I really don't think there is any better pain killer and because of her I really look forward to my weekly hospital visits. It's a wonderful service that she provides on the Alaw Unit."

The #TeamIrfon campaign was established in 2014 after local Nurse Manager, Irfon Williams, was diagnosed with advanced bowel cancer at the age of 43.

Irfon initially wanted to raise £5,000 because he and his wife Becky had realised that being diagnosed with cancer and going through treatment has a huge impact on the mental health of patients and their families.

Irfon and Becky felt the mental health aspect of cancer care required more attention, so formed #TeamIrfon to raise money to fund projects and facilities that specifically support the mental health of local cancer patients and families.

Devastatingly, Irfon died in May 2017; but his memory and #TeamIrfon lives on.

To date, over £180,000 has been raised and gone directly to local services. Becky now oversees #TeamIrfon alongside Matron Manon Williams. The dynamic pair, who have had huge support from their local community and generous businesses (including Watkin Jones and Dafydd Hardy), are dedicated to increasing support for bereaved families and continuing to fund mindfulness, complementary therapies and improved wigs for those patients who lose their hair.

Together supporters of #TeamIrfon are continuing to make Irfon's vision of better mental health support for people with cancer a reality.

Below: Rhys Meirion and Côr Glanaethwy performing at the inaugural #TeamIrfon Christmas





I know my uncle and aunt, Bob and Flora Livsey, would be thrilled to know that their legacy has had such a huge impact on people from their community here in North Wales. Thanks to them, so many people are able to get better care and treatment right here in Ysbyty Glan Clwyd.

Bob and Flora chose to remember the hospital in their will because they themselves had received such fantastic care. As the Trustee of the Fund they established, I am personally delighted to know that their gift has made such a difference and that it will go on helping local families for many years to come.

JOHN GRIFFITHS
BOB & FLORA'S NEPHEW
AND TRUSTEE OF
THE LIVSEY FUND



The late Bob and Flora Livsey decided to establish a Charitable Fund in their Will, with the intention of helping other patients being treated at Ysbyty Glan Clwyd in appreciation of the excellent medical care they had both received in the later years of their lives.

The Livsey Trust has now given £1,106,880 to support new equipment and better facilities. The impact of the couple's legacy is immense.

The Trust's most recent donation of £550,000 has helped to dramatically improve cardiac treatment at the hospital.

The Livsey Trust was a major driving force in developing a new state-of-the-art Hybrid Theatre for the hospital.

The new theatre forms part of a number of changes being made to vascular services in North Wales. The new centre at Glan Clwyd Hospital is now one of the best equipped in the UK, with expertise and facilities available around the clock to treat complex arterial cases.

The new theatre will give Interventional Radiologists and Vascular Surgeons the ability to perform traditional, open surgery and minimally invasive endovascular procedures on the same patients, at the same time, in the same place.

The 24-hour-a-day, 7-days-a-week consultant vascular emergency rota runs from Glan Clwyd Hospital, with the hybrid theatre providing state-of-the-art facilities to provide emergency vascular care.



The Robins volunteer scheme

Robins are renowned for their friendly nature

The Robins volunteer scheme is part-funded through donations given to Awyr Las, and the help the volunteers give in the hospitals is gratefully appreciated by everyone.



The purpose of the Robins scheme is to enhance the inpatient experience by introducing a volunteer befriending role onto the wards.

Robins are befrienders and provide practical support for patients.

This includes preparing hot & cold drinks, checking and refilling water jugs, spending time in general conversation, and providing a reading and writing service where appropriate.

Robins sometimes also go on errands to the hospital shop for patients.

They can assist nursing staff with bed making, help with storage of supplies, and tidy patient lockers.

Some Robins can offer a signposting service too, helping patients to understand the additional support available to them in the community.

In 2018/19 almost £27,000 was dedicated to supporting the development of The Robins, BCUHB's volunteer programme.



ROGER'S STORY

A Robin volunteer who ensures patients at Abergele Hospital get their morning newspapers has been named a "Seren Betsi". The BCUHB Seren Betsi (Betsi Star) award is given to staff and volunteers that have excelled.

Roger Harvey heads out in all weather conditions to make paper deliveries to patients at the two hospitals, and even helped staff get into work during the heavy snow last Winter.

Roger, who has been volunteering at the hospital for more than 10 years, was inspired to help others after receiving care at Glan Clwyd Hospital for a stroke in 2005.



Roger was nominated for the award by Domestic Assistant Angela Fortune, who he sees on his visits to Abergele Hospital.

Angela said: "I nominated Roger because he's a volunteer, using his own car, time and money to help others, and puts a big smile on patients' faces when he comes in in the morning.

"Without Roger some people who enjoy reading the papers would not have this luxury to look forward to. We just want to say thank you to him for all that he does."

**DONATIONS GIVEN TO
THE ROBINS**
FUND VOLUNTEER EXPENSES
INCLUDING TRAVEL, WHERE APPROPRIATE
AND THE DISTINCTIVE RED T-SHIRTS
WHICH ARE WORN WITH PRIDE BY
OVER 200 PEOPLE
ACROSS NORTH WALES



LAURA'S STORY

Laura McManus, from Talybont, near Barmouth, also received the Seren Betsi Award this year.

Sally Adams, Matron of Dolgellau Hospital, said: "Since Laura became a Robin here at Dolgellau Hospital I have noticed her incredibly kind approach with our patients.

"She has an excellent relationship with my staff on the ward and has a beautifully calming influence on everyone who is around her.

Laura said: "I'm delighted to receive the Seren Betsi Award as I'm really happy and privileged to be a Robin at Dolgellau Hospital."



ACHIEVEMENTS 2018/19



202 Robins provided support across North Wales



Robins assisted at 3 acute and 13 community sites



19,968 hours of time was gifted to the Robins scheme



2 volunteers were awarded the "Seren Betsi" Award



**Winners of BCUHB Achievement Award
for Outstanding Voluntary Contribution**



EDWARD

*It's a very rewarding role.
It's nice to be able to help people.*

FAZAL

*I've learned valuable life skills from patients and
from my co-workers who are all hugely inspiring.*

CYNTHIA

*When I go home at the end of the day
I feel I have done something worthwhile.*



Supporters

Every year, the Charity Support Team is overwhelmed by the efforts and achievements of Awyr Las' amazing supporters. This year is no exception. Support in 2018/19 ranged from 85 wards and departments holding "Big 7Tea" Parties to celebrate the 70th Anniversary of the NHS, to the Wrexham Maelor Children's Unit developing their Corporate Partnership with SP Energy Networks,

which was instrumental in helping them to raise over £25,000 through their first charity ball. The Charity Support Team is immensely grateful for the generosity of the many individuals, local businesses, and community organisations that contribute to Awyr Las. Their support helps the charity to ensure NHS staff across North Wales can go above and beyond for their patients.



Over the past two years we have been honoured to be principal sponsors of such a worthy cause for the Wrexham Maelor Children's Ward charity ball. SP Energy Networks are committed to supporting communities in North and Mid Wales, Cheshire, Mersey and North Shropshire through an extensive programme of local

sponsorships and community engagement programmes. We congratulate the Wrexham Maelor Children's Ward charity team for putting on such fantastic events to help raise outstanding amounts of money for children and their families being treated on the ward.

PHIL JONES
HEAD OF DELIVERY
SP ENERGY NETWORKS

THE VALUE OF THE PARTNERSHIP EQUATES TO A

1:5

RETURN ON INVESTMENT

"Without the vital support from local companies such as SP Energy Networks we simply wouldn't make as much money to directly benefit our patients. Sponsorship of our charity ball allows us to achieve full cost recovery for the event which means all money raised directly benefits the Wrexham Maelor Children's Unit.

Last year, due to kind sponsorship and in-kind support, we raised an outstanding £25,500 profit, helping to support patients and families we care for through new equipment and enhanced facilities to brighten patients' days."

LESLEY JONES
CHILDREN'S WARD STAFF NURSE
CHARITY BALL COMMITTEE MEMBER



"Walking for Dementia" is a multi-day, long distance walk undertaken annually by a small group of volunteers. On the final day of the challenge, NHS staff and members of the public are invited to take part in the final section of the walk, to raise money for special Dementia Care projects in hospitals.



"When I sat with my mother in the hospital and to be advised that she had dementia, little did I know how much it affects so many people and that there was a lot to understand about the disease.

When my mother passed away I honestly can say that the care and dignity from the nurses shown to my mum was exceptional and couldn't praise them enough. I felt that I needed to give something back and that is really how 'Walking for Dementia' started to challenge us all to raise money for the cause. This is our third year and feel that as a group we just want to carry on doing this for as long as our legs can do it and to make a difference to people's lives.



As a Fund Advisor on my own fund, I meet with staff from time to time, like Matron and the Dementia Support Workers, and discuss how we can best support patients and families affected by dementia. Matron will always contact me before any decision is made around funding, and we make sure that we all are in agreement about what would have the most impact for patients.

None of this could happen without the Awyr Las Support Team. The support we have had for the walks has been immense; from promoting the walk, social media coverage, helping to gain sponsorship, and more. I know the same support will be given to us with future events."

RONNIE BRIGHT
GENERAL OFFICE MANAGER
AWYR LAS FUND ADVISOR

The Walking for Dementia events are fantastic for the staff at Llandudno Hospital; it's great for the team to see the walkers arriving on-site after their long walk. It reminds staff that the general public, and their colleagues in the wider NHS, value their wonderful work in caring for patients living with dementia.

The money raised by the walkers genuinely enhances the experience patients have at Llandudno Hospital. One of the most significant things we are able to do with funding from Awyr Las is improve the patient environment. This year, we were able to install an LED ceiling on Aberconwy Ward, which makes being on the ward a more relaxing experience for patients.

PHILLIP RATHBONE
MATRON
LLANDUDNO HOSPITAL





Supporters



Tesla Owners UK donated a RadioFlyer Mini Tesla each to the children's units in Wrexham Maelor and Glan Clwyd, to improve the experience of being in hospital for children.

Tesla Owners UK is the official Tesla Owners' Group in the UK as confirmed by Tesla. The RadioFlyer Mini Tesla scheme is supported by Elon Musk, who match funds each car. So far, the group has donated over 160 cars across the UK.

Tom Last, a member of Tesla Owners UK, said:

"Being local to North Wales, I wanted to ensure that the children's units in the area were able to benefit from this initiative. This world is a cruel place sometimes and if we can put a smile on someone's face, we will do our best."



The Alaw Day Cancer Unit team do such fantastic work, and I am privileged and honoured to try and raise funds for these vital causes.

My priority since losing my wife to breast cancer 13 years ago has always been the Alaw Day Cancer Unit, which helped Yvonne to try and overcome this awful disease.

Many friends have passed away from cancer also, so to me it is vital that I do what I can to raise funds every year for this brilliant cause. We are all in debt to the nurses and staff of Ysbyty Gwynedd.

MALCOLM PITTS
LONG-TERM FUNDRAISER



Karen Jutson was part of a trio that cycled 300 miles from London to Paris this year.

Karen chose to support the Special Care Baby Unit at Ysbyty Glan Clwyd.

Karen, who previously worked on the SCBU, said: "The joy I had helping precious babies and meeting their families was incredibly fulfilling.

"With the new SuNICC (sub-regional neonatal intensive care centre) at Glan Clwyd Hospital, together with developing scientific advances, the future for our area looks extremely bright.

"I wanted to contribute to the centre by raising funds through this challenge, so the centre can continue to provide the best possible care."

**£7,393
RAISED**

**300
MILES**

**LONDON
TO
PARIS**



Leah Malbon's brother, now 34, was diagnosed with type one diabetes at the age of three.

Leah said: "My motivation for the London to Paris ride was based on a promise.

"On a recent occasion, when Stephen's health was particularly bad, I told him that the next challenge I did would be for him."

Leah chose to raise money for the Friends of Renal Care and Ward 12 (Renal & Diabetes), both at Ysbyty Glan Clwyd, where Stephen is a regular patient.



Volunteers from North Wales Garden World transformed North Wales Cancer Treatment Centre's Radiotherapy Garden.

The team tidied, weeded, and planted, and supplied lovely plants and furniture. Their hard work and generosity has made a huge difference to the area, and staff & patients are very grateful for the team's kindness.

North Wales

Garden World





Five year review



Capital projects

£5,254,000

Practical improvements to the patient environment, including ward refurbishments and equipment.

Staff welfare

£2,357,000

Non-mandatory and specialist training & development opportunities for staff and projects to safeguard staff wellbeing.

Research

£332,000

Funding for research, development and innovation; from consumables for laboratories to PhDs.

Patient welfare

£4,264,000

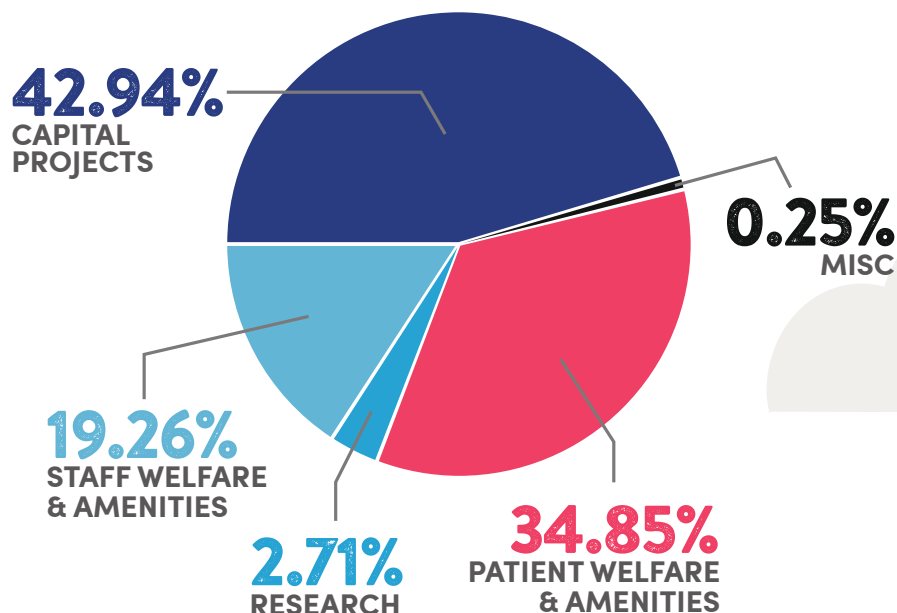
Projects that improve the experience of being in hospital, including arts in health initiatives and relatives' accommodation.

Miscellaneous

£30,000

Expenditure that does not fall into the other categories, including some administrative and legal services.

DISTRIBUTION OF EXPENDITURE (2014 - 2019)



SINCE 2014, DONATIONS TO AWYR LAS
HAVE MADE IT POSSIBLE TO INVEST OVER
£12 MILLION
OF ADDITIONAL FUNDING INTO LOCAL NHS HEALTHCARE SERVICES



INCOME & SOURCES

2014 - 2019

£12,503,000

The charity's income from donations, legacies & fundraising*

*excludes investments



LEGACY GIFTS



DONATIONS AND FUND RAISING



WERE MADE ONLINE



GIVING TRENDS

2014 - 2019

£1,975,372

Amount given to the charity in memory of friends & loved ones



DESIGNATED FUNDS



GIVEN IN MEMORY



VALUE OF AVERAGE DONATION



DONATIONS GIVEN





The Charity's investments

Many of the donations and legacies the Charity receives cannot be spent immediately, as they need to be accumulated to be able to fund the most appropriate purchases that improve patient care.

Therefore, Awyr Las invests these donations in order to generate income and protect their value in real terms. The Charity's Investment Managers are currently Rothschild Wealth Management Limited.

The Trustee has adopted an ethical framework for investments, with underlying principles supporting an ethical component of the overall investment strategy.

This has given direction to the Investment Managers to develop a suitable investment strategy which is consistent with these ethical principles, whilst affording sufficient flexibility to provide the best balance of risk and reward for the Charity.

The portfolio is managed in accordance with this agreed strategy, which is as follows:

"It is recommended that there is negative exclusion of investment in companies manufacturing and distributing:

- alcoholic products;
- tobacco products; and
- any products which may be considered in conflict with the Health Board's activities.

Investment in companies:

- which have a poor record in human rights and child exploitation; and/or
- which derive their profits from countries with poor human rights records

should not be permitted.

In addition, investment in companies that demonstrate compliance with the principles of the Equality Act 2010 should be supported."

Investment performance is monitored by the Charitable Funds Committee at its quarterly meetings.

The Committee receives reports from the investment managers explaining the portfolio's performance, the level of risk seen and expectations for the future.



Organisation of the Charity's affairs

The Betsi Cadwaladr University Health Board Charity and other related Charities (the Charity, working name Awyr Las), registered charity number 1138976, is constituted under a trust deed dated 23rd September 2010.

It is registered with the Charity Commission as the 'Umbrella Charity and Other Related Charities', with objects that the funds be used 'for any charitable purpose or purposes relating to the National Health Service'.

This registration arrangement, which simplifies the statutory reporting requirements, is formally recognised by a Declaration of Trust held by the Charity Commission.

Within this group registration arrangement there are two charities:

- Betsi Cadwaladr University Health Board Charity
- The North Wales Cancer Appeal (previously The Ron and Margaret Smith Cancer Appeal)

The Betsi Cadwaladr University Health Board is the legal Corporate Trustee of the Charity, which means that whilst the board members are responsible for the administration of the funds, they are not individually trustees of the Charity.

Trustee Recruitment, Appointment and Induction

The Board Members of the Health Board make up the corporate trustee. The Chair and Independent Members of the Health Board are appointed by the Minister for Health and Social Services of the Welsh Government, with the Executive Directors being appointed in accordance with Health Board policy.

New members of the Board are provided with appropriate induction and training on behalf of the Executive Director of Finance, along with previous year's Annual Reports and Financial Statements, copies of the Charity's Governing Documents and relevant Charity Commission publications.

Charity staff

The Charity does not directly employ any staff. The day to day management of the charity is delegated to the Executive Director of Finance.

Members of the Awyr Las Support Team are employed by the Health Board and then recharged to the charity in accordance with the proportion of their time that has been spent on charity work.

The Health Board Senior Manager responsible for the administration of the charity is Sue Hill, Executive Director of Finance. The Charity Accountant is Rebecca Hughes and the Head of Fundraising is Kirsty Thomson.

Key Management Personnel Remuneration

The trustees have concluded that the Corporate Trustee through the Charitable Funds Committee comprises the key management personnel of the Charity as they are in control of directing the Charity.

The Charity does not make any payments for remuneration nor to reimburse expenses to the Charity trustees for their work undertaken as trustee. Trustees are required to disclose all relevant interests, register them with the Health Board and withdraw from decisions where a conflict of interest arises. All related party transactions are disclosed in note 2 to the accounts.

The Charity's advisors

Bankers

NatWest Bank, 5 Queen St, Rhyl, Denbighshire, LL18 1RS

Investment advisors

Rothschild Wealth Management, New Court, St Swithin's Lane, London, EC4N 8AL

Registered auditors

Wales Audit Office, 24 Cathedral Road, Cardiff, CF11 9LJ





Board Members



Mr G Doherty
Chief Executive
01/04/18
TO
31/03/19

Dr E Moore
Executive Medical Director &
Deputy Chief Executive
01/04/18
TO
31/03/19

Mrs G Harris
Executive Director of Nursing &
Midwifery
01/04/18
TO
31/03/19

Ms D Carter
Acting Executive Director of
Nursing & Midwifery
18/03/18
TO
31/03/19

Mr A Thomas
Executive Director of Therapies &
Health Sciences
01/04/18
TO
31/03/19

Mr A Roach
Director of Mental Health and
Learning Disabilities & Associate
Board Member
01/04/18
TO
31/03/19

Mr G Lang
Executive Director of Strategy
01/04/18
TO
13/05/18

Mrs S Baxter
Acting Executive Director of
Strategy
14/05/18
TO
18/11/18

19/11/18
TO
31/03/19

Mr M Wilkinson

Executive Director of Planning and Performance

01/04/18
TO
31/03/19

Mrs S Green

Executive Director of Workforce and Organisational Development

01/04/18
TO
31/03/19

Ms T Owen

Executive Director of Public Health

01/04/18
TO
31/03/19

Mr R Favager

Executive Director of Finance

01/04/18
TO
30/06/18

Ms M Olsen

Chief Operating Officer

01/04/18
TO
31/03/19

Mrs G Lewis-Parry

Board Secretary

01/10/18
TO
31/03/19

Dr J C Stockport

Executive Director Primary Care and Community Services

01/04/18
TO
31/08/18

Dr P Higson OBE

Chairman

01/09/18
TO
31/03/19

Mr M Polin OBE QPM

Chair

01/04/18
TO
31/05/18

Mrs M Hanson

Vice Chair

01/06/18
TO
31/03/19

Mrs M W Jones

Vice Chair

*[Independent Member
01/04/18 to 31/05/18]*

01/04/18
TO
31/03/19

Prof J Rycroft-Malone

Independent Member

01/04/18
TO
31/08/18

Mr C Stradling

Independent Member

01/04/18
TO
31/03/19

Mrs L Meadows

Independent Member



Board Members



Mrs B Russell Williams

01/04/18
TO
05/03/19 Independent Member

Mr J Cunliffe

01/04/18
TO
31/03/19 Independent Member

Cllr C Carlisle

01/04/18
TO
31/03/19 Independent Member

Cllr R M Hughes

18/03/18
TO
31/03/19 Independent Member

Ms J Hughes

01/06/18
TO
31/03/19 Independent Member

Ms H Wilkinson

01/09/18
TO
31/03/19 Independent Member

Ms L Reid

01/09/18
TO
31/03/19 Independent Member

Mr Ff Williams

01/04/18
TO
31/03/19 Associate Board Member and
Chair (Stakeholder Reference
Group)

**01/04/18
TO
31/03/19** **Prof M Rees**
Associate Board Member and
Chair (Healthcare Professional
Forum)

**01/04/18
TO
31/05/18** **Mrs N Stubbins**
Associate Board Member and
Director of Social Services

**01/06/18
TO
31/03/19** **Ms M Edwards**
Associate Board Member and
Director of Social Services





Performance



The overall objective of the Charity is to provide additional support for the benefit of staff and patients within the Betsi Cadwaladr University Health Board in accordance with the wishes of the donors.

In order to achieve this, the Charity continues to raise staff awareness of fundraising and of the availability of funds and the mechanisms for accessing them.

To ensure that the Charity's money is well spent and meets with its objectives, all applications for grants over £5,000 require approval from either the Charitable Funds Advisory Group or the Charitable Funds Committee, which is a Committee of the full Health Board.

The Charitable Funds Advisory Group was established at the start of 2016 to provide further scrutiny of applications.

The Advisory Group is a sub-committee of the Charitable Funds Committee and has a wide ranging membership, including medical staff, service managers and patient representatives.

For applications between £5,001 and £25,000 the Advisory Group has delegated authority from the Committee to make a decision on approving or otherwise. For applications of over £25,000, the Advisory Group will provide comments for the Charitable Funds Committee's consideration to help inform their decision.

Applicants are required to provide details on key service benefits and ways to measure them, risks and mitigations, and how the proposal addresses health inequalities.

Charity Support Team

The Awyr Las Support Team grew this year.

Two new part-time members joining the team to help ensure that the Charity can keep its Fundraising Promise.

The Support Team prioritises building long-term relationships with supporters and the team aims to make sure all donors get the most out of their involvement with the charity.

The Support Team has helped over 100 different fundraisers and community groups organise fun, safe and sustainable fundraising events and activities over the year, and members of the team have also provided advice and support for external charities which independently support BCUHB healthcare services.

The team has proactively engaged with ongoing legal and regulatory changes, from GDPR to Fundraising Regulator reviews.

The Support Team has forged strong relationships with other NHS Charities to share best practice and work together where possible. The Charity did not receive any official fundraising-related complaints in the past year, though the Support Team did introduce new thanking procedures following feedback from donors concerning the time it sometimes took to receive an acknowledgement after a donation was made.

The Charity Support Team continues to make changes to its processes and partnerships with other teams within BCUHB to ensure the very best supporter care for all.

The Awyr Las Support Team has not uncovered any failure to comply with Fundraising Regulation by staff or Awyr Las volunteers in 2018/19.

The Awyr Las Support Team has chosen to not embark on contracting professional or commercial participators; the focus in 2018/19 has been on upskilling Support Team members and developing a dedicated, passionate crew to lead and support volunteers and supporters.



Grant-making

Awyr Las makes grants from both its restricted and unrestricted funds. These funds are further split into undesignated (general) funds and designated (earmarked) funds.

1. Undesignated funds — These funds are received by the Charity with no particular preference expressed by donors. They are used to fund things that are either needed across the region, or in areas/services that do not have their own fund. The Finance Director – Operational Finance acts as the Fund Advisor on undesignated funds and so can authorise expenditure up to £5,000. Undesignated funds have been decreasing in value significantly over the last few years. This is an ongoing challenge for the Charity as it limits the things that can be funded where there is no suitable designated fund.

2. Designated funds — Within Awyr Las, the majority of donations sit in one of the 400+ designated funds which are aligned to specific areas and/or services. Every fund has at least one Fund Advisor, who acts as the authorised signatory on the fund for purchases up to £5,000. Fund Advisors receive monthly statements outlining the income and expenditure on the fund. Fund Advisors are responsible for ensuring that the expenditure they authorise from their funds is appropriate and fits in with the objects of the fund and the Charity.

For all expenditure over £5,000, a scheme of delegation is in place whereby additional approvals are required from the senior team for that area in the Health Board and the Charitable Funds Committee (delegated to the Charitable Funds Advisory Group for applications £25,000 and under). This ensures that applications are fully reviewed and assessed alongside the objectives of the charity.

In planning activities for the year and when considering applications for grant funding, the trustees always consider the Charity Commission's guidance on public benefit.





Financial summary



The following figures are taken from the full accounts approved on 4th October 2019, which carry an unqualified audit report. The accounts should be viewed in full if more details are required. This part of the trustees' annual report comments on key features of those accounts. The full accounts have also been logged with the Charity Commission.

Almost all of the Charity's income comes from the voluntary efforts of NHS staff and the general public.

This year, donations generated £969,000 – 48% of the Charity's total income.

Fundraising accounted for 15% of the Charity's total income (£306,000).

Legacy gifts formed 33% of the Charity's income (£675,000).

Donations, fundraising and legacies combined account for 96% of the Charity's income this year (£1,950,000).

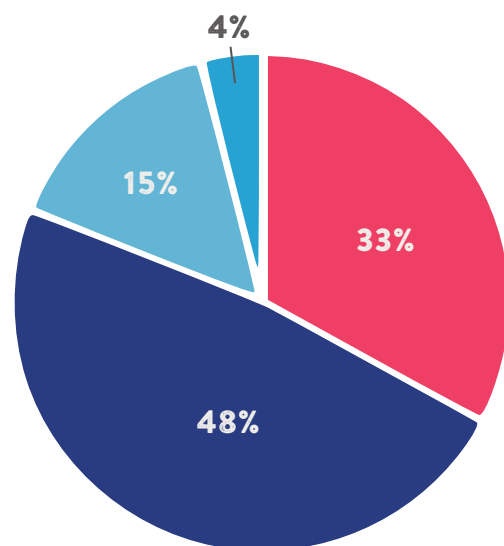
Investment of funds not immediately required by the Charity has generated £73,000 in returns, equating to 4% of Awyr Las' total income.

By supporting an existing fundraising event, or organising one of their own with the knowledge and approval of the Fundraising Support Team, thousands of people have had great fun whilst raising money for Awyr Las over the past year.

Committed volunteers, supported by the Fundraising Support Team, organised hundreds of 'in aid of' events; from small cake bakes to large-scale gala dinners this year, and supporters took part in organised events and challenges across the globe.

- DONATIONS [48%]**
- FUNDRAISING [15%]**
- INVESTMENTS [4%]**
- LEGACIES [33%]**

TOTAL INCOME 2018/19 £2,023,000



Financial health

The assets and liabilities of Awyr Las as at 31st March 2019 are shown below, compared with the position at 31st March 2018.

Further details can be seen in the financial statements section.

Balance Sheet as at 31 March 2019

	Note	Unrestricted funds £000	Restricted Income funds £000	Total 31 March 2019 £000	Total 31 March 2018 £000
Fixed assets:					
Tangible assets	14	135	0	135	135
Investments	15	4,415	3,547	7,962	7,572
Total fixed assets		4,550	3,547	8,097	7,707
Current assets:					
Debtors	16	198	154	352	841
Cash and cash equivalents	17	511	399	910	876
Total current assets		709	553	1,262	1,717
Liabilities:					
Creditors: Amounts falling due within one year	18	(828)	(645)	(1,473)	(1,799)
Net current assets / (liabilities)		(119)	(92)	(211)	(82)
Total assets less current liabilities		4,431	3,455	7,886	7,625
Creditors: Amounts falling due after more than one year	18	(27)	(21)	(48)	(28)
Total net assets / (liabilities)		4,404	3,434	7,838	7,597
The funds of the charity:					
Restricted income funds	21		3,434	3,434	3,282
Unrestricted income funds	21	4,404		4,404	4,315
Total funds		4,404	3,434	7,838	7,597

Fixed asset investments are investments in quoted stocks and shares. Net current assets represent cash held plus money owed to the Charity, less money owed by the charity to others and any outstanding (commitments made for grant funding that has not yet been spent). Creditors falling due after more than one year represent commitments made for grant funding where the scheme runs for more than one year. Restricted designated funds represent the money held by the charity which can only be used for specific purposes. Unrestricted designated funds represent the 400 plus designated funds which are identified to specific areas and/or services. They have been created in line with sections 90 and 91 of the National Health Service Act 1977 which require that the trustees respect, as far as practicable, the specific intentions of the gifts received through wards, departments and specialties. By designating funds the trustees ensure that those gifts are channelled towards charitable purposes in those areas. General Funds represent those funds available for distribution by the trustees at their discretion.



Risk Analysis



Managing risk

As part of the Charitable Funds Committee meetings that take place at least four times a year, the trustees consider the major risks facing Awyr Las.

The Committee have reviewed systems and identified steps to mitigate those risks. Five major or moderate risks have been identified and arrangements have been put in place to mitigate those risks.

1. Fundraising

There are four themes under this risk: risk of non-compliance with fundraising regulations; the risk of involvement with third parties; the risk that the charity is not aware of all fundraising taking place in its name; and the risk that not all basic processes are in place to ensure the very best support.

To mitigate the first of these risks the Charity has become a member of the Fundraising Regulator and is a member of the Association of NHS Charities.

The Charity Support Team members are encouraged to attend workshops and carry out additional training to ensure all members are aware of existing and new regulation and guidance.

The Charity works with a number of third parties, including volunteer fundraisers. In order to ensure all arrangements with these third parties are clear and set out at the start of the collaboration, third parties and a representative from the Charity Support Team signs a Collaborative Working Agreement (CWA) which lays out the terms of the relationship.

The Charity has numerous supporters, many of whom organise fundraising events in aid of the Charity. The Charity Support Team continues to foster good working relationships with staff across North Wales to ensure good communication links with staff, the public and donors to make sure people are aware of the need to seek approval from the Charity Support Team for any

fundraising being undertaken in the Charity's name.

A revised marketing and stewardship plan has been drawn up which is being implemented over the next 2 years. The plan is designed to help make sure all supporters receive recognition they deserve, and are kept abreast of how their donations make a difference should they choose to keep in touch with the Charity Support Team.

2. Fund Advisors

The Charity's Fund Advisors act on behalf of the Trustee in making certain decisions, but are not always aware of the Charity Commission guidelines that they need to follow. This creates a governance risk for the Charity.

To mitigate this risk a Fund Advisor Handbook has been developed to provide guidance and support to Fund Advisors in discharging their responsibilities. This document includes an Accountability Agreement for all Fund Advisors that ensures roles and responsibilities are understood and accepted.

All Fund Advisors are obliged to undertake an Annual Review of their fund. A rolling programme of Fund Advisor training has been established to minimise governance risk for the charity.

3. Appeals

There is a risk that the charity could give grants to and fundraise for items and services that are not strategic priorities.

The Charity Support team has launched a series of grants:

- The I CAN grant
- Hearts & Minds grants
- The Staff Experience grant

The purpose of these grant programmes is to identify priorities to be funded both now and in the future. The priorities that are presented by frontline staff are then categorised into 4 appeals:

- Older people
- Children and young people
- People with mental health problems
- Families affected by cancer

The appeals may support preventative programmes as well as new facilities, equipment and additional services for primary care and community settings as well as Ysbyty Glan Clwyd, Ysbyty Gwynedd and Wrexham Maelor.

4. Staff engagement

An engaged workforce is crucial to the success of the charity. There is a risk that staff are disengaged, or unaware of the charity, and so do not positively promote it with patients and potential donors.

To mitigate this, an action plan is being rolled out to better inform and involve all staff.

At the centre of this plan are Charity Champions who at ward, department or locality level can help promote the impact of the charity.

5. Investments

A large proportion of the charity's assets are held within the investment portfolio. There is a risk that the portfolio falls significantly in value and severely impairs the charity's ability to support future projects.

Monitoring of investments and the portfolio performance therefore needs to be a continual process. The charity's investment portfolio is monitored on a monthly basis by the Charity Support Team and on a quarterly basis by the Charitable Funds Committee.

The investment policy is reviewed by the Committee on an annual basis, in conjunction with the Investment Managers, to ensure it remains relevant to the charity's long-term strategy.





Future Plans



BENEFICIARIES



BENEFACTORS



BENDIGEDIG



BENEVOLENT

The charity's strategic plans are outlined in the Awyr Las Strategy for 2016 to 2021. The strategy highlights the importance of the four pillars of the Charity - the 'Bens'.



Beneficiaries:

The patients and families we serve



Benefactors:

The donors whose gifts ensure the Charity can continue to enhance healthcare provision



Bendigedig:

The NHS staff across North Wales



Benevolent:

The volunteers who give their time to support the Charity

The 'Bens' lie at the heart of all Awyr Las' future plans.



Principal Goals

The principal goals for the Charity are to help:

1. Create transformational change for the most vulnerable across the region
2. Support impactful change for patients and their families at a local level

Transformational Change

The Charity aims to prioritise programmes which help to improve the health and wellbeing of the most vulnerable across the region. Awyr Las provides support for all patients and service users but in order to help create transformational change, a greater emphasis is being placed on:

- Older people
- Children
- Mental Health services

Impactful Change

The Charity Support Team is working with operational staff, patients and their carers to identify local requirements (including new equipment and facilities; special project; research and education programmes) so that donations through the Charity will help support impactful change for patients and their families at a local level.

The Awyr Las Support Team is also focussing on achieving key operational goals, which are detailed in the Awyr Las Strategy for 2016-21, available to read in full at: awyrlas.org.uk/about-awyr-las.



Visibility



The Charity undertook a number of activities during the year to increase visibility and awareness of Awyr Las.

As part of this, the Awyr Las mascot, Nel Del, was used extensively throughout 2018/19 to engage with NHS staff, corporate supporters and the wider community.



Reserves Policy



Reserves that are part of a Charity's unrestricted funds which are freely available to spend on any of the Charity's purposes.

The reserves policy explains why a charity is holding a particular amount of reserves and should take into account the Charity's financial circumstances and other relevant factors.

To establish the Charity's target level of reserves, a number of factors were considered:

- Anticipated levels of income and expenditure for the current and future years.
- Anticipated levels of expenditure for the current and future years.
- Future needs and opportunities, commitments and risks.

This includes looking at future plans, projects or other spending needs that cannot be met from the income of a single year's budget.

Taking these into account, here is the Charity's reserves policy for 2018/19.

The reserves policy has the objective of ensuring that the Charity has sufficient funds available to maintain liquidity, cover unforeseen risks and provide for future opportunities.

The Charity relies heavily on income from donations, fundraising and legacies. These are unpredictable sources that can vary year to year. Therefore the Charity needs sufficient reserves to be able to continue its activities in the event of fluctuations in its income.

The Charity has a target level of reserves of £3,060,000.

This is based on the following calculation, with average figures taken from the last three years' of audited accounts:

- One year's administration costs (support costs, fundraising costs and investment management costs).
- 25% of the value of investments held.
- 25% of the grant funded activity expenditure.
- The target level of reserves will be reassessed on an annual basis.

The Trustee will review the actual reserves held against the target throughout the year, to ensure that sufficient funds are held within the charity, whilst also continuing to utilise funds within a reasonable period of receipt.



Awyr Las is one of over 250 NHS linked charities in England and Wales who are eligible to join the Association of NHS Charities, now known as NHS Charities Together.

NHS CHARITIES TOGETHER

As a member charity of NHS Charities Together, Awyr Las has the opportunity to discuss matters of common concern and exchange information and experiences, join together to lobby government departments and others, and to participate in conferences and seminars which offer support and education for Charity Support Team staff.

Related parties

Members of the Health Board (and other senior staff) take decisions both on the Charity and Health Board matters but endeavor to keep the interests of each discrete. The Charity provides the majority of its grants to the Betsi Cadwaladr University Health Board.

Relationship with the wider community

The support given through Awyr Las and other charities that directly support North Wales' hospitals and community health care services has a huge impact on patients and also on staff. The Awyr Las Support Team and volunteers continue to forge strong relationships with NHS members of staff and local organisations and businesses that play a vital role in the success of the Charity.

The Awyr Las Support Team oversees Awyr Las' grant programmes and provides support and advice for the charity's many supporters. In addition, support is given to independent local charities that fund equipment and special services, such as 'Leagues of Friends' and the 'Maelor Voluntary Service'.

In 2018/19, 19 of these independent charities collectively gifted £1,246,160 to benefit BCUHB health services.

The donations given to BCUHB services from these organisations are not included in the Awyr Las accounts. Nevertheless, we thought it was important that these important charities be recognised in this report for their invaluable contribution to BCUHB's services and to their local communities.

As Vice President of Attend, the National Association that supports Leagues of Friends, I feel privileged to have met many members of these local groups over the years and I have been amazed to see the impressive work their volunteers do. They are magnificent citizens with considerable ability and hearts of gold.

On behalf of BCUHB, I would like to offer sincere thanks for all that these wonderful charities do.

Barry Jones



With grateful thanks

RT HON LORD BARRY JONES P.C.

HONORARY PRESIDENT OF AWYR LAS & VICE PRESIDENT OF ATTEND



BETSI CADWALADR UNIVERSITY HEALTH BOARD CHARITY & OTHER RELATED CHARITIES

ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019

The accounts (financial statements) have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued on 16 July 2014 and the Charities Act 2011 and UK Generally Accepted Practice as it applies from 1 January 2015.

Statutory Background

The Betsi Cadwaladr University Local Health Board is the corporate trustee of the Charity under paragraph 16c of Schedule 2 of the NHS and Community Care Act 1990.

The Trustees have been appointed under s11 of the NHS and Community Care Act 1990.

Awyr Las, the working name of the Betsi Cadwaladr University Health Board Charity and other related Charities, is a registered charity and is constituted under a trust deed dated 23rd September 2010. Within the Charity group registration there are two subsidiary charities:

- Betsi Cadwaladr University Health Board Charity; and
- The North Wales Cancer Appeal.

Main Purpose of the Funds Held on Trust

The main purpose of the Charity is to apply income for any charitable purposes relating to the National Health Service wholly or mainly for the services provided by the Betsi Cadwaladr University Local Health Board.



Statement of Financial Activities for the year ended 31 March 2019

		Unrestricted funds £000	Restricted Income funds £000	Total Funds 2018-19 £000
	Note			
Incoming resources from generated funds:				
Donations and legacies	3	911	733	1,644
Other trading activities	5	247	59	306
Investments	6	43	30	73
Total incoming resources		1,201	822	2,023
Expenditure on:				
Raising Funds	7	196	122	318
Charitable activities	8	1,124	714	1,838
Total expenditure		1,320	836	2,156
Net gains / (losses) on investments	15	229	145	374
Net income / (expenditure)		110	131	241
Transfer between funds	20	(21)	21	0
Net movement in funds		89	152	241
Reconciliation of Funds				
Total Funds brought forward	21	4,315	3,282	7,597
Total Funds carried forward		4,404	3,434	7,838



Statement of Financial Activities for the year ended 31 March 2018

	Unrestricted funds £000	Restricted Income funds £000	Total Funds 2017-18 £000
Incoming resources from generated funds:			
Donations and legacies	1,137	876	2,013
Other trading activities	347	56	403
Investments	41	26	67
Total incoming resources	1,525	958	2,483
Expenditure on:			
Raising Funds	309	29	338
Charitable activities	1,391	1,371	2,762
Total expenditure	1,700	1,400	3,100
Net gains / (losses) on investments	83	37	120
Net income / (expenditure)	(92)	(405)	(497)
Transfer between funds	(103)	103	0
Net movement in funds	(195)	(302)	(497)
Reconciliation of Funds			
Total Funds brought forward	4,510	3,584	8,094
Total Funds carried forward	4,315	3,282	7,597



Balance Sheet as at 31 March 2019

		Unrestricted	Restricted	Total	Total
	Note	funds	Income	31 March	31 March
		£000	funds	2019	2018
		£000	£000	£000	£000
Fixed assets:					
Tangible assets	14	135	0	135	135
Investments	15	4,415	3,547	7,962	7,572
Total fixed assets		4,550	3,547	8,097	7,707
Current assets:					
Debtors	16	198	154	352	841
Cash and cash equivalents	17	511	399	910	876
Total current assets		709	553	1,262	1,717
Liabilities:					
Creditors: Amounts falling due within one year	18	(828)	(645)	(1,473)	(1,799)
Net current assets / (liabilities)		(119)	(92)	(211)	(82)
Total assets less current liabilities		4,431	3,455	7,886	7,625
Creditors: Amounts falling due after more than one year	18	(27)	(21)	(48)	(28)
Total net assets / (liabilities)		4,404	3,434	7,838	7,597
The funds of the charity:					
Restricted income funds	21		3,434	3,434	3,282
Unrestricted income funds	21	4,404		4,404	4,315
Total funds		4,404	3,434	7,838	7,597

The notes on pages 48 to 65 form part of these accounts.

Signed:

Name: (Chair of Trustees)

Date: 4th October 2019



Statement of Cash Flows for the year ending 31 March 2019

	Note	Total Funds 2018-19 £000	Total Funds 2017-18 £000
Cash flows from operating activities:			
Net cash provided by (used in) operating activities	19	(23)	391
Cash flows from investing activities:			
Dividend, interest and rents from investments	6	73	67
Proceeds from the sale of investments	15	1,429	1,248
Purchase of investments	15	(1,408)	(1,182)
(Increase) / decrease in cash awaiting investment	15	(37)	(78)
Net cash provided by (used in) investing activities		57	55
Change in cash and cash equivalents in the reporting period		34	446
Cash and cash equivalents at the beginning of the reporting period	17	876	430
Cash and cash equivalents at the end of the reporting period	17	910	876



Note on The Accounts

1. Accounting Policies

(a) Basis of preparation

The financial statements have been prepared under the historic cost convention, with the exception of investments which are included at fair value.

The accounts (financial statements) have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued on 16 July 2014 and the Charities Act 2011 and UK Generally Accepted Practice as it applies from 1 January 2015.

The accounts (financial statements) have been prepared to give a 'true and fair' view and have departed from the Charities (Accounts and Reports) Regulations 2008 only to the extent required to provide a 'true and fair view'. This departure has involved following Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued on 16 July 2014.

The Trustees consider that there are no material uncertainties about the Charity's ability to continue as a going concern. There are no material uncertainties affecting the current year's accounts.

In future years, the key risks to the Charity are a fall in income from donations or investment income but the Trustees have arrangements in place to mitigate those risks (see the risk management and reserves sections of the annual report for more information).

The Charity meets the definition of a public benefit entity under FRS 102.

(b) Funds structure

Where there is a legal restriction on the purpose to which a fund may be put, the fund is classified either as:

- A restricted fund or
- An endowment fund.

Restricted funds are those where the donor has provided for the donation to be spent in furtherance of a specified charitable purpose. The Charity's restricted funds tend to result from appeals or legacies for specified purposes.



(b) Funds structure (continued)

Endowment funds arise when the donor has expressly provided that the gift is to be invested and only the income of the fund may be spent. These funds are subanalysed between those where the Trustees have the discretion to spend the capital (expendable endowment) and those where there is no discretion to expend the capital (permanent endowment). The Charity has no permanent or expendable endowment funds.

Those funds which are neither endowment nor restricted income funds, are unrestricted income funds which are subanalysed between designated (earmarked) funds where the Trustees have set aside amounts to be used for specific purposes or which reflect the non-binding wishes of donors and unrestricted funds which are at the Trustees' discretion, including the general fund which represents the Charity's reserves. The major funds held in each of these categories are disclosed in note 21.

(c) Incoming resources

Income consists of donations, legacies, income from charitable activities and investment income.

Donations are accounted for when received by the Charity. All other income is recognised once the Charity has entitlement to the resources, it is probable (more likely than not) that the resources will be received and the monetary value of incoming resources can be measured with sufficient reliability.

Where there are terms or conditions attached to incoming resources, particularly grants, then these terms or conditions must be met before the income is recognised as the entitlement condition will not be satisfied until that point. Where terms or conditions have not been met or uncertainty exists as to whether they can be met then the relevant income is not recognised in the year and deferred and shown on the balance sheet as deferred income.

(d) Incoming resources from legacies

Legacies are accounted for as incoming resources either upon receipt or where the receipt of the legacy is probable, whichever falls sooner.

Receipt is probable when:

- Confirmation has been received from the representatives of the estate(s) that probate has been granted
- The executors have established that there are sufficient assets in the estate to pay the legacy and
- All conditions attached to the legacy have been fulfilled or are within the Charity's control.

If there is uncertainty as to the amount of the legacy and it cannot be reliably estimated then the legacy is shown as a contingent asset until all of the conditions for income recognition are met.



(e) Resources expended and irrecoverable VAT

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to each category of expense shown in the Statement of Financial Activities. Expenditure is recognised when the following criteria are met:

- There is a present legal or constructive obligation resulting from a past event
- It is more likely than not that a transfer of benefits (usually a cash payment) will be required in settlement
- The amount of the obligation can be measured or estimated reliably.

Irrecoverable VAT is charged against the category of resources expended for which it was incurred.

(f) Recognition of expenditure and associated liabilities as a result of grants

Grants payable are payments made to linked, related party or third party NHS bodies and non NHS bodies, in furtherance of the charitable objectives of the funds held on trust, primarily relief of those who are sick.

Grant payments are recognised as expenditure when the conditions for their payment have been met or where there is a constructive obligation to make a payment.

A constructive obligation arises when:

- We have communicated our intention to award a grant to a recipient who then has a reasonable expectation that they will receive a grant
- We have made a public announcement about a commitment which is specific enough for the recipient to have a reasonable expectation that they will receive a grant
- There is an established pattern of practice which indicates to the recipient that we will honour our commitment.

The Trustees have control over the amount and timing of grant payments and consequently where approval has been given by the Trustees and any of the above criteria have been met then a liability is recognised.

Grants are not usually awarded with conditions attached. However, when they are those conditions have to be met before the liability is recognised.

Where an intention has not been communicated, then no expenditure is recognised but an appropriate designation is made in the appropriate fund. If a grant has been offered but there is uncertainty as to whether it will be accepted or whether conditions will be met then no liability is recognised but a contingent liability is disclosed.



(g) Allocation of support costs

Support costs are those costs which do not relate directly to a single activity. These include staff costs, costs of administration, internal and external audit costs. Support costs have been apportioned between fundraising costs and charitable activities on an appropriate basis. The analysis of support costs and the bases of apportionment applied are shown in note 11.

(h) Fundraising costs

The costs of generating funds are those costs attributable to generating income for the Charity, other than those costs incurred in undertaking charitable activities or the costs incurred in undertaking trading activities in furtherance of the Charity's objects. The costs of generating funds represent fundraising costs together with investment management fees. Fundraising costs include expenses for fundraising activities and a fee paid to a related party, the Health Board, under a fundraising agreement. The fee is used to pay the salaries and overhead costs of the Health Boards' fundraising office.

(i) Charitable activities

Costs of charitable activities comprise all costs incurred in the pursuit of the charitable objects of the Charity. These costs, where not wholly attributable, are apportioned between the categories of charitable expenditure in addition to the direct costs. The total costs of each category of charitable expenditure include an apportionment of support costs as shown in note 8.

(j) Tangible assets

Tangible fixed assets are stated at cost less accumulated depreciation and accumulated impairment losses. Cost includes the original purchase price (or value of the asset on a full replacement cost basis if donated), costs directly attributable to bringing the asset to its working condition for its intended use, dismantling and restoration costs. Tangible fixed assets are capitalised if they are capable of being used for more than one year and have a cost equal to or greater than £5,000.

Land is stated at open market value. Valuations are carried out professionally at five-yearly intervals. No depreciation is applied to land.

Tangible fixed assets are derecognised on disposal or when no future economic benefits are expected. On disposal, the difference between the net disposal proceeds and the carrying amount is recognised in the Statement of Financial Activities (SoFA).



(k) Investments

Investments are a form of basic financial instrument. Fixed asset investments are initially recognised at their transaction value and are subsequently measured at their fair value (market value) at the balance sheet date. The Statement of Financial Activities includes the net gains and losses arising on revaluation and disposals throughout the year.

The main form of financial risk faced by the Charity is that of volatility in equity markets and other investment markets due to wider economic conditions, the attitude of investors to investment risk and changes in sentiment concerning equities and within particular sectors. Further information on the Charity's investments can be found in note 15.

(l) Debtors

Debtors are amounts owed to the Charity. They are measured on the basis of their recoverable amount.

(m) Cash and cash equivalents

Cash at bank and in hand is held to meet the day to day running costs of the Charity as they fall due. Cash equivalents are short term, highly liquid investments, usually in notice interest bearing savings accounts.

(n) Creditors

Creditors are amounts owed by the Charity. They are measured at the amount that the Charity expects to have to pay to settle the debt.

Amounts which are owed in more than a year are shown as long term creditors.

(o) Realised gains and losses

All gains and losses are taken to the Statement of Financial Activities as they arise. Realised gains and losses on investments are calculated as the difference between sales proceeds and opening carrying value (purchase date if later). Unrealised gains and losses are calculated as the difference between the closing and opening carrying values, adjusted for purchases and sales.



2. Related party transactions

During the year none of the Trustee's Representatives or members of the key management staff or their close relatives have undertaken any material transactions with the Betsi Cadwaladr University Health Board Charitable Funds.

Board Members (and other senior staff) take decisions both on Charity and Exchequer matters but endeavour to keep the interests of each discrete and do not seek to benefit personally from such decisions. Declarations of personal interest have been made in both capacities and are available to be inspected by the public.

The Charity has made grant payments for revenue and capital to the Betsi Cadwaladr University Health Board. Such payments are for specific items which are in furtherance of the Charity's objectives. The Betsi Cadwaladr University Health Board prepares its accounts in accordance with the Government Financial Reporting Manual (FReM) and International Financial Reporting Standards (IFRS), whereas the Charity prepares its accounts in accordance with FRS 102. The Charity therefore recognises a constructive obligation when it awards a grant, whereas the Health Board recognises it when the grant is received. This creates a timing issue as the Charity recognises expenditure before the Health Board does.

In its accounts and under FRS 102, the Charity recognises that it has made grant payments to the Betsi Cadwaladr University Health Board totalling £1.74 million (2017-18: £2.86 million). Under the FReM and IFRS, grant payments to the Betsi Cadwaladr University Health Board totalled £2.11 million (2017-18: £1.66 million). The audited accounts of the Betsi Cadwaladr University Health Board are included in their annual report and are available from their website.

Material transactions between the Charity and related parties disclosed during 2018-19 were as follows:	Expenditure with related party £000	Amounts owed to related party £000	Income from related party £000	Amounts owed by related party £000
Bangor University	70	62	0	0
Conwy County Borough Council	6	0	0	0
Arts Council of Wales	0	0	10	10
North Wales Police & Crime Commissioner	1	0	0	0



A number of the Health Board's members have declared interests in related parties as follows:

Name	Details	Interests
Mr G Doherty	Chief Executive	<ul style="list-style-type: none"> • Trustee of Dangerpoint, a charity which provides health and safety training to children across North Wales. This role is not remunerated. • Wife is employed by Health Education England.
Dr E Moore	Medical Director / Deputy Chief Executive	<ul style="list-style-type: none"> • Wife is the Clinical Director of Breast and Endocrine Surgery at the Royal Liverpool and Broadgreen University Teaching Hospital NHS Trust.
Mr A Thomas	Executive Director of Therapies and Health Sciences	<ul style="list-style-type: none"> • Panel member of the Health Care Professions Council. • Spouse is employed by Boots as an Accuracy Checking Technician.
Mr G Lang	Executive Director of Strategy (01/04/2018 – 13/05/2018)	<ul style="list-style-type: none"> • Governor of Coleg Cambria
Mr R Favager	Executive Director of Finance	<ul style="list-style-type: none"> • Daughter is on the NHS Wales Finance Graduate Scheme at the Health Board.
Dr J C Stockport	Executive Director Primary Care and Community Services (01/10/2018 – 31/03/2019)	<ul style="list-style-type: none"> • Occasional advice as a World Health Organisation expert consultant on integrated primary care. Basic expenses are reimbursed; no salary is taken.
Dr P Higson	Chair (01/04/2018 – 31/08/2018)	<ul style="list-style-type: none"> • Trustee of Cartrefi Cymru. • Self employed Clinical Psychologist.
Mr M Polin OBE QPM	Chair (01/09/2018 – 31/03/2019)	<ul style="list-style-type: none"> • Wife is employed by the Health Board.
Mrs M Hanson	Vice Chair (01/04/2018 – 31/05/2018)	<ul style="list-style-type: none"> • Husband is the Member of Parliament for Delyn.
Mrs M W Jones	Independent Member and Vice Chair	<ul style="list-style-type: none"> • Member of Snowdonia National Park Authority: April 2018 – July 2018. • Member of Pwyllgor Mind Cymru: April 2018 – July 2018. • Vice Chair of Arts Council Wales. • Chair of Council, Bangor University. • Trustee of Canolfan Gerdd William Mathias. • Trustee of Kyffin Williams Trust. • Sister and two nieces are employees of the Health Board.
Prof J Rycroft-Malone	Independent Member	<ul style="list-style-type: none"> • Programme Director – National Institute for Health NIHR HS&DR Research Programme. • Husband is employed by the Health Board.

(Table continued overleaf)



Accounts

Name	Details	Interests
Mr C Stradling	Independent Member (01/04/2018 – 05/03/2019)	<ul style="list-style-type: none"> • Deputy Chair of the Local Democracy and Boundary Commission for Wales. • Member of the Snowdonia National Park Authority.
Mrs B Russell Williams	Independent Member (01/04/2018 – 05/03/2019)	<ul style="list-style-type: none"> • Chief Executive Officer Mantell Gwynedd (Third sector umbrella body) • A number of family members are employed by the Health Board.
Mr J Cunliffe	Independent Member	<ul style="list-style-type: none"> • Director of Abernet Ltd. • Member of the Joint Audit Committee, North Wales Police & Crime Commissioner. • Spouse is employed by the Health Board.
Cllr C Carlisle	Independent Member	<ul style="list-style-type: none"> • Cabinet Member for Children, Families and Safeguarding for Conwy County Borough Council. • Deputy Leader of Conwy County Borough Council. • Member of Conwy & Denbighshire Joint Adoption Panel. • Lead Member for children on Conwy County Borough Council. • Group Leader of the Conservative Group of Conwy County Borough Council. • Deputy Chair (political) of the Clwyd West Conservatives. • Secretary of Old Colwyn local football club. • Committee member of Old Colwyn Residents Association. • Committee member of Tan Lan Community Centre.
Ms H Wilkinson	Independent Member (01/09/2018 – 31/03/2019)	<ul style="list-style-type: none"> • Chief Executive of Denbighshire Voluntary Services Council (NEWVOL).
Mrs L J Reid	Independent Member (01/09/2018 – 31/03/2019)	<ul style="list-style-type: none"> • Anakrisis Ltd (Management Consultancy) – provides consultancy and training to NHS organisations in England. • Tribunal Chair for the Medical Practitioners Tribunal Service of the General Medical Council. • Magistrate for the North Wales Family and Criminal Benches – HM Court and Tribunal Service. • Specialist advisor to the Care Quality Commission. • Spouse is a local GP practicing in Denbighshire.
Mr Ff Williams	Associate Board Member – Chair, Stakeholder Reference Group	<ul style="list-style-type: none"> • Chief Executive of Cartrefi Cymunedol Gwynedd, a housing association operating predominantly out of Gwynedd. In this role works closely with Health Board Area Directors. • Wife is employed by the Health Board. • Sister and Brother-in-Law work for Mental Health Services in Bangor (Childrens Services).



3. Income from donations and legacies

	Unrestricted funds £000	Restricted Income funds £000	Total 2018-19 £000	Total 2017-18 £000
Donations	911	58	969	1,170
Legacies	0	675	675	843
	911	733	1,644	2,013

4. Role of volunteers

Like all charities, the Betsi Cadwaladr University Health Board Charity is reliant on a team of volunteers for our smooth running. Our volunteers perform two roles:

- **Fund Advisors** – Within the Charity there are 379 designated funds which are identified to specific areas and/or services. Every fund has at least one Fund Advisor, who acts as the authorised signatory on the fund for purchases up to £5,000 and receives monthly statements as to the income and expenditure on the fund. Fund Advisors are responsible for ensuring that the expenditure they authorise from their funds is appropriate and fits in with the objects of the fund and the Charity. They are also responsible for ensuring that their designated fund is never in a deficit position.
- **Fundraisers** – A number of volunteers actively support the Charity by running in aid of events such as coffee mornings, sponsored walks and sports tournaments, as well as supporting events directly organised by the Charity.

In accordance with the SORP, due to the absence of any reliable measurement basis, the contribution of these volunteers is not recognised in the accounts.

5. Other trading activities

Income from other trading activities arises from fundraising events that are organised by the Charity, or by volunteers in aid of the Charity. These include events such as coffee mornings, cake bakes, sporting challenges and sponsored walks.



6. Gross investment income

	Unrestricted funds £000	Restricted Income funds £000	Total 2018-19 £000	Total 2017-18 £000
Fixed asset equity and similar investments	42	30	72	67
Short term investments, deposits and cash on deposit	1	0	1	0
	43	30	73	67

7. Analysis of expenditure on raising funds

	Unrestricted funds £000	Restricted Income funds £000	Total 2018-19 £000	Total 2017-18 £000
Fundraising office	125	89	214	195
Fundraising events	35	6	41	85
Investment management	27	20	47	46
Support costs	9	7	16	12
	196	122	318	338



8. Analysis of expenditure on charitable activity

	Grant funded activity £000	Support costs £000	Total 2018-19 £000	Total 2017-18 £000
Grants for NHS Capital expenditure	159	33	192	1,143
Staff education and welfare	521	24	545	681
Patient education and welfare	962	33	995	919
Medical research	102	4	106	(12)
Other	0	0	0	31
	1,744	94	1,838	2,762

9. Analysis of grants

The Charity does not make grants to individuals. All grants are made to the Health Board to provide for the care of NHS patients in furtherance of our charitable aims. The total cost of making grants, including support costs, is disclosed on the face of the Statement of Financial Activities and the actual funds spent on each category of charitable activity, is disclosed in note 8.

The Trustees operate a scheme of delegation for the charitable funds, under which Fund Advisors manage the day to day disbursements on their projects, in accordance with the directions set out by the Trustees in the Charity Standing Financial Instructions. Funds managed under the scheme of delegation represent ongoing activities and it is not possible to segment these activities into discrete individual grant awards. The Trustees do make grant awards based on invited applications from the Health Board.



10. Movements in funding commitments

	Current liabilities £000	Non-current liabilities £000	Total 31 March 2019 £000	Total 31 March 2018 £000
Opening balance at 1 April (see note 18)	1,409	28	1,437	297
Movement in liabilities	(538)	20	(518)	1,140
Closing balance at 31 March (see note 18)	871	48	919	1,437

As described in notes 8 and 9, the Charity awards a number of grants in the year. Many grants are awarded and paid out in the same financial year. However, some grants, especially those relating to research and development or for funding specific posts are multi-year grants paid over a longer period.

11. Allocation of support costs

Governance costs are those support costs which relate to the strategic and day to day management of a charity.

Support and overhead costs are allocated between fundraising activities and charitable activities based on the proportion of expenditure incurred against them both during the year. These support and overhead costs are then further allocated to unrestricted and restricted funds based on the balance held in these funds.

	Raising funds £000	Charitable activities £000	Total 2018-19 £000	Total 2017-18 £000
Governance				
External audit	1	9	10	10
Finance and administration	7	41	48	47
Total governance	8	50	58	57
Finance and administration	7	41	48	49
Other costs	1	3	4	9
	16	94	110	115



11. Allocation of support costs (continued)

	Unrestricted funds £000	Restricted Income funds £000	Total Funds 2018-19 £000	Total Funds 2017-18 £000
Raising funds	9	7	16	12
Charitable activities	53	41	94	103
	<u>62</u>	<u>48</u>	<u>110</u>	<u>115</u>

12. Trustees' remuneration, benefits and expenses

The Charity does not make any payments for remuneration nor to reimburse expenses to the Charity Trustees for their work undertaken as Trustees.

13. Auditors remuneration

The auditors remuneration of £10,250 (2017-18: £10,250) related solely to the audit of the statutory annual report and accounts.



14. Tangible fixed assets

	Freehold land 2018-19 £000	Freehold land 2017-18 £000
Cost and valuation		
Balance brought forward	135	0
Additions	0	135
Disposals	0	0
Balance at 31st March	<u>135</u>	<u>135</u>
Depreciation and impairments		
Balance brought forward	0	0
Disposals	0	0
Impairment	0	0
Balance at 31st March	<u>0</u>	<u>0</u>
Net book value at 1st April	135	0
Net book value at 31st March	<u>135</u>	<u>135</u>

During 2017-18, a piece of land located in Porthmadog was donated to the Charity, for the benefit of the Madog Community & Hospital fund. The land was independently and professionally valued at open market value by the District Valuer in March 2018. There has been no impairment to the land in 2018-19. The Charity intends to dispose of the land on the open market.

15. Fixed asset investments

Movement in fixed assets investments	Total 2018-19 £000	Total 2017-18 £000
Market value brought forward	7,572	7,440
Add: additions to investments at cost	1,408	1,182
Less disposals at carrying value	(1,414)	(1,208)
Increase / (decrease) in cash awaiting investment	22	38
Add net gain / (loss) on revaluation	374	120
Market value as at 31st March	<u>7,962</u>	<u>7,572</u>



15. Fixed asset investments (continued)

All investments are carried at their fair value.

All of the Charity's investments are held within a portfolio managed by Rothschild Wealth Management Limited. The key objective of the portfolio is to preserve and grow the investments' value in real terms, in order to continue to support charitable distributions over the long term. In order to meet this objective, the Trustees have agreed on a 'balanced' approach for the investment strategy. A 'balanced' portfolio is intended to achieve steady growth over the long term through a diversified approach to investment. Attention is paid to avoiding the worst of the downside and capturing some, but not all, of the upside of financial market returns. Capital preservation in real terms over a long time horizon is the primary objective, and some volatility is acceptable in order to achieve this.

In line with this investment strategy, at the 31st March 2019 the portfolio had a 69% allocation to return assets. Return assets are expected to drive long-term performance but are also likely to be volatile over shorter periods. In addition, the portfolio held a 31% allocation to diversifying assets. These assets are included to provide real diversification and protection in difficult market conditions. Overall, the portfolios remain relatively defensively positioned. This approach provides protection on the downside, but allows the addition of return assets opportunistically, taking advantage of attractive prices particularly during market turbulence.

The environment for investors remains challenging and fraught with risks. In managing our portfolios, Rothschild Wealth Management Limited assess these risks and the potential impact they will have on the portfolio on an on-going basis. They also adjust investments to make the most of opportunities and to protect against risks as they see them. Risks promote uncertainty and make markets unpredictable over short periods. A solid allocation to diversifying assets and portfolio protection has therefore been maintained, resulting in risk within the portfolio being considerably lower than the broader equity markets.

16. Analysis of current debtors

Debtors under 1 year	Total	Total
	31 March	31 March
	2019	2018
	£000	£000
Accrued income	340	708
Prepayments	1	2
Other debtors	11	131
	352	841



17. Analysis of cash and cash equivalents

	Total 31 March 2019 £000	Total 31 March 2018 £000
Cash in hand	910	876
	910	876

No cash or cash equivalents or current asset investments were held in non-cash investments or outside of the UK.

18. Analysis of liabilities

	Total 31 March 2019 £000	Total 31 March 2018 £000
Creditors under 1 year		
Trade creditors	120	47
Creditors owed to BCU	401	215
Accruals for grants owed to NHS bodies	871	1,409
Other accruals	81	128
	1,473	1,799
Creditors over 1 year		
Accruals for grants owed to NHS bodies	48	28
	48	28
Total creditors	1,521	1,827



19. Reconciliation of net income / expenditure to net cash flow from operating activities

	Total 2018-19 £000	Total 2017-18 £000
Net income / (expenditure) (per Statement of Financial Activities)	241	(497)
Adjustment for:		
(Gains) / losses on investments	(374)	(120)
Dividends, interest and rents from investments	(73)	(67)
Donated fixed assets	0	(135)
(Increase) / decrease in debtors	489	(141)
Increase / (decrease) in creditors	(306)	1,351
Net cash provided by (used in) operating activities	(23)	391

20. Transfer between funds

There have been the following transfers between material designated funds:

- £11,067 was transferred from General Funds (unrestricted) to North Wales Cancer Appeal (restricted) to refund the costs of the Charity.
- £10,102 was transferred from General Funds (unrestricted) to various restricted funds to reimburse net overall charity costs, less income from interest and investment gain/loss.



21. Analysis of funds

a. Analysis of restricted fund movements

	Balance 1 April 2018 £000	Income £000	Expenditure £000	Transfers £000	Gains and losses £000	Balance 31 March 2019 £000
General Fund, YG	455	77	(19)	0	21	534
North Wales Cancer Appeal	240	45	(21)	11	9	284
General Fund, YGC	247	33	(11)	0	11	280
Wrexham Medical Institute	273	2	(11)	0	10	274
BCU Legacies Fund	57	193	0	0	0	250
Cardiology Fund, YMW	138	87	(8)	0	7	224
General Fund, Llandudno	169	32	(7)	0	8	202
Leukaemia/Allied Blood Disease, YMW	166	2	(7)	0	6	167
General Fund, YMW	160	1	(7)	0	6	160
Pathology Leukaemia/Haematology, YG	115	1	(6)	0	4	114
Cardiology Department, YGC	176	1	(114)	0	5	68
Cancer Fund, YGC	155	120	(287)	0	12	0
Other Funds	931	228	(338)	10	46	877
	3,282	822	(836)	21	145	3,434

The objects of each of the restricted funds are to benefit the patients of the area, department or service stated in the funds' name, in accordance with the Charity's overall objectives. There is one fund listed above that is not aligned to a specific area:

- The BCU Legacies fund holds the accruals for legacies where probate has been granted, but we have not yet received the cash. This fund is used to protect the designated funds from fluctuations in the final legacy received. When the legacy is received it will be credited to the designated fund specified in the Will and the accrual will be reversed out from the BCU Legacies fund.

The Trustees have set an opening or closing balance of £100,000 or above as the threshold for the separate reporting of material designated funds. In the interests of accountability and transparency a complete breakdown of all such funds is available upon written request.



21. Analysis of funds (continued)

b. Analysis of unrestricted and material designated fund movements

	Balance 1 April 2018 £000	Income £000	Expenditure £000	Transfers £000	Gains and losses £000	Balance 31 March 2019 £000
Investment Gains	431	229	0	0	0	660
Cancer Fund, YGC	560	97	(42)	0	0	615
Alaw Ward, YG	248	158	0	0	0	406
Cancer Support Group, YMW	254	102	(53)	0	0	303
Staff Development Fund	205	0	(50)	0	0	155
Madog Community & Hospital	135	0	0	0	0	135
General Fund, Llandudno	130	0	0	0	0	130
General Fund, YG	130	0	0	0	0	130
Cardiology Department, YGC	102	12	0	0	0	114
Gynae Services - West	104	1	0	0	0	105
Palliative Care Fund, YMW	133	11	(40)	0	0	104
Diabetes & Endocrinology, Centre	101	2	(5)	0	0	98
Other Funds	1,782	589	(1,130)	(21)	229	1,449
	4,315	1,201	(1,320)	(21)	229	4,404

The objects of each of the unrestricted funds are to benefit the patients of the area, department or service stated in the funds' name, in accordance with the Charity's overall objectives. There is one fund listed above that is not aligned to a specific area:

- The Investment Gains fund holds the unallocated and unrealised gains and losses on the investment portfolio. This fund is used to protect the other designated funds from fluctuations in the investment values.

The General Funds include all donations for which a donor has not expressed any preference as to how the funds shall be spent. These funds are applied for any charitable purpose to the benefit of the patients of the Health Board, at the discretion of the Trustees.

The Trustees have set an opening or closing balance of £100,000 or above as the threshold for the separate reporting of material designated funds. In the interests of accountability and transparency a complete breakdown of all such funds is available upon written request.



22. Post balance sheet events

There is one post balance sheet event which has not been adjusted for in the accounts.

The accounting statements are required to reflect the conditions applying at the end of the financial year. No adjustments are therefore made for any changes in the market value of the investments between the 1st April 2019 and the date the accounting statements are approved. The market value of the investments held by the Charity as at the 31st March 2019 have increased by a material amount in the intervening period as follows:

	31 March 2019 £000	20 September 2019 £000	Movement £000	Movement %
Investments	7,962	8,325	363	4.56%



Statement of the Trustee's Finance Representative's Responsibilities

As the Trustee's Finance Representative for the Charity, I am responsible for:

- the maintenance of financial records appropriate to the activities of the funds.
- the establishment and monitoring of a system of internal control.
- the establishment of arrangements for the prevention of fraud and corruption.
- the preparation of annual financial statements which give a true and fair view of the Charity and the results of its operations.

In fulfilment of these responsibilities I confirm that the financial statements set out on pages 29 to 45 attached have been compiled from and are in accordance with the financial records maintained by the Trustee and with applicable accounting standards and policies for the NHS.

.....

Trustee's Finance Representative

4th October 2019



Statement of the Trustee's Responsibilities in Respect of the Accounts

The Trustee's Representatives are required under the National Health Services Act 1997 to prepare accounts for each financial year. The Welsh Government, with the approval of HM Treasury, directs that these accounts give a true and fair view of the financial position of the Charity. In preparing those accounts, the Trustee's Representatives are required to:

- apply on a consistent basis accounting policies laid down by the First Minister for Wales with the approval of HM Treasury.
- make judgements and estimates which are reasonable and prudent.
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the accounts.

The Trustee's Representatives confirm that they have complied with the above requirements in preparing the accounts.

The Trustee's Representatives are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Charity and to enable them to ensure that the accounts comply with requirements outlined in the above mentioned direction by the Welsh Government. They are also responsible for safeguarding the assets of the Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

By order of the Trustees

.....

Trustee's Representative

4th October 2019

.....

Trustee's Finance Representative

4th October 2019



Audit report of the Auditor General to the Trustee of the Betsi Cadwaladr University Health Board Charity

Report on the audit of the financial statements

Opinion

I have audited the financial statements of Betsi Cadwaladr University Health Board Charity for the year ended 31 March 2019 under the Charities Act 2011. These comprise the Statement of Financial Activities, the Balance Sheet, the Statement of Cash Flows and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 the Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In my opinion the financial statements:

- give a true and fair view of the state of affairs of the charity as at 31 March 2019 and of its incoming resources and application of resources for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the Charities Act 2011.

Basis for opinion

I conducted my audit in accordance with applicable law and International Standards on Auditing in the UK (ISAs (UK)). My responsibilities under those standards are further described in the auditors responsibilities for the audit of the financial statements section of my report. I am independent of the charity in accordance with the ethical requirements that are relevant to my audit of the financial statements in the UK including the Financial Reporting Councils Ethical Standard, and I have fulfilled my other ethical responsibilities in accordance with these requirements. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.



Audit report of the Auditor General to the Trustee of the Betsi Cadwaladr University Health Board Charity

Report on the audit of the financial statements (continued)

Conclusions relating to going concern

I have nothing to report in respect of the following matters in relation to which the ISAs (UK) require me to report to you where:

- the trustees use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the charity's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

Report on other requirements

Other information

The other information comprises the information included in the annual report other than the financial statements and my auditors report thereon. The trustees are responsible for the other information in the annual report and accounts. My opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in my report, I do not express any form of assurance conclusion thereon.

In connection with my audit of the financial statements, my responsibility is to read the other information to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by me in the course of performing the audit. If I become aware of any apparent material misstatements or inconsistencies I consider the implications for my report.



Audit report of the Auditor General to the Trustee of the Betsi Cadwaladr University Health Board Charity

Matters on which I report by exception

I have nothing to report in respect of the following matters, which the Charities (Accounts and Reports) Regulations 2008 require me to report to you if, in my opinion:

- the information given in the financial statements is inconsistent in any material respect with the trustees report;
- sufficient accounting records have not been kept;
- the financial statements are not in agreement with the accounting records and returns; or
- I have not received all of the information and explanations I require for my audit.

Responsibilities

Responsibilities of the trustees for the financial statements

As explained more fully in the statement of trustees responsibilities, the trustees are responsible for preparing the financial statements in accordance with the Charities Act 2011, for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the charity's ability to continue as a going concern, disclosing as applicable, matters related to going concern and using the going concern basis of accounting unless deemed inappropriate.



Audit report of the Auditor General to the Trustee of the Betsi Cadwaladr University Health Board Charity

Auditor's responsibilities for the audit of the financial statements

I have been appointed as auditor under section 150 of the Charities Act 2011 and report in accordance with regulations made under section 154 of that Act.

My objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of the auditor's responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website www.frc.org.uk/auditorsresponsibilities. This description forms part of my auditors report.

Adrian Crompton
Auditor General for Wales
9 October 2019

24 Cathedral Road
Cardiff
CF11 9LJ

SUPPORT AWYR LAS

Your North Wales NHS Charity

There are many ways in which you can help your local NHS Charity, either as an individual, a business, community group, school or other organisation:



Support the ward that's close to your heart with a regular gift or a one-off donation



Sponsor one of our priority projects and fundraise for a cause throughout the year



Take part in a fundraising event, or organise your own



Leave a gift in your will



Share the Charity's work on social media and encourage others to do the same

Text AWYR LAS to 70500 to give £5 now
100% of your donation will go to the charity

For more information about how you can get involved and make a difference for patients across North Wales, please contact the Awyr Las Support Team.

01248 384 395
awyrilas@wales.nhs.uk
awyrilas.org.uk



/awyrilascharity

The address of the charity and the corporate trustee's principal office is:

Awyr Las
Ysbyty Gwynedd
Penrhosgarnedd
Bangor
LL57 2PW

Awyr Las: The North Wales NHS Charity
Registered Charity Number 1138976





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Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

Auditor General for Wales
Wales Audit Office
24 Cathedral Road
Cardiff
CF11 9LJ

Dyddiad / Date: 4th October 2019

Representations regarding the 2018-19 financial statements

This letter is provided in connection with your audit of the financial statements of Betsi Cadwaladr University Health Board Charity for the year ended 31 March 2019 for the purpose of expressing an opinion on their truth and fairness and their proper preparation.

We confirm that to the best of our knowledge and belief, having made enquiries as we consider sufficient, we can make the following representations to you.

Management representations

Responsibilities

We have fulfilled our responsibilities for the preparation of the financial statements in accordance with legislative requirements and the Charities Act 2011; in particular the financial statements give a true and fair view in accordance therewith.

We acknowledge our responsibility for the design, implementation, maintenance and review of internal control to prevent and detect fraud and error.

Information provided

We have provided you with:

- Full access to:
 - all information of which we are aware that is relevant to the preparation of the financial statements such as books of account and supporting documentation, minutes of meetings and other matters;
 - additional information that you have requested from us for the purpose of the audit; and
 - unrestricted access to staff from whom you determined it necessary to obtain audit evidence.
- The results of our assessment of the risk that the financial statements may be materially misstated as a result of fraud.
- Our knowledge of fraud or suspected fraud that we are aware of and that affects Betsi Cadwaladr University Health Board Charity and involves:
 - management;



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- employees who have significant roles in internal control; or
- others where the fraud could have a material effect on the financial statements.
- Our knowledge of any allegations of fraud, or suspected fraud, affecting the financial statements communicated by employees, former employees, regulators or others.
- Our knowledge of all known instances of non-compliance or suspected non-compliance with laws and regulations whose effects should be considered when preparing the financial statements.
- The identity of all related parties and all the related party relationships and transactions of which we are aware.

Financial statement representations

All transactions, assets and liabilities have been recorded in the accounting records and are reflected in the financial statements.

Significant assumptions used in making accounting estimates, including those measured at fair value, are reasonable.

Related party relationships and transactions have been appropriately accounted for and disclosed.

All events occurring subsequent to the reporting date which require adjustment or disclosure have been adjusted for or disclosed.

All known actual or possible litigation and claims whose effects should be considered when preparing the financial statements have been disclosed to the auditor and accounted for and disclosed in accordance with the applicable financial reporting framework.

The financial statements are free of material misstatements, including omissions.

Specific representations

Market value of investments: a material increase of £363,000 in the market value of investments (as at 20th September 2019) held by the Charity has been reported since the balance sheet date and is referred to as a non-adjusting post balance sheet event in the financial statements.

Representations by those charged with governance

We acknowledge that the representations made by management, above, have been discussed with us.

We acknowledge that the accounts contain an uncorrected misstatement and are content with the reasons provided to the auditors by management for this misstatement. A small number of grant commitments were not accrued and as a result there is an uncorrected misstatement of £20,000. The effect of this is not material to the 2018-19 financial statements and the costs have been recognised in 2019-20. As a result they remain uncorrected, but we will review our arrangements in the preparation of the 2019-20



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accounts to ensure that commitments are accounted for in accordance with our accounting policies.

We acknowledge our responsibility for the preparation of true and fair financial statements in accordance with the applicable financial reporting framework. The financial statements were approved by the Charitable Funds Committee on the 4th October 2019.

We confirm that we have taken all the steps that we ought to have taken in order to make ourselves aware of any relevant audit information and to establish that it has been communicated to you. We confirm that, as far as we are aware, there is no relevant audit information of which you are unaware.

Signed by:
Chair of the Charitable Funds Committee
and Trustees Representative – on behalf
of those charged with governance

4th October 2019

Signed by:
Executive Director of Finance of the
Corporate Trustee and Trustee's
Finance Representative – on behalf of
management

4th October 2019



WALES AUDIT OFFICE
SWYDDFA ARCHWILIO CYMRU

Archwilydd Cyffredinol Cymru
Auditor General for Wales

Audit of Financial Statements Report – **Betsi Cadwaladr University Local Health Board Charity**

Audit year: 2018-19

Date issued: September 2019

Document reference: 1508A2019-20



This document has been prepared as part of work performed in accordance with statutory functions.

In the event of receiving a request for information to which this document may be relevant, attention is drawn to the Code of Practice issued under section 45 of the Freedom of Information Act 2000.

The section 45 code sets out the practice in the handling of requests that is expected of public authorities, including consultation with relevant third parties. In relation to this document, the Auditor General for Wales and the Wales Audit Office are relevant third parties. Any enquiries regarding

disclosure or re-use of this document should be sent to the Wales Audit Office at

info.officer@audit.wales.

Contents

The Auditor General intends to issue an unqualified audit report on your financial statements. There are some issues to report to you prior to their approval.

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Summary report

Introduction

- 1 The Auditor General is responsible for providing an opinion on whether the financial statements give a true and fair view of the financial position of the Betsi Cadwaladr University Local Health Board Charity (the Charity) at 31 March 2019, and its income and expenditure for the year then ended.
- 2 We do not try to obtain absolute assurance that the financial statements are correctly stated but adopt the concept of materiality. In planning and conducting the audit, we seek to identify material misstatements in your financial statements, namely, those that might result in a reader of the accounts being misled.
- 3 The quantitative levels at which we judge such misstatements to be material for the Charity is £43,000. Whether an item is judged to be material can also be affected by certain qualitative issues such as legal and regulatory requirements and political sensitivity.
- 4 International Standard on Auditing (ISA) 260 requires us to report certain matters arising from the audit of the financial statements to those charged with governance of a body in sufficient time to enable appropriate action.
- 5 This report sets out for consideration the matters arising from the audit of the financial statements of the Charity, for 2018-19, that require reporting under ISA 260.

Status of the audit

- 6 We received the draft financial statements for the year ended 31 March 2019 on 30 July 2019 to coincide with the planned audit delivery period and have now substantially completed our audit work.
- 7 We are reporting to you the more significant issues arising from the audit, which we believe you must consider prior to approval of the financial statements. The audit team has already discussed these issues with the Finance team.

Proposed audit report

- 8 It is the Auditor General's intention to issue an unqualified audit report on the financial statements once you have provided us with a Letter of Representation based on that set out in [Appendix 1](#).
- 9 The proposed audit report is set out in [Appendix 2](#).

Significant issues arising from the audit

Uncorrected misstatements

- 10 We set out below one misstatement that we identified in the financial statements, which has been discussed with management but remains uncorrected, and request that it is corrected. If you decide not to correct the misstatement, we ask that you provide us with the reasons for non-correction.

Grant commitments of £20,000 have not been accrued in accordance with the Charity's accounting policy.

- 11 The Charity is not consistently applying its accounting policy on the recognition of expenditure as a result of grants. The policy states that grant payments are recognised as expenditure when the conditions for their payment have been met or where there is a constructive obligation to make a payment.
- 12 We identified a number of commitments totalling £20,000 which had not been accrued for in the 2018-19 financial statements.

Corrected misstatements

- 13 There are misstatements that have been corrected by management, but which we consider should be drawn to your attention due to their relevance to your responsibilities over the financial reporting process. They are set out with explanations in [Appendix 3](#).

Other significant issues arising from the audit

- 14 In the course of the audit, we consider a number of matters both qualitative and quantitative relating to the accounts and report any significant issues arising to you.
- 15 The draft financial statements were generally well prepared and supported by timely and relevant working papers.

We have one concern about the qualitative aspects of your accounting practices and financial reporting

- 16 As referred to in paragraphs 11 to 12, the Charity is not consistently applying its accounting policy on the recognition of expenditure as a result of grants.
- 17 Our work identified that the Charity has procedures in place to ensure that it correctly accrues for obligations above £5,000, but the procedures do not ensure that obligations less than £5,000 are consistently accrued. As reported, we identified commitments totalling £20,000 that should have been recognised in the 2018-19 financial statements and it may still be the case that other low-value items

remain uncorrected. However, we have been able to satisfy ourselves that these would not give rise to material mis-statement within the financial statements.

- 18 The Charity needs to review its closedown procedures relating to the preparation of its financial statements to ensure that it correctly and consistently applies its accounting policy on the recognition of expenditure as a result of grants.

There are no other matters that we need to report to you

- 19 There are no other matters to report to you. In particular:
- We have no matters significant to the oversight of the financial reporting process that we need to report to you.
 - We did not encounter any significant difficulties during the audit.
 - There were no significant matters discussed and corresponded upon with management which we need to report to you.
 - We did not identify any material weaknesses in your internal controls.
 - There are not any other matters specifically required by auditing standards to be communicated to those charged with governance.

Recommendations arising from our 2016-17 and 2017-18 financial audit work

- 20 We set out the recommendation arising from our 2016-17 audit work with a summary of action taken by management during 2017-18.

Exhibit 1: Recommendations arising from our 2016-17 financial audit work

Recommendation	Management and Audit Response
<p>The process to identify related party transactions needs to be strengthened</p> <p>Enhance the supporting guidance for completion of the declaration of interest form to help ensure that Board members and other relevant staff declare all relevant relationships for the Charity</p>	<p>Management Response</p> <p>We will request that the systems team update the accompanying guidance for the completion of declaration of interest form as part of the next system update.</p> <p>Implementation date: March 2018</p> <p>Audit Response</p> <p>Following a similar recommendation on the audit of the BCULHB financial statements, the declaration of interest form was amended to improve the definition of family members. However, there is still no explicit reference to the Charity and there is therefore a risk that those making declarations do not consider this.</p>

- 21 In 2017-18 we suggested that management should fully implement the outstanding part of this accepted recommendation when obtaining the 2018-19 declarations. It was therefore disappointing to note during this year's audit testing that the amendment to explicitly reference the Charity had not been implemented. We will write separately to the Board Secretary, as we consider it essential that this matter is now addressed.

Recommendation arising from our 2018-19 financial audit work

- 22 The recommendation arising from our financial audit work is set out in [Appendix 4](#). Management has responded to this and we will follow up progress on it during next year's audit. Where any actions are outstanding, we will continue to monitor progress and report it to you in next year's report.

Independence and objectivity

- 23 As part of the finalisation process, we are required to provide you with representations concerning our independence.
- 24 We have complied with ethical standards and in our professional judgment, we are independent, and our objectivity is not compromised. There are no relationships between the Wales Audit Office and the Charity that we consider to bear on our objectivity and independence.

Appendix 1

Final Letter of Representation

[Audited body's letterhead]

Auditor General for Wales
Wales Audit Office
24 Cathedral Road
Cardiff
CF11 9LJ

4 October 2019

Representations regarding the 2018-19 financial statements

This letter is provided in connection with your audit of the financial statements of Betsi Cadwaladr University Health Board Charity for the year ended 31 March 2019 for the purpose of expressing an opinion on their truth and fairness and their proper preparation.

We confirm that to the best of our knowledge and belief, having made enquiries as we consider sufficient, we can make the following representations to you.

Management representations

Responsibilities

We have fulfilled our responsibilities for the preparation of the financial statements in accordance with legislative requirements and the Charities Act 2011; in particular the financial statements give a true and fair view in accordance therewith.

We acknowledge our responsibility for the design, implementation, maintenance and review of internal control to prevent and detect fraud and error.

Information provided

We have provided you with:

- Full access to:
 - all information of which we are aware that is relevant to the preparation of the financial statements such as books of account and supporting documentation, minutes of meetings and other matters;
 - additional information that you have requested from us for the purpose of the audit; and
 - unrestricted access to staff from whom you determined it necessary to obtain audit evidence.

- The results of our assessment of the risk that the financial statements may be materially misstated as a result of fraud.
- Our knowledge of fraud or suspected fraud that we are aware of and that affects Betsi Cadwaladr University Health Board Charity and involves:
 - management;
 - employees who have significant roles in internal control; or
 - others where the fraud could have a material effect on the financial statements.
- Our knowledge of any allegations of fraud, or suspected fraud, affecting the financial statements communicated by employees, former employees, regulators or others.
- Our knowledge of all known instances of non-compliance or suspected non-compliance with laws and regulations whose effects should be considered when preparing the financial statements.
- The identity of all related parties and all the related party relationships and transactions of which we are aware.

Financial statement representations

All transactions, assets and liabilities have been recorded in the accounting records and are reflected in the financial statements.

Significant assumptions used in making accounting estimates, including those measured at fair value, are reasonable.

Related party relationships and transactions have been appropriately accounted for and disclosed.

All events occurring subsequent to the reporting date which require adjustment or disclosure have been adjusted for or disclosed.

All known actual or possible litigation and claims whose effects should be considered when preparing the financial statements have been disclosed to the auditor and accounted for and disclosed in accordance with the applicable financial reporting framework.

The financial statements are free of material misstatements, including omissions.

Specific representations

Market value of investments: a material increase of £363,000 in the market value of investments (as at 20th September 2019) held by the Charity has been reported since the balance sheet date and is referred to as a non-adjusting post balance sheet event in the financial statements.

Representations by those charged with governance

We acknowledge that the representations made by management, above, have been discussed with us.

We acknowledge that the accounts contain an uncorrected misstatement and are content with the reasons provided to the auditors by management for this misstatement. A small number of grant commitments were not accrued and as a result there is an uncorrected misstatement of £20,000. The effect of this is not material to the 2018-19 financial statements and the costs have been recognised in 2019-20. As a result, they remain uncorrected, but we will review our arrangements in the preparation of the 2019-20 accounts to ensure that commitments are accounted for in accordance with our accounting policies.

We acknowledge our responsibility for the preparation of true and fair financial statements in accordance with the applicable financial reporting framework. The financial statements were approved by the Charitable Funds Committee on 4 October 2019.

We confirm that we have taken all the steps that we ought to have taken in order to make ourselves aware of any relevant audit information and to establish that it has been communicated to you. We confirm that, as far as we are aware, there is no relevant audit information of which you are unaware.

Signed by:

Chairman of the Charitable Funds
Committee and Trustees Representative –
on behalf of those charged with
governance

4 October 2019

Signed by:

Executive Director of Finance of the
Corporate Trustee and Trustee's
Finance Representative – on behalf of
management

4 October 2019

Appendix 2

Proposed audit report of the Auditor General to the Trustees of the Betsi Cadwaladr University Health Board Charity

Report on the audit of the financial statements

Opinion

I have audited the financial statements of Betsi Cadwaladr University Health Board Charity for the year ended 31 March 2019 under the Charities Act 2011. These comprise the Statement of Financial Activities, the Balance Sheet, the Statement of Cash Flows and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 the Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In my opinion the financial statements:

- give a true and fair view of the state of affairs of the charity as at 31 March 2019 and of its incoming resources and application of resources for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the Charities Act 2011.

Basis for opinion

I conducted my audit in accordance with applicable law and International Standards on Auditing in the UK (ISAs (UK)). My responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of my report. I am independent of the charity in accordance with the ethical requirements that are relevant to my audit of the financial statements in the UK including the Financial Reporting Council's Ethical Standard, and I have fulfilled my other ethical responsibilities in accordance with these requirements. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Conclusions relating to going concern

I have nothing to report in respect of the following matters in relation to which the ISAs (UK) require me to report to you where:

- the trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the charity's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

Report on other requirements

Other information

The other information comprises the information included in the annual report other than the financial statements and my auditor's report thereon. The trustees are responsible for the other information in the annual report and accounts. My opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in my report, I do not express any form of assurance conclusion thereon.

In connection with my audit of the financial statements, my responsibility is to read the other information to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by me in the course of performing the audit. If I become aware of any apparent material misstatements or inconsistencies I consider the implications for my report.

Matters on which I report by exception

I have nothing to report in respect of the following matters, which the Charities (Accounts and Reports) Regulations 2008 require me to report to you if, in my opinion:

- the information given in the financial statements is inconsistent in any material respect with the trustees' report;
- sufficient accounting records have not been kept;
- the financial statements are not in agreement with the accounting records and returns; or
- I have not received all of the information and explanations I require for my audit.

Responsibilities

Responsibilities of the trustees for the financial statements

As explained more fully in the statement of trustee's responsibilities, the trustees are responsible for preparing the financial statements in accordance with the Charities Act 2011, for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the charity's ability to continue as a going concern, disclosing as applicable, matters related to going concern and using the going concern basis of accounting unless deemed inappropriate.

Auditor's responsibilities for the audit of the financial statements

I have been appointed as auditor under section 150 of the Charities Act 2011 and report in accordance with regulations made under section 154 of that Act.

My objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise

from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of the auditor's responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website www.frc.org.uk/auditorsresponsibilities. This description forms part of my auditor's report.

Adrian Crompton
Auditor General for Wales
9 October 2019

24 Cathedral Road
Cardiff
CF11 9LJ

Appendix 3

Summary of corrections made to the draft financial statements which should be drawn to the attention of Trustees of the Betsi Cadwaladr University Health Board Charity

During our audit we identified the following misstatements that have been corrected by management, but which we consider should be drawn to your attention due to their relevance to your responsibilities over the financial reporting process.

Exhibit 1: Summary of corrections made to the draft financial statements

Value of correction	Reason for correction	Impact
£65,700	The reversal of creditor balances from the previous month had incorrectly been shown as a debtors in the balance sheet rather than being netted off the creditors in the balance sheet.	Reduce Debtors and Creditors by £65,700. No overall impact.
There have also been several other minor amendments and disclosure updates as a result of our work.		

Appendix 4

Recommendation arising from our 2018-19 financial audit work

We set out below the single recommendation arising from our audit this year, together with management's response to it. We will follow up this next year and include any outstanding issues in next year's audit report.

Exhibit 2: recommendations arising from our 2018-19 financial audit work

Matter arising 1 – there were inconsistencies in the methodologies used in the preparation of estimates and a lack of documentation around judgements of estimates and accounting journals	
Findings	Commitments totalling £20,000 had not been accrued in line with the Charity's accounting policy on the recognition of expenditure as a result of grants.
Priority	High
Recommendation	The Charity should review its closedown procedures relating to the preparation of the financial statements to ensure that it recognises expenditure in accordance with its accounting policy.
Benefits of implementing the recommendation	To ensure that the financial statements are correctly stated.
Accepted in full by management	Yes
Management response	We will review the accounting policy and ensure that grant expenditure is recognised in accordance with it.
Implementation date	March 2020

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24 Cathedral Road
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**Charitable Funds
Committee**

 4th October 2019

CF19/34


GIG
CYMRU
NHS
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 Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

To improve health and provide excellent care

Report Title:	Charitable Funds Finance Report Q1 2019/20
Report Author:	Rebecca Hughes, Charity Accountant
Responsible Director:	Sue Hill, Executive Director of Finance
Public or In Committee	Public
Purpose of Report:	Attached is the Finance Report for the Charity as at the 30 th June 2019.
Approval / Scrutiny Route Prior to Presentation:	The Report is brought for approval by the Charitable Funds Committee.
Governance issues / risks:	There are no governance issues for the Health Board of this paper.
Financial Implications:	<p>Key points to note are:</p> <ol style="list-style-type: none"> 1. Income from Donations and Fundraising is £7,000 higher and legacy income is £55,000 higher than in Quarter 1 of 2018/19. 2. Grant funded charitable expenditure of £689,000 is £270,000 (64%) higher than expenditure for the first quarter last year 3. The gain on investments totals £237,000, which equates to 3% of the brought forward portfolio value. 4. Commitments have increased by £301,000 (33%) compared to the end of the last financial year, reflecting the rise in grants awarded in the first quarter. 5. Available unrestricted reserves total £4,470,000, compared to a target level of £3,060,000, and available General Funds totalled £159,000.
Recommendation:	The Committee is asked to approve the report and the actions being taken.

Health Board's Well-being Objectives <i>(indicate how this paper proposes alignment with the Health Board's Well Being objectives. Tick all that apply and expand within main report)</i>	√	WFGA Sustainable Development Principle <i>(Indicate how the paper/proposal has embedded and prioritised the sustainable development principle in its development. Describe how within the main body of the report or if not indicate the reasons for this.)</i>	√
1.To improve physical, emotional and mental health and well-being for all	√	1.Balancing short term need with long term planning for the future	√
2.To target our resources to those with the greatest needs and reduce inequalities	√	2.Working together with other partners to deliver objectives	√
3.To support children to have the best start in life	√	3. those with an interest and seeking their views	√
4.To work in partnership to support people – individuals, families, carers, communities - to achieve their own well-being	√	4.Putting resources into preventing problems occurring or getting worse	√
5.To improve the safety and quality of all services	√	5.Considering impact on all well-being goals together and on other bodies	√
6.To respect people and their dignity	√		
7.To listen to people and learn from their experiences	√		
Special Measures Improvement Framework Theme/Expectation addressed by this paper <i>Not applicable</i>			
Equality Impact Assessment <i>Not applicable – the report does not impact directly on staff or patients</i>			

Disclosure:

Betsi Cadwaladr University Health Board is the operational name of Betsi Cadwaladr University Local Health Board



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Charitable Funds Finance Report

June 2019

Rebecca Hughes

Charity Accountant

Betsi Cadwaladr University Health Board

1. Summarised financial performance

1.1 Statement of Financial Activities

	Year to 30 th June 2019 £'000	Year to 30 th June 2018 £'000
Donations & fundraising	239	232
Legacies	56	1
Investment income	39	35
Total income	334	268
Grant funded charitable expenditure	(689)	(419)
Governance & support costs	(29)	(25)
Fundraising expenditure	(54)	(73)
Investment management	(15)	(14)
Total expenditure	(787)	(531)
Gain/(loss) on investments	237	204
Net movement in funds	<u>(216)</u>	<u>(59)</u>

1.1.1 Income

- Donations and Fundraising is £7,000 higher than in the same period last year. The number of donations received has increased (from 1,277 to 1,394), but the average donation value has fallen (from £244 to £225).
- Legacy income is £55,000 higher than in quarter 1 of 2018/19.
- Overall, total income has increased by £66,000 or 25%, however it is still less than at the same point in previous years.

1.1.2 Expenditure

- Grant funded charitable expenditure of £689,000 is £270,000 (64%) higher than expenditure for the first quarter last year and can be broken down as follows:
 - Actual expenditure in year: £197,000
 - Commitments awarded in 2019/20 not yet spent: £492,000
- Notable grants awarded in the first quarter of 2019/20 are £41,000 for patient furniture at the Alaw Day Unit and £75,000 additional funding towards the Hybrid theatre at YGC.

1. Summarised financial performance

- Fundraising expenditure is £19,000 lower than for the same period last year and includes the costs of fundraising by individual wards and departments, as well as the pay and non-pay costs of the Fundraising Team to date. Section 4.5 has further detail of the Fundraising Team budget.

1.1.3 Investments

- The gain on investments totals £237,000, which equates to 3% of the brought forward portfolio value.

1.2 Balance Sheet

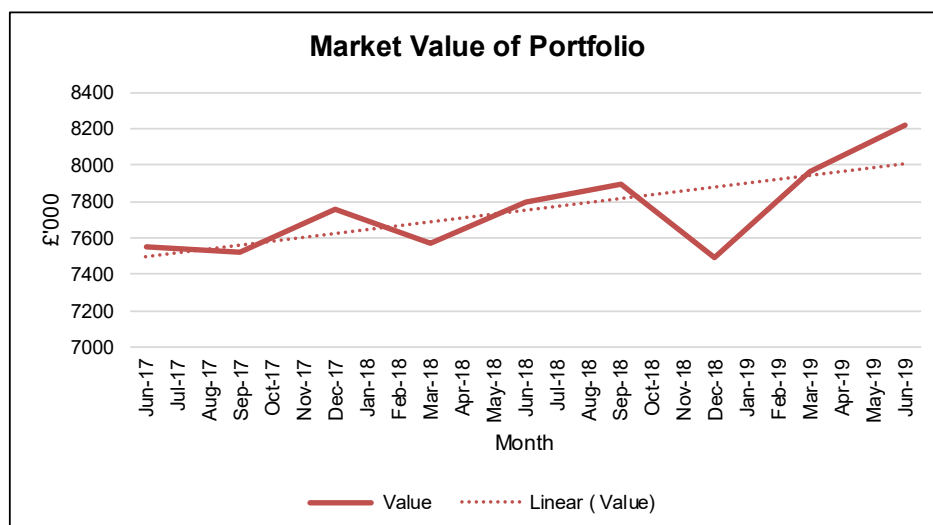
	As at 30/06/19 £'000	As at 31/03/19 £'000
Long term investments	8,223	7,962
Land	135	135
Total fixed assets	8,358	8,097
Debtors	203	418
Cash at bank and in hand	438	910
Total current assets	641	1,328
Creditors falling due within one year	(157)	(668)
Net current (liabilities)/assets	484	660
Creditor for commitments	(1,220)	(919)
Net assets	<u>7,622</u>	<u>7,838</u>
Unrestricted fund balances	4,470	4,404
Restricted fund balances	3,152	3,434
Net assets	<u>7,622</u>	<u>7,838</u>

1.2.1 Assets and liabilities

- Long term investments have increased by £261,000 over the 2018/19 year end valuation, continuing the upward trend. The change in the value of the investments

1. Summarised financial performance

reflects the revaluation gain on the portfolio plus investment income, offset by investment management costs.



- Total cash held has decreased by £472,000 during the first three months of the year. A high cash balance was held at the end of 2018/19 and this was not invested as it was expected that additional expenditure would arise at the start of 2019/20 due to the high year end creditor balance. This has been the case and the cash balance is now much reduced.
- The provision for commitments is the value of outstanding expenditure that has been approved at past Committee meetings and is still unspent. Commitments have increased by £301,000 (33%) compared to the end of the last financial year, reflecting the rise in grants awarded in the first quarter.

1.2.2 Reserves

- Available unrestricted reserves total £4,470,000 compared to a target level of £3,060,000. Therefore the Charity is holding sufficient reserves.
- Available General Funds totalled £159,000 at the 30th June 2019.

1.3 Further actions

- Continued focus on the implementation of the fundraising strategy to increase both donation and legacy income.
- Working with Fund Advisors to ensure they have a plan for the utilisation of funds that are held.

1.4 Recommendation

- The Committee is asked to approve the report and the actions being taken.

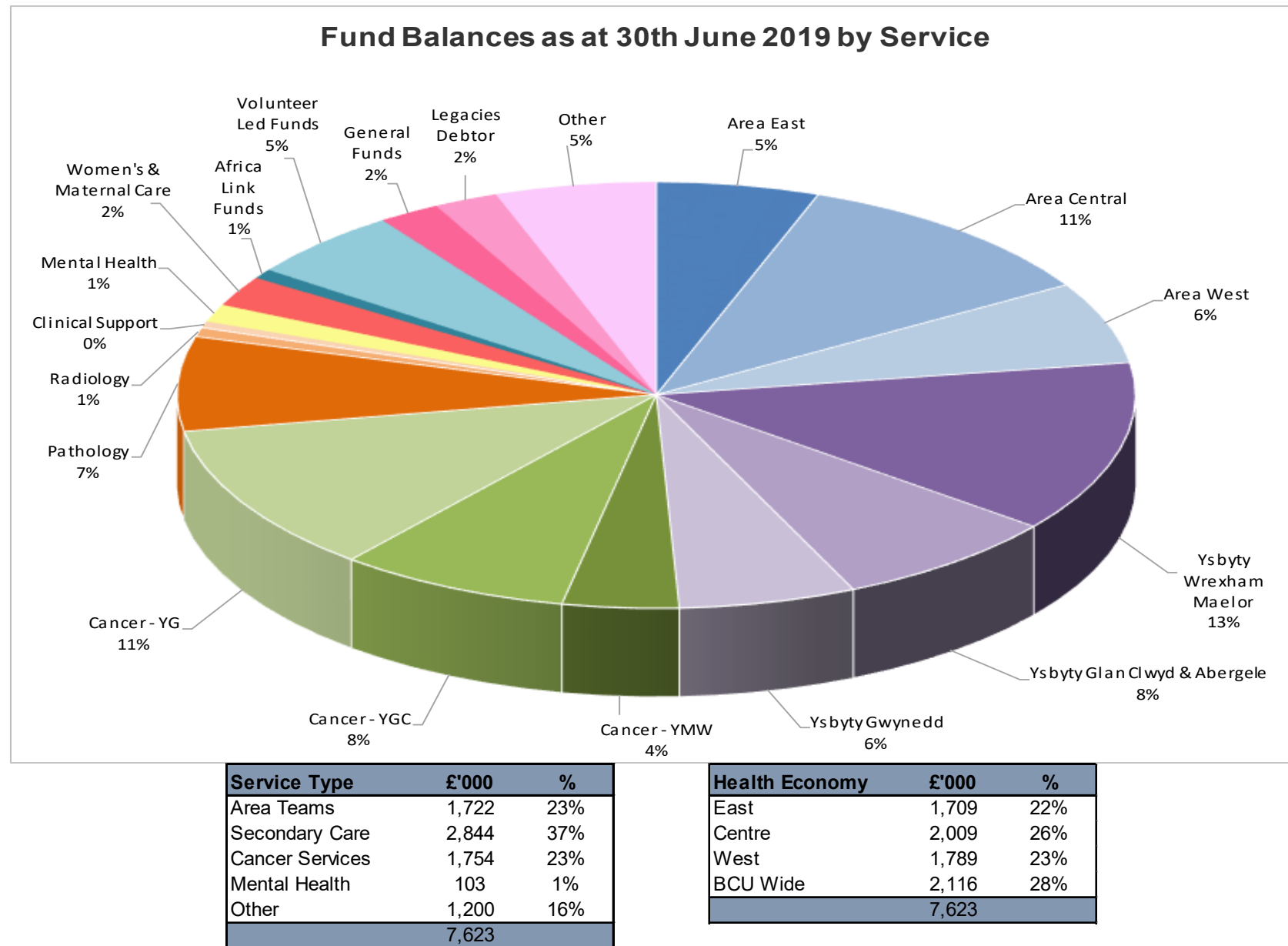
2. Divisional analysis

2.1 Fund balances by division/directorate

	Opening position at 1 April 2019 £000	Income £000	Expenditure £000	New Unspent Commitments £000	Closing position at 30 th June 2019 £000	Income as % of fund balance	Expenditure as % of fund balance	Commitments as % of fund balance
Area East	446	34	-37	-24	419	8%	8%	5%
Area Central	770	70	-11	0	829	9%	1%	0%
Area West	487	13	-16	-10	474	3%	3%	2%
Area Teams	1,703	117	-64	-34	1,722	7%	4%	2%
Ysbyty Wrexham Maelor	984	22	-15	0	991	2%	2%	0%
Ysbyty Glan Clwyd & Abergelle	611	16	-42	0	585	3%	7%	0%
Ysbyty Gwynedd	439	31	-15	0	455	7%	3%	0%
Women's & Maternal Care	174	7	-5	0	176	4%	3%	0%
Pathology	549	0	-3	0	546	0%	1%	0%
Radiology	53	0	0	0	53	0%	0%	0%
Clinical Support	33	6	-2	0	37	18%	6%	0%
Secondary Care	2,843	82	-82	0	2,843	3%	3%	0%
Cancer - YMW	307	12	-10	-10	299	4%	3%	3%
Cancer - YGC	622	24	-14	-37	595	4%	2%	6%
Cancer - YG	807	103	-9	-41	860	13%	1%	5%
Cancer Services	1,736	139	-33	-88	1,754	8%	2%	5%
Mental Health	100	8	-5	0	103	8%	5%	0%
Africa Link Funds	58	3	-6	0	55	5%	10%	0%
Volunteer Led Funds	367	43	-4	0	406	12%	1%	0%
General Funds	334	250	-55	-370	159	75%	16%	111%
Legacies Debtor	315	-150	0	0	165	-48%	0%	0%
Other	382	79	-46	0	415	21%	12%	0%
Other Funds	1,456	225	-111	-370	1,200	15%	8%	25%
Total Charity Balance	7,838	571	-295	-492	7,622	7%	4%	6%

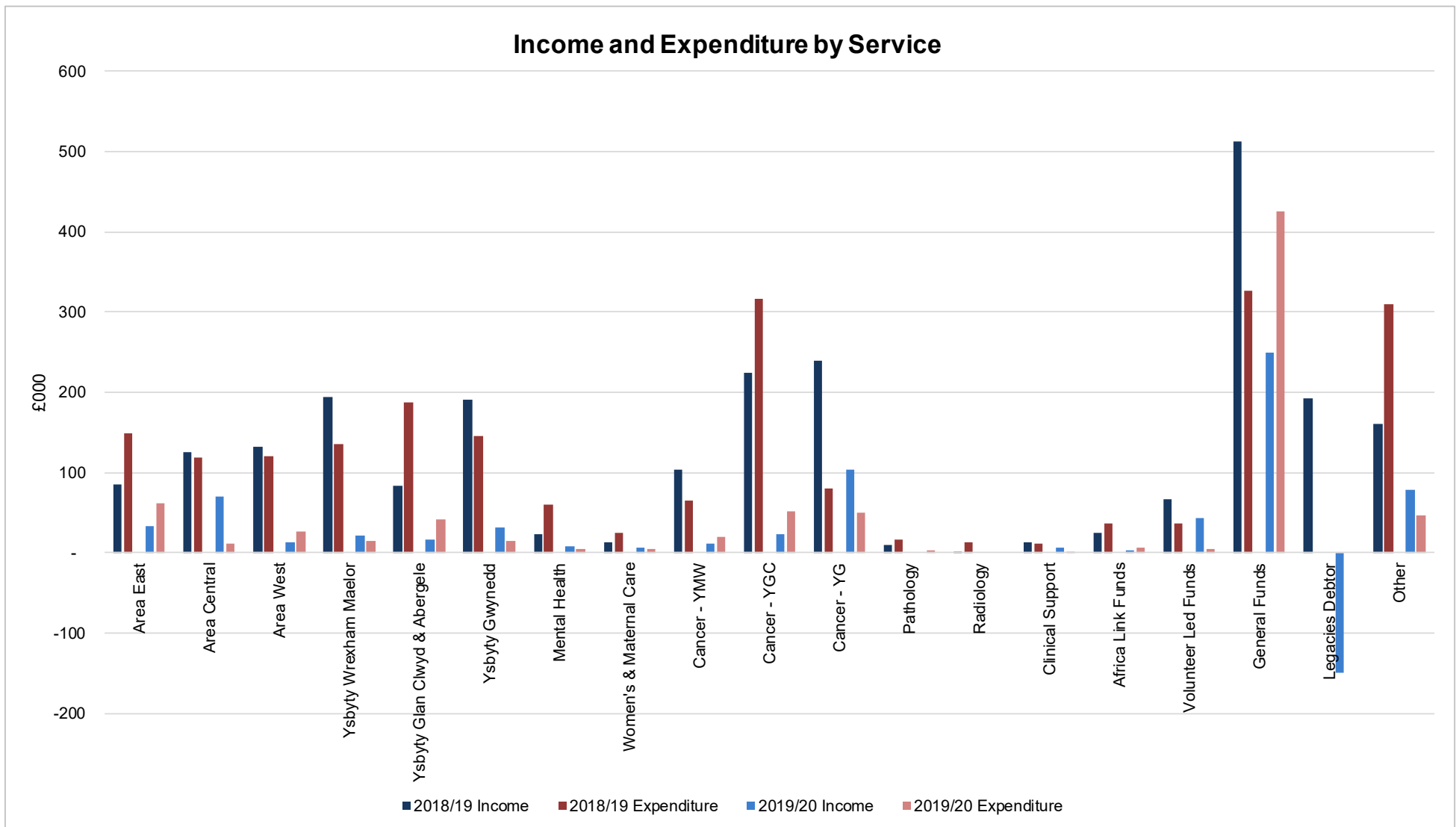
Note: The Legacies Debtor fund holds the accruals for legacies where probate has been granted, but we have not yet received the cash. This fund is used to protect the designated funds from fluctuations in the final legacy received. When the legacy is received it will be credited to the designated fund specified in the Will and the accrual will be reversed out from the Legacies Debtor fund. This is shown as negative income.

2. Divisional analysis



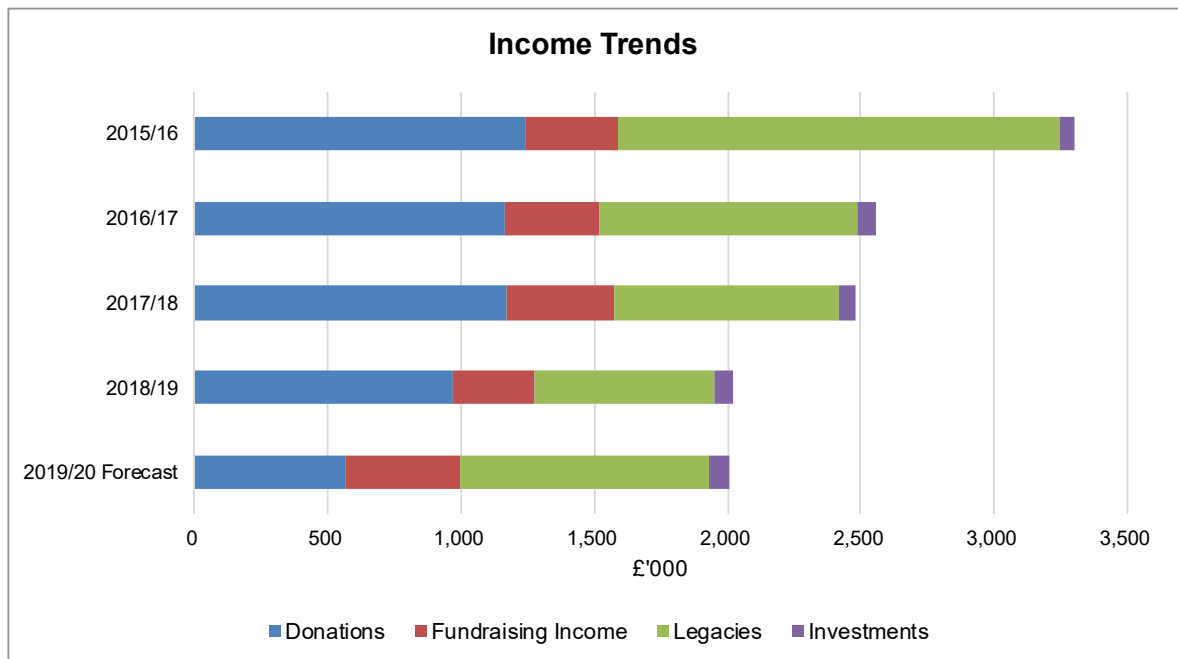
2. Divisional analysis

2.2 Income and expenditure by division/directorate



3. Income and Expenditure

3.1 Income

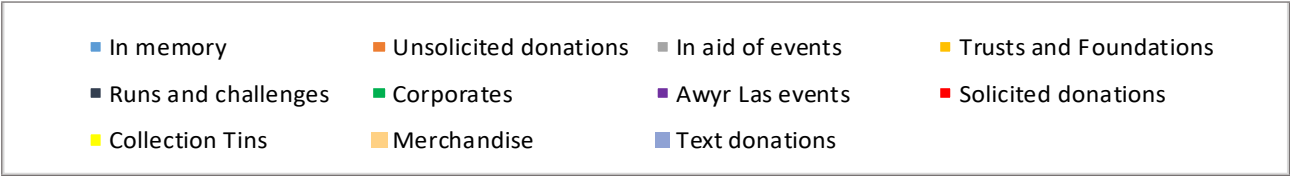
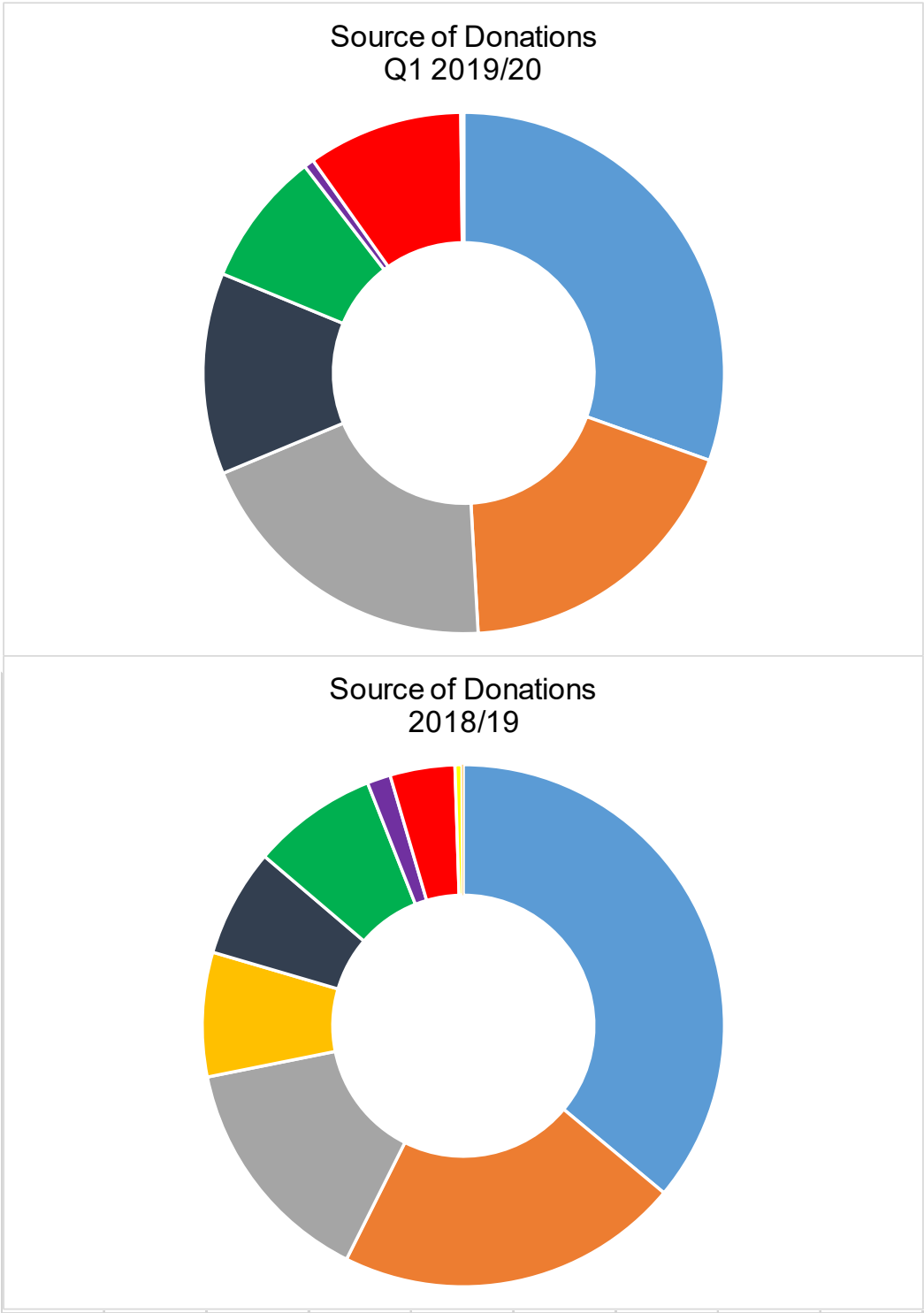


- Income for 2019/20 is currently forecast to be in line with 2018/19, which is at the lowest level of the preceding four years. The forecast for 2019/20 is based on an extrapolation of income received to date, adjusted for quarterly fluctuations as seen in previous years.

3.2 Source of donations and fundraising income

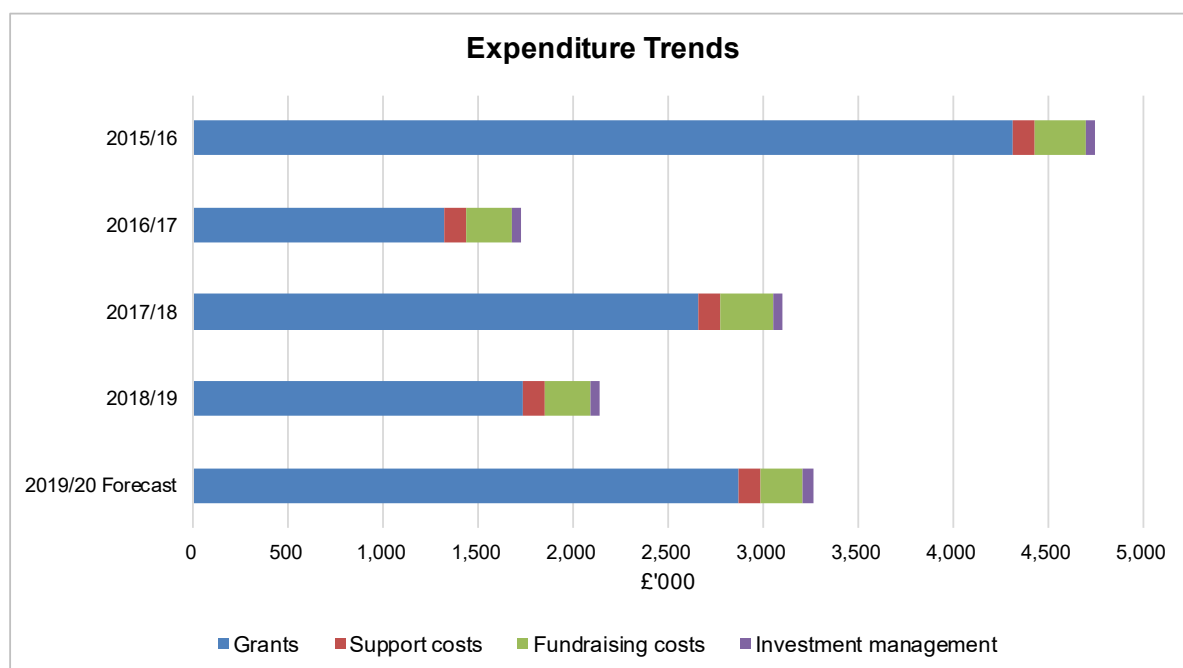
- In memory donations continue to be our largest donation area to date in 2019/20, totalling £95,000.
- Runs and challenges, Solicited donations and In aid of events have brought in a higher percentage of income during Quarter 1 compared to last year. These are the types of income that the Fundraising Support Team are focusing on increasing.
- The charity has not received any Trusts and Foundations income in Quarter 1, which generally relates to specific applications.

4. Income and Expenditure



4. Income and Expenditure

3.3 Expenditure



- Grant expenditure is particularly variable. Large scale projects have a significant impact on the grants awarded in any one year. The other expenditure categories are fairly stable across years.
- Expenditure for 2019/20 is currently forecast to be significantly higher than the prior year. This forecast is based on an extrapolation of expenditure to date, adjusted for quarterly fluctuations as seen in previous years.

3.4 Items over £25,000

- Income and expenditure items over £25,000 received/paid in the quarter are detailed below. Note that these do not include accrued legacies or committed expenditure.

Income & Expenditure Items Over £25,000				
Division	Fund	Income £'000	Expenditure £'000	Description
Income				
Centre Area	8F05 - Special Care Baby Unit, YGC	51		Legacy – M Field
Cancer – YG	9Q04 – Alaw Ward	50		Legacy – WT Owen
Expenditure				
Ysbyty Glan Clwyd & Abergelge	8B66 – Livsey Fund		(33)	Portable Ultrasound
Ysbyty Glan Clwyd & Abergelge	8B66 – Livsey Fund		(44)	Avance CS2 Anesthesia Delivery System
Total		101	(77)	

4. Income and Expenditure

3.5 Fundraising team budgets

	2019/20 Month 3 Budget £'000	2019/20 Month 3 Actual £'000	2019/20 Month 3 Variance £'000
Fundraising Staff Costs	54	45	(9)
Non-Pay Costs	13	6	(7)
Total	67	51	(16)

- The Fundraising Team costs are £16,000 under spent for the year to date. The team currently has one vacancy, a 30 hour Band 6 Fundraising Support Manager.
- The costs of fundraising for events organised by fundraisers from outside the team are not included here. For the first quarter of 2019/20 these totalled £3,000 against a year to date budget of £10,000, reflecting the fact that there has not yet been a significant fundraising event or campaign organised outside of the charity team. The budget for these costs was reduced in 2019/20, but is still showing an under spend. It is anticipated that costs will increase during the year due to initiatives aimed at encouraging local fundraising.

Appendix 1.1: Outstanding Legacies

Name	Date of Notification	Pecuniary / Residuary	Fund to Benefit	Received in Period £	Total Received £	Current Status
Byrne, B	Oct-18	Residuary	Cancer Centre, YGC	0	0	Letter from the Solicitors informing us of the bequest. Grant of Probate awarded 04.10.18. Statement of receipts and payments has been received, reviewed and approved.
Jones, V	Dec-18	Residuary	Respiratory Fund, YGC	0	0	Letter received from the Executors. Half share of the residuary Estate left to the Chest Unit. Grant of Probate has now been awarded.
Langrish, N M	Jul-16	Residuary	North Wales Cancer Appeal	0	56,000	The solicitors have forwarded a copy of the death certificate, Will and Grant of Probate. Probate was granted in September 2017. The NWCA is due an 8th share of the estate. A letter requesting an update has been sent to the solicitors.
Lloyd, R O	Jan-19	Residuary	Cancer Centre, YGC	0	0	Executing solicitors have written informing the Cancer Centre they have been left 40% of the residual estate. Grant of Probate has not been granted as yet. A letter has been sent requesting a copy extract of the Will.
Rowlands, M	Mar-16	Residuary	Alaw Ward, YG	0	70,000	The sale has been completed and an interim distribution has been received. A copy of the Preliminary Administration Account has been received. The solicitors have confirmed that a tax refund is due. A letter requesting an update has been sent to the solicitors.
Titterton, J C	Jan-19	Residuary	Oncology Unit, YGC	0	0	Bequest to the Oncology Unit, YGC to purchase equipment and or facilities - 19th share of the residual estate. An offer has been received on the property. The Executors have decided to appropriate this to the Charitable Beneficiaries to prevent a charge to Capital Gains Tax.

Appendix 1.2: Closed Legacies

Name	Pecuniary / Residuary	Fund to Benefit	Received in Period £	Total Received £
Buckely, A	Pecuniary	Wrexham Maelor Hospital	6,000	6,000
Evans, M E	Residuary	Cancer Centre, YGC	1,385	1,385
Field, M	Residuary	SCBU	51,452	51,452
Hancock, I E	Pecuniary	Glaslyn Ward	5,000	5,000
Hill, S	Pecuniary	Diabetes Fund, YGC	1,000	1,000
Lewsey, E R	Pecuniary	Cancer Centre, YGC	2,000	2,000
Owen, W T	Pecuniary	Alaw Unit	50,000	50,000
Parry, L J	Residuary	Ysbyty Penrhos Stanley	2,000	2,000
Saunders, J N	Residuary	Diabetes Fund, Wrexham	10,424	10,424
Valla, J E	Pecuniary	Alaw Ward, YG	5,000	5,000
Legacies Accrued in 2018/19				(77,809)
		TOTAL LEGACIES IN PERIOD	£	56,452

Appendix 2: Outstanding Commitments

Date Approved	Approval Expiry	Description	Fund No.	Fund Name	Amount Approved £	Amount Paid/ Accrued £	Amount Outstanding £	Notes	Status
04/09/2015	30/04/2020	PhD Prudent Healthcare (KESS Scholarships)	8T28	General Funds - Awyr Las	4,000	3,500	500	The student undertaking the PhD withdrew in September 2018 after 2 years on the project. It is hoped that the funding for the final year, some of which is held by Bangor University and some by the charity, can be converted into a 1 year Masters. This is currently awaiting approval. One year extension awarded.	
29/09/2016	30/05/2020	Supporting Primary Care Placements for Nurses and Student Nurses	8T28	General Funds - Awyr Las	4,800	2,000	2,800	Ongoing project. Some delay in commencement whilst project was established. First cohort of students commenced at the end of 2017 with project expected to last longer than original anticipated. There has been a delay due to the university having to undertake full work base audits on all the practices that have said they will take a student. All have now been audited and there are 14 practices that are currently taking student nurses. Three year extension awarded.	
22/11/2016	30/09/2019	North Wales Adolescent Service (NWAS): Experience Based Co-design (EBCD) Project	8F17	Denbighshire Child Development Centre	4,720	2,557	2,163	Ongoing project. Some initial delays, but project is now underway. Eighteen month extension awarded.	

Appendix 2: Outstanding Commitments

Date Approved	Approval Expiry	Description	Fund No.	Fund Name	Amount Approved £	Amount Paid/ Accrued £	Amount Outstanding £	Notes	Status
01/04/2018	30/09/2019	Thermometers for Patients Receiving Chemotherapy Treatment	9Q18	#TeamIrfon	750	660	90	Two year approval. Extension of six months granted to allow funds to be utilised.	
12/06/2017	31/12/2019	Staff Engagement Strategy	8T48	Staff Development Fund	245,107	181,305	63,802	Ongoing project. There were some initial delays due to change in project scope, so six month extension awarded.	
31/08/2017	31/01/2020	Staff Mental Health and Wellbeing Awareness	8T28	General Funds - Awyr Las	3,000	1,624	1,376	Ongoing project. The remaining funds will be used for Mental Health first aid training for staff champions which is arranged for October 2019. Eighteen month extension awarded.	
31/08/2017	31/07/2020	Nasal Mucous Collection - Study 2	8T28	General Funds - Awyr Las	5,700	2,414	3,286	Ongoing project. Project now planned to cover three hay fever seasons and so take longer than originally anticipated. Twelve month extension awarded.	
01/11/2019	31/10/2020	Kess Studentship	8Q03	Cancer Research Fund - Glan Clwyd	11,250	3,125	8,125	Ongoing project.	
05/03/2018	31/12/2019	Equipment and Flooring - Alaw Ward	9Q04	Janet Jones (Alaw) - YG	56,000	6,186	49,814	Estates project. The equipment has been received and paid for. Estates are hoping to start the replacement of the flooring shortly, which is part of a larger development project. Twelve month extension awarded.	

Appendix 2: Outstanding Commitments

Date Approved	Approval Expiry	Description	Fund No.	Fund Name	Amount Approved £	Amount Paid/ Accrued £	Amount Outstanding £	Notes	Status
05/03/2018	31/01/2020	Dewi Ward Development	9F19	Dewi Ward Development - Gafael Llaw	105,000	86,940	18,060	This project was completed and the approval closed in July 2019.	
11/10/2018	31/12/2019	Dermatology Suite, Ysbyty Alltwen	9B10	Madog Community and Hospital Fund	15,000	8,455	6,545	Additional funding of £11,000 approved at October 2018 CFAG and £4,000 at January 2019 CFAG. Twelve month extension awarded in line with additional approval.	
18/09/2017	30/09/2019	Hybrid Theatre	8B66	Livsey Fund	500,000	324,410	175,590	Large scale Estates project. Orders raised from November 2018 onwards, in line with the project plan. Six month extension awarded.	
17/05/2018	31/12/2019	North Wales Urological Research Centre	7N17	Urology Fund - YMW	5,000	1,875	3,125	Ongoing project.	
17/05/2018	31/12/2019	North Wales Urological Research Centre	8T28	General Funds - Awyr Las	6,250	0	6,250	Ongoing project.	
05/07/2018	31/08/2019	VistaScan digital X Ray processor	8T28	General Funds - Awyr Las	15,985	341	15,644	Order placed in September 2018 and equipment received in December 2018, however the payment has not been made due to invoice being on hold. Procurement are investigating. Ten month extension awarded.	
17/09/2018	31/03/2020	Clinical Psychology Input - Critical Care Follow Up Services	9N01	ITU/HDU Staff - YG	7,000	1,406	5,594	Start of project was delayed until May 2019. Project is planned to last 10 months, so six month extension awarded to allow completion.	

Appendix 2: Outstanding Commitments

Date Approved	Approval Expiry	Description	Fund No.	Fund Name	Amount Approved £	Amount Paid/ Accrued £	Amount Outstanding £	Notes	Status
17/09/2018	31/12/2019	Operating table/couch for the Pacing Theatre	8B42	Cardiology Department Central - Patients Fund	31,504		31,504	Delays with ordering of equipment due to a query over whether the pacing theatre is lead lined. This will impact on the type of table that is required. The Management Team are progressing this. Twelve month extension awarded.	
17/09/2018	30/09/2019	Wigs for Cancer Patients	7Q02	Cancer Support Group - YMW	25,000	7,920	17,080	Twelve month approval.	
17/09/2018	30/09/2019	Wigs for Cancer Patients	8Q02	Cancer Charitable Fund - Glan Clwyd	25,000	10,242	14,758	Twelve month approval.	
17/09/2018	30/09/2019	Wigs for Cancer Patients	9Q04	Janet Jones (Alaw) - YG	25,000	6,930	18,070	Twelve month approval.	
11/10/2018	30/09/2019	Server Upgrade for Chemo Care Version 6	8Q02	Cancer Charitable Fund - Glan Clwyd	9,000	0	9,000	Approval closed in August 2019.	
11/10/2018	30/09/2019	Urgent Care Pathways - BQL	9T27	Betsi-Quthing Fund	15,000	7,890	7,110	Ongoing project.	
11/10/2018	31/01/2020	Purchase of 8 televisions and installation for the new Coronary Care Unit	8B42	Cardiology Department Central - Patients Fund	24,000	0	24,000	Awaiting Estates availability to complete the required installation. This is being progressed by the Management Team. Twelve month extension awarded.	

Appendix 2: Outstanding Commitments

03/12/2018	30/09/2019	Healthy Family Challenge	8T28	General Funds - Awyr Las	4,656	0	4,656	Order placed in July 2019. Three month extension awarded to allow payment to be made.	
Date Approved	Approval Expiry	Description	Fund No.	Fund Name	Amount Approved £	Amount Paid/ Accrued £	Amount Outstanding £	Notes	Status
01/02/2019	31/01/2020	Erw Groes: Opening Doors & Enhancing Lives	8T28	General Funds - Awyr Las	15,940	0	15,940	Ongoing project which commenced in August 2019.	
13/12/2018	31/12/2019	Patient Wigs - Dermatology Patients	8T28	General Funds - Awyr Las	30,000	13,320	16,680	Twelve month approval.	
13/12/2018	31/01/2020	Complimentary Therapist - 12 months	7Q02	Cancer Support Group - YMW	10,000	3,150	6,850	Twelve month approval.	
13/12/2018	31/01/2020	Complimentary Therapist - 12 months	8Q02	Cancer Charitable Fund - Glan Clwyd	26,000	7,500	18,500	Twelve month approval.	
13/12/2018	31/01/2020	Complimentary Therapist - 12 months	9Q18	#TeamIrfon	23,296	3,573	19,723	Twelve month approval.	
13/12/2018	31/01/2020	Advancing the Primary Care Nursing Workforce across North Wales	8T48	Staff Development Fund	50,000	0	50,000	Difficulty with booking courses due to Procurement regulations around block booking. This has delayed the project. The first cohort of courses is booked for September and October 2019. The next cohort will be booked for February and March 2020, avoiding the main flu season when there is difficulty in releasing staff to attend. It is anticipated that courses will then be arranged	

Appendix 2: Outstanding Commitments

								throughout 2020. 1 year extension awarded.	
20/12/2018	30/09/2019	Hearts & Minds - Applications x 12	8T38	Awyrr Las Hearts & Minds Fund	9,850	5,657	4,193	Grants are being monitored by the Fundraising Team. Three month extension awarded.	
Date Approved	Approval Expiry	Description	Fund No.	Fund Name	Amount Approved £	Amount Paid/ Accrued £	Amount Outstanding £	Notes	Status
20/12/2018	30/09/2019	Hearts & Minds - Application 1-14	8T36	"By Your Side Appeal" Fund	1,000	0	1,000	Delays with agreeing the precise equipment required. Three month extension awarded.	
20/12/2018	30/09/2019	Hearts & Minds - Application 1-36	9B21	Dwyfor Locality - Bryn Beryl GP	500	0	500	Delays with agreeing the resources required. Three month extension awarded.	
20/12/2018	30/09/2019	Hearts & Minds - Application 1-3	9B10	Madog Community and Hospital Fund	1,000	0	1,000	An assessment of the existing fencing is required before the project can proceed. Three month extension awarded.	
20/12/2018	30/09/2019	Hearts & Minds - Application 1-5	9B94	Emergency Department - YG	180	0	180	Approval utilised and closed in August 2019.	
31/01/2019	31/10/2019	Replacement Flooring Endoscopy Corridor	9N02	Endoscopy Unit - YG	2,707	0	2,707	The work has commenced and is being undertaken by the BCU Estates department. Six month extension awarded.	
31/01/2019	31/10/2019	Replacement Flooring Endoscopy Corridor	9B91	Bangor Ward Funds - Patients Amenities	2,333	0	2,333	The work has commenced and is being undertaken by the BCU Estates department. Six month extension awarded.	

Appendix 2: Outstanding Commitments

07/03/2019	31/03/2021	Project Support for ChemoCare Version 6 Upgrade and Roll-out to Haematology	8Q02	Cancer Charitable Fund - Glan Clwyd	92,000	0	92,000	Ongoing project	
21/03/2019	30/06/2019	Video conferencing and presentation system	7F03	Childrens Ward - YMW	2,982	0	2,982	Approval utilised and closed in July 2019.	
Date Approved	Approval Expiry	Description	Fund No.	Fund Name	Amount Approved £	Amount Paid/ Accrued £	Amount Outstanding £	Notes	Status
21/03/2019	30/06/2019	Video conferencing and presentation system	7F10	Acute Children's Comm Service - YMW	1,491	0	1,491	Approval utilised and closed in July 2019.	
21/03/2019	30/06/2019	Video conferencing and presentation system	7F11	Premature Baby Unit - YMW	2,982	0	2,982	Approval utilised and closed in July 2019.	
02/05/2019	30/04/2020	Exploring Healthcare Professionals perspectives on Advance Care Planning: another piece of the puzzle	7Q03	Palliative Care Fund - YMW	23,993	0	23,993	Ongoing project.	
23/05/2019	31/08/2019	Cancer Centre Gardens	8Q02	Cancer Charitable Fund - Glan Clwyd	7,322	0	7,322	Ongoing project.	
23/05/2019	31/08/2019	Patient Information Display Screens	8Q02	Cancer Charitable Fund - Glan Clwyd	9,800	0	9,800	Screens are in the process of being procured.	
23/05/2019	31/08/2019	Replacement Furniture - Dinas Ward	8T28	General Funds - Awyr Las	11,696	0	11,696	Approval utilised and closed in August 2019.	

Appendix 2: Outstanding Commitments

23/05/2019	31/08/2019	Equipment for Minor Operations Room - Ysbyty Alltwen	9B10	Madog Community and Hospital Fund	12,000	1,683	10,317	Equipment has been ordered. Some orders have been received and others are awaited.	
23/05/2019	30/11/2019	Wet Rooms - Enfys Ward	8Q02	Cancer Charitable Fund - Glan Clwyd	20,000	0	20,000	Estates project.	
23/05/2019	31/01/2020	Complimentary Therapist - 12 months (Ext to app ref 35/19)	7Q02	Cancer Support Group - YMW	10,000	0	10,000	Ongoing project.	
Date Approved	Approval Expiry	Description	Fund No.	Fund Name	Amount Approved £	Amount Paid/ Accrued £	Amount Outstanding £	Notes	Status
07/03/2019	31/03/2020	Fundraising Budget 2019/20	8T28	General Funds - Awyr Las	437,000	79,038	357,962	Charity Team budget for 2019/20.	
20/06/2019	30/09/2019	Replacement Patient Chairs – Alaw Day Unit	9Q04	Janet Jones (Alaw) - YG	40,920	0	40,920	Furniture is in the process of being procured.	

Key to Status coding:

TOTAL

£1,220,015

Approval closed
Ongoing
Extension awarded
Overdue

Charitable Funds Committee

4th October 2019



GIG
CYMRU
NHS
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Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

To improve health and provide excellent care

CF

Report Title:	<i>Charitable Funds Fundraising Report Q1 2019/20</i>
Report Author:	<i>Kirsty Thomson, Head of Fundraising</i>
Responsible Director:	<i>Sue Hill, Acting Executive Director of Finance</i>
Public or In Committee	<i>Public</i>
Purpose of Report:	<i>Attached is the Fundraising Report for the Charity as at the 30th June 2019 to provide Committee members with an overview of activity carried out by the Fundraising Support Team along with proposed and scheduled activity.</i>
Approval / Scrutiny Route Prior to Presentation:	<i>The Report is brought for discussion and scrutiny by the Charitable Funds Committee.</i>
Governance issues / risks:	<i>There are no governance issues for the Health Board of this paper.</i>
Financial Implications:	<i>There are no financial implications for the Health Board of this paper.</i>
Recommendation:	<i>The Committee is asked to note the report and approve the actions being taken.</i>

Health Board's Well-being Objectives <i>(indicate how this paper proposes alignment with the Health Board's Well Being objectives. Tick all that apply and expand within main report)</i>	✓	WFGA Sustainable Development Principle <i>(Indicate how the paper/proposal has embedded and prioritised the sustainable development principle in its development. Describe how within the main body of the report or if not indicate the reasons for this.)</i>	✓
1.To improve physical, emotional and mental health and well-being for all	✓	1.Balancing short term need with long term planning for the future	✓
2.To target our resources to those with the greatest needs and reduce inequalities	✓	2.Working together with other partners to deliver objectives	✓
3.To support children to have the best start in life	✓	3. those with an interest and seeking their views	✓

4.To work in partnership to support people – individuals, families, carers, communities - to achieve their own well-being	√	4.Putting resources into preventing problems occurring or getting worse	√
5.To improve the safety and quality of all services	√	5.Considering impact on all well-being goals together and on other bodies	√
6.To respect people and their dignity	√		
7.To listen to people and learn from their experiences	√		
Special Measures Improvement Framework Theme/Expectation addressed by this paper			
<i>Not applicable</i>			
Equality Impact Assessment			
<i>Not applicable – the report does not impact directly on staff or patients</i>			

Disclosure:

Betsi Cadwaladr University Health Board is the operational name of Betsi Cadwaladr University Local Health Board



Awyr Las
Blue Sky

Elusen GIG Gogledd Cymru
The North Wales NHS Charity

Fundraising Support Team Report October 2019

Kirsty Thomson, Head of Fundraising
October 2019

The purpose of this report is to provide the Charitable Funds Committee with an update on the activities of the fundraising section of the Awyr Las Support Team. This should be read in conjunction with the Finance Report, which provides an update on the financial activity in the same period.

1. Good News snapshot & General Update

- I CAN Grant and Staff Experience Grants The new I CAN grant (<https://awyrlas.org.uk/icangrant>), which is open to all those working in Mental Health services, opened in August and the Staff Experience grant (<https://awyrlas.org.uk/staffexperience>), which is open to all staff from 1st October are new initiatives to which will close on 12th November. Both aim to encourage staff to consider what initiative / creative projects they would like to have funded, and help to uncover fundraising priorities for the future. Patient representative and staff with expertise in these areas will be involved in the grants shortlisting and prioritising process.
- Training & Development The Awyr Las Support Team have received training on a new Text donate facility and on digital strategies and using social media effectively from external specialists
- International Funds Members of the Awyr Las Support Team have been requested to present with colleagues on Awyr Las' Africa-Betsi Link Funds at an all Wales International Health summit in October
- Events The #TeamIrfon Swim in September saw 40 swimmers take on a two mile open water challenge. Over £8,000 has been raised through the event so far, bringing the total raised through the #TeamIrfon campaign to over £200,000. As reported in the last committee meeting, 80 members of staff, Robins volunteers and Awyr Las supporters took part in an Awyr Las Zip Line Challenge on 15th June as part of the ZipRoc event. The event has raised over £16,000 for Awyr Las Funds. The BCUHB choir, named 'CorLas', which was formed for the event, is now well established and the choir is now meeting regularly to practice. The Glitter Ball for the Children's Ward in Wrexham Maelor is set to raise over £15,000 again this month (see <https://awyrlas.org.uk/glitter-ball-childrens>)
- Lessons Learnt In 2018 the Awyr Las Support Team implemented a new thanking and banking system which needs refining so that all necessary donor data is captured and so all donations are passed on to the Awyr Las Support Team promptly in line with the Awyr Las Fundraising Procedures. The HoF has sought advice from internal audit, and a new system will be introduced in phases between October 2019 and March 2020. The process of rolling out new systems will start with training and information gathering sessions with BCUHB General Office staff on 21st and 22nd October
- Regulatory Updates The new Fundraising Regulator Code of Practice will be enforced from 1st November. Awyr Las activity already complies with the Code of Practice. In order to ensure compliance moving forward, all Standard Operating Procedures (SOPs) are being reviewed and updated so all aspects of the Support Team's practices are carried out in line with the new national Fundraising Code of Practice. All SOPs will be updated by 1st April 2020
- Useful information New Philanthropy Capital has worked with 10 NHS Charities to produce an evaluation of NHS Charities See Appendix 2). This valuable report is now informing the Support Team's work and has helped lead to a reorganisation of the Support Team (see section 9 of this Fundraising Support Team Report)

2. Complaints

The Awyr Las Fundraising Support Team received 1 complaint in Quarter 2 2019/20, a 50% decrease from last quarter.

Complaint	Action Taken & Lessons Learnt	Status of Complaint
Local charity wrote to the BCUHB CEO and the Head of Fundraising to express concern about the treatment of that charity's lottery canvassers on BCUHB premises	The Head of Fundraising (HoF) is in contact with the charity about the use of premises and had introduced a complaints log at this specific site for lottery canvassing. The HoF spoke with the charity's representatives and subsequently sent a communication addressing the issues raised by the charity. The Team has taken appropriate steps to ensure that the complainant will have no cause for concern in future. The matters raised by the local charity were passed on to Information Governance and members of the Finance Team for internal investigation and have been considered when developing the recommendations for use of BCUHB Charity Tables (see Third Sector Groups Report)	Closed

3. Collaborative Working Agreements Register

The Awyr Las Collaborative Working Protocol was updated in September 2018, see: <https://awyrlas.org.uk/collaborativeworkingprotocol>.

Awyr Las Collaborative Working Agreements:

Total	62
Open (ongoing relationship, agreements reviewed annually)	6
Closed (project based relationship, project complete)	56
Complete	62
Awaiting Signature	0

4. The NHS Big Tea Party

4.1 2019 Evaluation & 2020 planning

The Awyr Las Support Team aimed to have 150 'in aid of' tea parties taking place in July 2019 and raise £15,000 through the Big Tea Party. 47 tea parties were organised, with a breakdown of events / activity as follows:

- 8 external
- 6 pan North Wales
- 15 West
- 7 Central
- 11 East

The most successful, a cake sale organised by the Urology department in Ysbyty Gwynedd raising over £800. Not all participants used the event as a fundraiser. £4,300 was raised through the events and a number of lessons were learnt:

- Planning for an activity of this size needs to begin at least 6 months in advance. The 2020 Big Tea Party promotion will begin in October 2019
- All internal and external audiences need to be encouraged through multiple platforms. In 2019 the promotions were too reliant on internal email, intranet, BCUHB digital bulletins and social media. The Communications plan for 2020 will include senior management champions, more visible messaging in hospitals and incentivising internal networks to share key messages; externally large organisations and local community groups will be encouraged to become partners in order to better involve workforces and societies which haven't previously supported the charity
- Staff weren't aware how their own wards and departments would benefit. More needs to be done in the run up to the events to promote how donations make a difference for patients across North Wales
- Better messaging is required. The Awyr Las Support Team are developing new tools including videos which will help spread messages to broader audiences
- Local companies and groups want to be involved, but need to be regularly reminded of how they can get involved. For 2020, external target audiences will be encouraged to commit early to create more build up and 'buzz' around the event
- The cake competition provides a useful means to share messages about the charity. This needs to have a media & food manufacturing partner and be seen as a key part of the BCUHB calendar, with more staff involved in the ultimate decision making process
- The registration and collation of income information was an improvement on last year. For 2020 greater emphasis will be placed on using the supporter database to track communications with registrations and build more detailed analysis of the event

4.2 Awyr Las Cake Decorating Competition Summary evaluation

Entrants

Total participants this year: 14 (compared to last year's 18 during #NHS70 campaign)	East: 1
Internal: 10	West: 9
External: 4	Central: 4

Process

- Submitting via website was much better, had more control and aware of who exactly was submitting what
- The Facebook vote works well – people understand the “like and share” concept

Engagement

- Number of votes: 2,445
- Average post reach for 01/06 to 31/07 was 5,351 vs 2,597 for the previous month
- Average reactions for 01/06 to 31/07 was 269 vs 85 for previous month
- Fewer votes than last year (2,445 vs >5,000)

Improvements for 2020

- Categories for pro and amateur for 2020, Prizes for 2nd and 3rd entries & explore the possibility of making it Wales wide, working with other NHS Charities
- Engagement is superficial. For 2020 the Support Team will be prepared to convert photo likes into something deeper, for example sign up to mailing list, make a small donation
- More time dedicated to following up on cake stories and why they are dedicating the cake to that particular ward. Make use of Facebook live to underpin this.
- Terms & Conditions will be further improved to be absolutely explicit about who can and cannot enter

5. ‘In Aid Of’ Events

The following table provides an overview of the events in Quarter 1 organised by individual fundraisers, for which the Awyr Las Support Team provided advice and support (N.B. Awyr Las charity led events, for example the Big Tea are not included in this table):

Event / Activity	Month	Quarter	Fund	Area	Amount raised (under £100, £100-£500, £501-£1,000, £1,001-£5,000, over £5,000)
100 / 100 Challenge	April	1	I Can	All	£501-£1,000
12hr fitness event	April	1	I Can	Central	£1,001-£5,000
Cake stall	April	1	Gastro Department	Central	£501-£1,000
Easter Egg Hunt	April	1	Gwanwyn Ward Wrexham Maelor	East	Under £100
Easter Raffle	April	1	Forge Road Surgery Wrexham	East	Under £100
Velocity 2 zip wire challenge	April	1	Shooting Star Unit	East	£1,001-£5,000

Event / Activity	Month	Quarter	Fund	Area	Amount raised (under £100, £100-£500, £501-£1,000, £1,001-£5,000, over £5,000)
Tombola	April	1	Dulas Ward YG	West	£100-£500
Chocolate Tombola	April	1	Ty Ni Dementia Ward	West	£100-£500
Tavble top sale	April	1	Dementia Services	West	Under £100
London Marathon	April	1	Glaslyn Ward, YG	West	£1,001-£5,000
Quiz night and tombola	April	1	SCBU Cwtsh	West	£100-£500
Engagement Event	April	1	LD Services in Gwynedd	West	£100-£500
Sponsored walk	May	1	Out of Hospital Cardiac Arrest	Central	£100-£500
Snowdon Walk	May	1	Famau Ward - Denbigh Community Hospital	Central	£100-£500
Car Boot Sale	May	1	Shooting Star Wrexham	East	£100-£500
Brighton 2 London challenge	May	1	North Wales Clinical Research Centre in Wrexham	East	£1,001-£5,000
40th Birthday (in lieu of gifts)	May	1	Mason Ward	East	£100-£500
Snowdon Walk	May	1	Childrens's Ward WM	East	£501-£1,000
Quiz night	May	1	Alaw Ward YG	West	£501-£1,000
3 Peaks	May	1	Alaw Ward YG	West	£501-£1,000
Pen Llyn Trail Half Marathon	May	1	Dewi Ward	West	£100-£500
Concert	May	1	Childrens Ward YG	West	£1,001-£5,000
Dementia Walk 2019	June	1	Dementia Services	All	£1,001-£5,000
Sponsored walk	June	1	Dementia Activities Room	Central	£1,001-£5,000
Ethiopia Link Summer Ball	June	1	Ethiopia Link	Central	£1,001-£5,000
Sky Dive	June	1	Critical Care Unit & Labour Ward	East	£1,001-£5,000

Event / Activity	Month	Quarter	Fund	Area	Amount raised (under £100, £100-£500, £501-£1,000, £1,001-£5,000, over £5,000)
Sponsored Slim	June	1	Gwanwyn Ward OPMH Unit at Heddfan	East	£1,001-£5,000
Running/bicycle challenge	June	1	Learning Disabilities	West	£501-£1,000
Snowdon 2gether	June	1	Alaw Ward YG / Christies manchester	West	£1,001-£5,000
Quiz night	June	1	Alaw Ward YG	West	£501-£1,000
Hog Roast Evening	June	1	Urology Department YG	West	£1,001-£5,000
Tombola / raffle	June	1	Cwtsh SCBU YG	West	£100-£500
Sponsored head shave	June	1	Alaw Ward YG	West	£1,001-£5,000
Zip Wire Challenge	June	1	Alaw Ward YG	West	£100-£500
10K Run in Rhyl	June	1	SCBU YG and Wxm	West	£100-£500
Hadrian's Wall	June	1	I CAN	West	£1,001-£5,000
Afternoon Tea Party	June	1	Breast Cancer Care YG	West	£1,001-£5,000
Sponsored walk	July	2	Alaw Unit	West	£100-£500
Tombola	July	2	Young Onset dementia fund	West	£100-£500
Climbing Snowdon	July	2	Alaw Ward	West	£100-£500
Triathlon	July	2	Alaw Unit YG	West	£100-£500
Sponsored Walk	August	2	Foelas Ward Bryn y Neuadd	Central	£100-£500
Speed Sheering Event	August	2	NWCTC	Central	TBC
Skydive	August	2	Radiotherapy Dept, NWCTC	Central	TBC
Bowling Event	August	2	Shooting Star Unit	East	TBC
Tombola, raffle tickets, cakes	August	2	Cwtsh SCBU YG	East	TBC
Head shave	August	2	Shooting Star Unit Wrexham	East	TBC
Shaving of Head	August	2	Alaw Ward YG	West	TBC
Singing evening	August	2	Awyr Las	All	£100-£500
Walk up Snowdon	August	2	I Can	All	£501-£1,000

Event / Activity	Month	Quarter	Fund	Area	Amount raised (under £100, £100-£500, £501-£1,000, £1,001-£5,000, over £5,000)
Skydive in Las Vegas	August	2	SCBU YGC	Central	TBC
Skydive	August	2	SCBU YGC	Central	TBC
Snowman Triathlon	August	2	Alaw Unit	West	TBC
Sponsored walk	August	2	Alltwen Hospital	West	TBC
Sponsored Walk	August	2	Dementia Services	West	TBC
Bingo night	August	2	Cwtsh SCBU YG	West	TBC
Run/Climb Snowdon	August	2	Tegid Ward	West	TBC
Tough Mudder	September	2	Cuddles Support Group	Central	TBC
Charity Football Match	September	2	Alaw Ward YG	East	TBC
Two half Ironmans	September	2	Critical Care Team Wrexham	East	TBC
Calendars	September	2	Alaw Wrad YG	West	TBC
Dawn till Dusk Event	September	2	Alaw Ward YG	West	TBC
Annual Garden Party	September	2	Awyr Las	West	TBC
Charity Cycle Ride	September	2	Neonatal Unit YG	West	TBC
Head shave	September	2	Cardiology Department YG	West	TBC
Bangor 10k Run	October	3	Palliative Care West	West	TBC
Cardiff Half Marathon	October	3	#Team Irfon	West	TBC
Charity Bingo Evening	October	3	Gwynedd Learning Difficulties	West	TBC
Charity walk along the NW coastal path	October	3	Women's + Childrens Bereavement Fund	West	TBC
Snowdonia Marathon	October	3	Alaw Ward YG	West	TBC
Conwy Half Marathon	November	3	Stroke Unit, YGC	Central	TBC
Christmas Fair	November	3	Cwtsh SCBU YG	West	TBC

Event / Activity	Month	Quarter	Fund	Area	Amount raised (under £100, £100-£500, £501-£1,000, £1,001-£5,000, over £5,000)
Boxing Day Dip	December	3	North Wales Brain Injury Service	Central	TBC
Tribute Act Event	TBC 2020	4	Shooting Star Unit	East	TBC
5K Fun Run	TBC 2020	4	Shooting Star Unit	East	TBC

*These are the events and activities that the Awyr Las Support Team officially recorded as being events and activities that received fundraising advice and support from the team. A number of other fundraising and awareness raising activities organised in aid of the charity took place during quarter one that the support team were not made aware of until after the event.

6. Awyr Las Social Media Update

Facebook page net likes

- The goal of 10,000 page likes on Facebook was achieved in August 2019 (three months earlier than predicted). This can be attributed to the high level of engagement with the #NHSBigTea campaign, in particular the Awyr Las cake decorating competition. Engagement was also high during and in the week immediately the following the Awyr Las Velocity 2 challenge
- There are currently 10,048 page likes

Facebook weekly organic post reach

- The average organic post reach for the period 06/06/19 to 19/09/19 was 4,687
- During this period, organic post reach peaked at 12,493 on 16/06/19 – the week the cake decorating competition opened
- Another peak of 11,675 can be observed during the week of the #NHS71 anniversary

Events

- In the previous 90 days, events on the Charity's Facebook page reached 15.3k people
- The events live during this period were: Walking for Dementia; Ethiopia Link Summer Ball; #TeamIrfon Pier to Pier Swim & Afterparty; Wrexham Maelor Children's Ward Glitter Ball

Facebook fundraising

- During the period 06/06/19 to 19/09/19, £2,106 was donated to the Charity via Facebook, bringing the total raised via Facebook to £4,276
- In this period, £880 was raised for Walking for Dementia via an appeal on Facebook; the first Facebook appeal the charity has run to date
 - A simple analysis was carried out on the donors to the Walking for Dementia appeal page, and the available data suggests that a large proportion of them were not yet on the Charity's fundraising database (i.e. they were new donors).

- This would concur with the available research into giving trends on Facebook, in that it seems many of the donors engaging with the Charity in this way have not previously donated via other channels.
- A new system has been developed to capture data from Facebook fundraisers and is being rolled out
 - Facebook offers less functionality than other giving platforms, e.g. JustGiving. It does not routinely collect personal data or contact information from donors. The new system, using the Charity's website, gives donors the option of sharing their contact information, along with any preference for where the donation should be directed, and an opportunity to opt in for further communications.

Twitter summary

- Total Followers – 3,188

Last 28 days

- Tweet impressions - 12.1K
- Profile visits – 279, Mentions - 69
- Followers - 3,188

7. Awyr Las' Strategic Priorities

The Awyr Las Support Team is dedicating time to:

- a. I CAN Mental Health: The Support Team has been involved in establishing a Mental Health Charity Group with representatives from across the service. This model is based on the Alaw Charity Group model which the Head of Fundraising helped set up three years ago. Members of the group will identify large priorities, develop and implement fundraising plans with the Support Team and review all grant requests. The team has also established the I CAN grants scheme.
- b. Early Years: The Ty Enfys Parents Accommodation in Ysbyty Gwynedd development plan is being formulated, along with the attached fundraising plan. A full business case will be presented to the December Charity Committee.
- c. Older People: Dementia Care Services are collating a wish list currently
- d. Cancer Care: The Head of Fundraising is working with Cancer Care Team to draw up Fundraising plans for Llandudno's service and has been invited on to the Shooting Star Unit Development Working Group

Supporters are able to donate directly to these priority areas, and smaller priority projects within these areas are being added to the Awyr Las special projects board: <https://awyrlas.org.uk/special-projects> which is where all priorities under £5,000 will be held, so potential supporters can be directed there to select what project or service they would like to fund.

The new online grants system, for all charitable funding requests, will include a Priorities Check, so all new requests for support will be categorised within the 4 priority areas or 'other important service'.

8. BCUHB Staff Lottery Scheme

A paper outlining possible benefits of introducing a BCUHB Staff Lottery Scheme was brought to the March Charity Committee. The paper was shared with Union representatives and further research into launching a lottery scheme is being carried out. The action plan has been delayed, with the date of completion of the Business Case postponed to December from September so that information on lotteries from the Association of NHS Charities can be considered within the business plan, and so the existing team can prepare for the new initiative:

Action	Responsibility	Deadline
Report on NHS Charities' Staff Lotteries, collated by the Association of NHS Charities	Head of Fundraising	October 2019
BCUHB targeted Staff Survey	Head of Fundraising	October 2019
Financial options appraisal	Charity Accountant	October 2019
Business Case to present to the Charity Committee (CC)	Head of Fundraising	December 2019
If CC approval granted, business case to be presented to the Executive Board	Head of Fundraising	January 2019
Staff Lottery to be operational	Head of Fundraising	April 2020

9. Awyr Las Team Reorganisation

Following team feedback from 1:1 meetings, feedback from other staff members and research into other NHS Charity Team Structures, the Head of Fundraising has reorganised the team, moving from an area-based structure to a specialisation-based structure.

The reasons for the reorganisation are to:

1. Streamline systems, reduce duplication of activity and increase efficiency of the team
2. Provide an improved supporter service
3. Increase job satisfaction
4. Improve the visibility of the charity within BCUHB premises and communications
5. Dedicate more time to research and planning, data management, evaluation and reporting

Since January 2018 the team has operated with the following structure:

- Band 8: Awyr Las Head of Fundraising (P/T)
- Band 6: Awyr Las Central Fundraising Support Manager (F/T)
- Band 6: Awyr Las East Fundraising Support Manager (P/T)
- Band 6: Awyr Las West Fundraising Support Manager (P/T Vacant)
- Band 6: Partnerships Support Manager (F/T)
- Band 3: Awyr Las Support Assistant (P/T)
- Band 3: Awyr Las Support Assistant (P/T)

From 1st October 2019 – 1st January 2020 the team will transition into their new roles. The whole team will be fully operational in their new roles in January 2020:

- Band 8: Awyr Las Head of Fundraising (P/T)
- Band 6: Awyr Las Digital and Data Support Manager (F/T)
- Band 6: Awyr Las Community and Sponsorship Support Manager (P/T)
- Band 6: Awyr Las and Charities Support Manager (F/T)
- Band 3: Awyr Las Internal & Finance Support Assistant (P/T)
- Band 3: Awyr Las Community and Sponsorship Support Assistant (P/T)
- Band 5: Awyr Las Support Officer (F/T Vacant)

The Team's Job Descriptions and Role Specifications have not changed. Staff members will not be expected to travel more than they do already or move from their main base.

The Team's new KPIs will be included in the Head of Fundraising's presentation at the September Charity Committee.

As the division of labour within the Support Team changes, so too will the reporting practices. The Head of Fundraising has consulted with other NHS Charities in Wales and in England to identify how best to report and monitor fundraising plans. Examples of how other NHS Charities report to other Charity Committees in Wales are included here:

- I. Cardiff and Vale Health Charity:
<http://www.cardiffandvaleuhb.wales.nhs.uk/sitesplus/documents/1143/Agenda%20bundle10.pdf#page20> (pages 22-31)
- II. Velindre Cancer Care:
<http://www.velindre-tr.wales.nhs.uk/sitesplus/documents/1137/Public%20Charitable%20Funds%20Agenda%20and%20Papers%205th%20June%2020191.pdf#page149> (pages 129 – 168)
<http://www.velindre-tr.wales.nhs.uk/sitesplus/documents/1137/Part%202%2018%20May%20CFC.pdf> (pages 1-20)
- III. Hywel Dda Charity:
<http://www.wales.nhs.uk/sitesplus/documents/862/Item%204.1%20Annual%20Plan%202019%2D20.pdf> (all)

10. Awyr Las Grants Monitoring and Evaluation

The Awyr Las Support Team have begun implementing improved systems to capture evidence of the benefits of Awyr Las grants. This important feedback from patients and staff is shared on social media, in press releases, and on the Awyr Las website. Planning has begun on collating an Impact Report for the 10-year anniversary of the date of the establishment of the charity, when North Wales' different NHS Charities came together as one charity. This will be published in September 2020.

Rhiannon Willmot will be in attendance at the Charity Committee Meeting to report on the Awyr Las funded NCDs PhD Research Project she carried out from 2016-2019 (see Appendix 1 for an overview of this research project).

Conclusion

Committee members are asked to note this report and planned actions.

Appendices

Appendix 1 Rhiannon Willmot Overview Report

Rhiannon Willmot's Awyr Las funded NCDs PhD Research Project 2016-2019

In 2016, as part of a collaboration between BCU Public Health Team, Awyr Las and the School of Psychology at Bangor University, a PhD research project was commissioned to investigate the role of psychology in reducing lifestyle driven health conditions, known as non-communicable diseases (NCDs).

NCDs are responsible for almost 70% of global mortality, and drastically reduce quality of life. They arise as a consequence of physical inactivity, poor diet, alcohol misuse and substance abuse; behaviours which frequently co-occur and are socioeconomically patterned. Moreover, this behavioural profile is characterised by impulsivity, whereby immediate rewards (e.g. unhealthy food, alcohol) are prioritised over long-term goals (e.g. reduced risk of obesity and liver disease).

Evidence suggests if individuals are to engage in healthy lifestyle behaviour, they must have both the desire and capacity to control impulsive responses. This is partially determined by the extent to which people identify with motives for healthy action, and how they subconsciously respond to their environment. Over six studies, this PhD investigated the role of positive psychology in promoting healthy decision-making. Collectively, results suggest the importance of supporting individuals to personally important long-term goals, not necessarily directly related to physical health. The implications of these findings for public policy are discussed.



Photo from a community-based running course via the Cybi Striders running club, based in Llangefni

Appendix 2: Learning together as a sector: NHS charities using shared measurement, *New Philanthropy Capital*

Charitable Funds Committee

4th October 2019



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Report Title:	<i>Third Sector Groups Report Q1 2019/20</i>
Report Author:	<i>Kirsty Thomson, Head of Fundraising</i>
Responsible Director:	<i>Sue Hill, Acting Executive Director of Finance</i>
Public or In Committee	<i>Public</i>
Purpose of Report:	<i>Attached is the Third Sector Groups Report for the Charity as at the 30th June 2019 to provide Committee members an overview of activity carried out by the Partnership Support Manager along with proposed and scheduled activity.</i>
Approval / Scrutiny Route Prior to Presentation:	<i>The Report is brought for discussion and scrutiny by the Charitable Funds Committee.</i>
Governance issues / risks:	<i>There are no governance issues for the Health Board of this paper.</i>
Financial Implications:	<i>There are no financial implications for the Health Board of this paper.</i>
Recommendation:	<i>The Committee is asked to note the report and approve the actions being taken.</i>

Health Board's Well-being Objectives <i>(indicate how this paper proposes alignment with the Health Board's Well Being objectives. Tick all that apply and expand within main report)</i>	✓	WFGA Sustainable Development Principle <i>(Indicate how the paper/proposal has embedded and prioritised the sustainable development principle in its development. Describe how within the main body of the report or if not indicate the reasons for this.)</i>	✓
1.To improve physical, emotional and mental health and well-being for all	✓	1.Balancing short term need with long term planning for the future	✓
2.To target our resources to those with the greatest needs and reduce inequalities	✓	2.Working together with other partners to deliver objectives	✓
3.To support children to have the best start in life	✓	3. those with an interest and seeking their views	✓

4.To work in partnership to support people – individuals, families, carers, communities - to achieve their own well-being	√	4.Putting resources into preventing problems occurring or getting worse	√
5.To improve the safety and quality of all services	√	5.Considering impact on all well-being goals together and on other bodies	√
6.To respect people and their dignity	√		
7.To listen to people and learn from their experiences	√		
Special Measures Improvement Framework Theme/Expectation addressed by this paper			
<i>Not applicable</i>			
Equality Impact Assessment			
<i>Not applicable – the report does not impact directly on staff or patients</i>			

Disclosure:

Betsi Cadwaladr University Health Board is the operational name of Betsi Cadwaladr University Local Health Board

Third Sector Groups Report October 2019

Kirsty Thomson, Head of Fundraising
October 2019

The purpose of this report is to provide the Charitable Funds Committee with an update on:

1. The working relationships with the 19 third sector groups that regularly support BCUIHB directly with donations for equipment, new facilities and special projects.
2. The third sector groups - separate legal entities from Awyr Las (for example, the local children's charity, Gafael Llaw) - that give through the charity
3. The third sector groups and other organisations that benefit from the use of charity tables on BCUIHB premises
4. Developments with the BCUIHB Third Sector Strategy

1. Third Sector Groups that directly support BCUIHB

Since 2014, relationships with the third sector groups that regularly support BCUIHB directly have been overseen by the Partnerships Support Manager (PSM), a member of the Awyr Las Support Team. As outlined in the Fundraising Report, a decision has been made to change the PSM's role from 1st November. From this time, all of these charities will have a designated local 'point person'. This 'point person' will be a representative of / appointed by the Area or Hospital Management Team. All 'point persons' will still be given support from members of the Awyr Las Support Team, including the current PSM, to ensure:

- a) These important groups receive the recognition they deserve
- b) The grants given to BCUIHB from these groups continue to be processed in a timely manner
- c) The robust application process which has been introduced for these groups remains in place so all groups continue to fund priorities that will make the greatest difference to patients
- d) The groups are supported with their fundraising activities
- e) The groups continue to receive wider BCUIHB support, for example attendance of Executives and Independent Members at their Annual General Meetings

The changes to the structure of the support given to these third sector groups are designed to streamline but maintain current levels of support that BCUIHB gives its supporters and ensure that the Area and Hospital Management Teams have close working relationships with the charitable organisations that support their services.

The Awyr Las Support Team will continue to oversee the Charitable Partners Registry, which holds the following information, and the Point Person will be responsible for ensuring records are kept up to date:

- Up-to-date contact details
- Brief outline of the charities purpose and principle activities, including a description of non-medical services provided on BCUIHB premises where relevant. Also included: whether the charitable partner meets on and promote their organisation in BCUIHB premises
- Service level agreements and Estates contracts where relevant or required
- Informal gifting Agreements with BCUIHB
- Recent donations to BCUIHB by the charitable partners
- Additional useful information, including examples of what the donations have funded

The Awyr Las Support Team will request quarterly updates from the Area / Hospital Management Team representatives who are responsible for the external charities (see the list of external charities in Appendix 1). All items of significance will be included in this Charity Committee report.

ACTIONS FOR OCTOBER – DECEMBER:

- i. Complete hand over of responsibility for the groups from the Partnerships Support Manager to the Area / Hospital representatives

- ii. Set up the systems to ensure the Charitable Partners Registry is maintained and quarterly reporting mechanisms are in place for the Area / Hospital representatives
- iii. Ensure every stage of the third sector grants process has an updated standard operating procedure
- iv. Monitor new structure and feedback risks and issues to the Charity Committee

2. Third Sector Groups giving to Awyr Las

A number of small registered charities give to healthcare services through Awyr Las, but not all are receiving the recognition they deserve. For example, in some cases, donations from other charities have been given to NHS staff members and the staff member hasn't recorded the charity's name on the receipt. If the Awyr Las Support Team is not aware of the charity, they do not have a Collaborative Working Agreement and Area / Hospital representative therefore don't benefit from support with social media promotion, press releases, in-hospital promotion and nor do they receive proper acknowledgement of thanks.

The changes in the Awyr Las Support Team will help enable these groups to be more readily identified so they will receive the benefits of giving through Awyr Las.

ACTIONS FOR OCTOBER – DECEMBER:

- i. Complete a review of groups / charities that have given through the charity and ensure all regular supporters have a Collaborative Working Agreement in place
- ii. Increase awareness of the need to make the Awyr Las Support Team aware of partnerships / support from third sector groups
- iii. Update the Awyr Las Stewardship plan & implement a system within the supporter database to ensure these groups receive the recognition they deserve

3. Use of Charity Tables on BCUHB premises

Following complaints by patients and staff members, the Awyr Las Support Team has reviewed how charity tables on BCUHB premises are used. The Team has surveyed a cross section of staff and patients, and carried out research into other NHS Trusts' policies on use of space and business' policies on allowing charities to use their spaces to fundraise and promote their services or campaigns.

NHS Boards and Trusts differ in their stance on encouraging external charities to promote themselves on hospital premises. Some have a 'zero tolerance' approach to allowing external charities to fundraise on their premises. An example can be seen here:

<https://www.cpft.nhs.uk/Head%20to%20Toe%20Charity/CPFT%20Charity%20Policy%20-%20Version%201%20-%20COMPLETE.pdf>. Our research shows that many Trusts have a system in place to record the activity of external charities on NHS premises, and the Fundraising function within the trust has oversight of which organisations are accessing the premises. See: <https://www.whittington.nhs.uk/document.ashx?id=1601> for an example of this.

Network Rail and other large organisations which permit charities to fundraise on their premises request that fundraisers adhere to the company's own code of conduct and application process. See: <https://cdn.networkrail.co.uk/wp-content/uploads/2019/05/Bucket-Collection-Policy-January-2019.pdf>. Most organisations appear to restrict the number of days that fundraisers can be present on site. See: <https://www.newcastle.gov.uk/sites/default/files/2018-12/Charity%20Face%20to%20Face%20Fundraising%20Scheme.pdf>.

The Awyr Las Support Team has the following recommendations:

- BCUHB introduces a code of conduct for all fundraising activity on its premises. The code must be adhered to by all who represent charities or organisations at the charity desk. This includes volunteers and NHS staff members promoting their own charity, Awyr Las
- Within the code of conduct, charities and organisations must: agree to provide BCUHB with the amount raised / number of people registered after every session on the charity desk; complete risk assessments when using BCUHB property
- Guidance on permitted behaviour and that which is deemed unacceptable will be included in the Code of Conduct
- All those wishing to fundraise or promote (external charities, businesses, public organisations and NHS staff, Awyr Las volunteers) on BCUHB premises must sign a compliance form and confirm they will adhere to the code of conduct; all will be given set days per month where possible for consistency
- All charity tables across BCUHB will be included on an online BCUHB online system. All bookings must be recorded in the same way. All hospitals will have designated member of staff responsible for overseeing bookings (where possible this should be managed by General Offices)
- A new simple complaints procedure will be introduced as part of this online system
- There will be a prioritisation and restriction policy, so all charities and organisations are limited to having a certain number of days on the premises every month. Local charities that support BCUHB services will be prioritised over national organisations
- The code of conduct will be updated annually, and will state which activities are prohibited. Third party fundraising companies will not be provided with a charity table; all fundraisers must be volunteers or work directly with the external charity. Lotteries will be permitted, but with strict rules attached to ensure that the presence of fundraisers does not affect patients' overall experience in the hospital

ACTIONS FOR OCTOBER – DECEMBER:

- i. Head of Fundraising to draw up a draft Code of Conduct for all charities / organisations that use BCUHB premises to promote or fundraise. Share the draft with Charity Committee, Advisory Group, Hospital and Area Management Teams for feedback. Share with all external charities and organisations that are currently recorded as using the premises to promote or fundraise for their contributions and feedback
- ii. Set up a system so all complaints can be registered and dealt with in line with the complaints procedure attached to the Code of Conduct
- iii. Head of Fundraising to liaise with BCUHB Systems Team to create a simple system to record charity table users
- iv. Head of Fundraising to receive necessary authorisation to centralise all charity table bookings (internal and external) in General Offices / agreed points within the hospitals
- v. Report back to Charity Committee in December

4. BCUHB Third Sector Strategy

The Awyr Las Support Team has not received any reports of further developments with the drafting of a new BCUHB Third Sector Strategy.

The Head of Fundraising has been included in meetings held to address existing inequalities in food and beverage provision and gifting by Third Party organisations on BCUHB property. There are no developments to report.

The Awyr Las Volunteers Strategy will be drawn up in 2020 when the BCUHB Volunteering Strategy will have been refreshed. The Awyr Las volunteering strategy will underpin the broader BCUHB volunteering strategy.

ACTIONS FOR OCTOBER – DECEMBER:

- i. Regularly report in to the BCUHB Third Sector Strategy working group to ensure Awyr Las features within the future plans
- ii. Agree a timetable and work plan for addressing inequalities in food and beverage provision and gifting by Third Party organisations on BCUHB property with Estates and Facilities
- iii. Schedule the development of the Awyr Las volunteering strategy into 2020/21 workloads

Conclusion

Committee Members are asked to note this report and planned actions.

Appendices

BCUHB Charitable Partners

Hospital	Charity	Area West/ Central/ East	Provisions	HB Agreements (N: Need, N/A: Not necessary, H: Have)			Average Annual Gifting	Point Person (exact role holders TBC)
				SLA	GA	Contract		
Abergele	Abergele Hosp LoF	Central	Café	N	N	N	£25,000 - £100,000	Area Management Team Representative
Alltwn	Ysbyty Alltwn LoF	West	Fundraising	N/A	N	N/A	£5,000 - £25,000	Area Management Team Representative
Bryn Beryl	Bryn Beryl LoF	West	Fundraising	N/A	N	N/A	£5,000 - £25,000	Area Management Team Representative
Chirk	Chirk Hospital Circle of Friends	East	Fundraising	N/A	N	N/A	£25,000 - £100,000	Area Management Team Representative
Colwyn Bay	Colwyn Bay LoF	Central	Fundraising	N/A	N	N/A	£5,000 - £25,000	Area Management Team Representative
Deeside Hospital	Deeside Hospital LoF	East	Café and Fundraising	N	N	N	£5,000 - £25,000	Area Management Team Representative

Denbigh	Denbigh Infirmary LoF	Central	Tea Bar and Fundraising	N/A	N	N	£5,000 - £25,000	Area Management Team Representative
Dolgellau	Ysbyty Dolgellau LoF	West	Fundraising	N/A	N	N/A	£5,000 - £25,000	Area Management Team Representative
Eryri	Cyfeillion Ysbyty Eryri Hospital LoF	West	Fundraising	N/A	N	N/A	£5,000 - £25,000	Area Management Team Representative
Ffestiniog Health Centre	Ysbyty Ffestiniog League of Friends	West	Fundraising	N/A	N	N/A	Under £5,000	Area Management Team Representative
Holywell	The Good Companions of Holywell Hospital	Central	Café and Fundraising	N	N	N	£5,000 - £25,000	Area Management Team Representative
Maelor Hospital	Maelor Voluntary Service	East	Cafes	N	N	N	Over £100,000	Hospital Management Team representative
	Wrexham Hosp LoF (Inc Bala LoF)	East	Shops	N	N	N	Over £100,000	Hospital Management Team representative
Mold	Mold Hospital Leauge of Friends	East	Café and Fundraising	N	N	N	£5,000 - £25,000	Area Management Team Representative
Penrhos Stanley	Penrhos Stanley Amenities Fund	West	Fundraising	N/A	N	N/A	Under £5,000	Area Management Team Representative
Ruthin	Ruthin Hospital LoF	Central	Café and Fundraising	N	N	N	£25,000 - £100,000	Area Management Team Representative
Tywyn	The Tywyn and District Memorial Hospital Appeal Fund	West	Fundraising	N/A	N	N/A	Under £5,000	Area Management Team Representative
Ysbyty Glan Clwyd	Glan Clwyd LoF	Central	Cafés and Shop	N	N	N	Over £100,000	Hospital Management Team representative
Ysbyty Gwynedd	Ysbyty Gwynedd LoF	West	Fundraising	N/A	N	N/A	£25,000 - £100,000	Hospital Management Team representative

Charitable Funds Committee

 4th October 2019

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Report Title:	<i>Legacy Strategy Update 2018/21</i>
Report Author:	<i>Kirsty Thomson, Head of Fundraising</i>
Responsible Director:	<i>Sue Hill, Acting Executive Director of Finance</i>
Public or In Committee	<i>Public</i>
Purpose of Report:	<i>Attached is an update of the Legacy Marketing Plan for 2018/21. This document provides a roadmap to promote legacy giving internally and externally.</i>
Approval / Scrutiny Route Prior to Presentation:	<i>The Report is brought for scrutiny by the Charitable Funds Committee.</i>
Governance issues / risks:	<i>There are no governance issues for the Health Board of this paper.</i>
Financial Implications:	<i>There are no financial implications for the Health Board of this paper.</i>
Recommendation:	<i>The Committee is asked to note the report and approve the actions being taken.</i>

Health Board's Well-being Objectives <i>(indicate how this paper proposes alignment with the Health Board's Well Being objectives. Tick all that apply and expand within main report)</i>	✓	WFGA Sustainable Development Principle <i>(Indicate how the paper/proposal has embedded and prioritised the sustainable development principle in its development. Describe how within the main body of the report or if not indicate the reasons for this.)</i>	✓
1.To improve physical, emotional and mental health and well-being for all	✓	1.Balancing short term need with long term planning for the future	✓
2.To target our resources to those with the greatest needs and reduce inequalities	✓	2.Working together with other partners to deliver objectives	✓
3.To support children to have the best start in life	✓	3. those with an interest and seeking their views	✓

4.To work in partnership to support people – individuals, families, carers, communities - to achieve their own well-being	√	4.Putting resources into preventing problems occurring or getting worse	√
5.To improve the safety and quality of all services	√	5.Considering impact on all well-being goals together and on other bodies	√
6.To respect people and their dignity	√		
7.To listen to people and learn from their experiences	√		
Special Measures Improvement Framework Theme/Expectation addressed by this paper			
<i>Not applicable</i>			
Equality Impact Assessment			
<i>Not applicable – the report does not impact directly on staff or patients</i>			

Disclosure:

Betsi Cadwaladr University Health Board is the operational name of Betsi Cadwaladr University Local Health Board



Awyr Las Blue Sky

Elusen GIG Gogledd Cymru
The North Wales NHS Charity

Legacy Strategy Update October 2019

Kirsty Thomson, Head of Fundraising
September 2019

The purpose of this report is to provide the Charitable Funds Committee with an update on plans outlined in the Awyr Las Legacy Strategy 2018/21. The full strategy document, which was presented to the Charity Committee in December 2018, can be found at: <https://awyrlas.org.uk/legacystrategy>.

1. Review of progress in Q1 2019/20

The following primary objectives were listed on the Legacy Strategy Outline 2018/21 for completion in 2019/20

- Surveying
- Legacy promotion video for staff meeting & public areas
- Groups and associations mailing
- Solicitors' mass mailing and meetings

The action plans relating to the above objectives are below:

1.1 Surveying:

Action	Responsibility	Target completion	Fulfilled
Test survey staff	HoF	Q1	100%
Test survey solicitors	HoF	Q1	100%
Review and finalise online survey	HoF	Q2	100%
Distribute survey	FSMs	Q2	POSTPONED TO Q3 TO GO OUT WITH ANNUAL REPORT
Monitor results and promote	HoF	Q3	
Evaluate responses and create action plan	HoF	Q3	
Report findings	FSMs	Q4	
Revise Legacy Strategy based on findings	HoF	Q4	

1.2 Video & leaflets at staff meetings:

Action	Responsibility	Target completion	Fulfilled
Review legacy video content	HoF	Q1	100%
Arrange filming	HoF	Q1	100%
Complete filming & edit	HoF	Q2	POSTPONED TO Q3

Present on website & key locations	FSM	Q3	
Introduce to 1 st stage target staff meetings	HoF & FSM	Q3	
Ensure inclusion in all target staff meetings	FSM	Q4	

1.3 Group and Associations (G & A) mailing:

Action	Responsibility	Target completion	Fulfilled
Cleanse data to ensure quality contact information	HoF	Q1	50%
Review data and broaden reach to new G&As	HoF	Q2	50%
Produce and distribute mailing	FSMs	Q3	
Follow up all leads to arrange meetings	FSMs	Q4	

1.4 Solicitors' mass mailing and meetings:

Action	Responsibility	Target completion	Fulfilled
Cleanse data to ensure quality contact information	HoF	Q1	100%
Review data and issue non-legacy focused mailing	HoF	Q1	100%
Promote legacy event	FSMs	Q2	POSTPONED UNTIL SURVEY DATA RECEIVED
Deliver legacy event	HoF	Q3	POSTPONED UNTIL SURVEY DATA RECEIVED
Evaluate event and Draw up plan for subsequent events	HoF	Q3	POSTPONED UNTIL SURVEY DATA RECEIVED
Feedback mailing	HoF	Q3	POSTPONED UNTIL SURVEY DATA RECEIVED
Introduce 1:1 meetings with solicitors	HoF & FSMs	Q3	

2. KPIs for 2019/20

- a) Social media: minimum one reference to legacy giving per month
Q1 2019/20 66% fulfilled Q2 2019/20 100% fulfilled
- b) Press coverage: minimum one press release issued per quarter
Q1 2019/20 100% fulfilled Q2 2019/20 100% fulfilled
- c) Meet above timetable 2019/20 timetable of activity
Q1 2019/20 92% of planned legacy marketing activity listed in section 2 was completed within the Q1 target timescales. Q2 2019/20 50% fulfilled. Reasons for delay: want to include survey with the Annual Report mailing, which hasn't been finalised; data cleanse incomplete due to lack of knowledge of the system within the team / expense of external provider carrying this out (this is now being addressed with additional training); video delayed because working around in-kind support availability.

3. Monitoring and Evaluation

- a) Increase in request for legacy packs / information and reason for choosing to leave a legacy
No apparent increase to date
- b) Interest in specific legacy events
Promotion of legacy events to begin in 2020
- c) Feedback from surveys / discussions with solicitors and supporters
Surveys for Fund Advisors and Solicitors will be issued October - November with feedback presented in March

4. Complying with Regulation and Best Practice

Local solicitors Breese Gwyndaf continue to offer their expertise and guidance on a pro bono basis to ensure all wording used on legacy promotions and information packs is in line with current regulation and to ensure best practice is followed at all times. All new materials will be compliant with the new Fundraising Regulator Code of Fundraising Practice, which is being introduced on 1st October 2019.

5. Budget

The planned activity funding continues to be met through the existing agreed fundraising budget.

6. ACTIONS FOR OCTOBER – DECEMBER:

- i. Send survey to solicitors, monitor return rate, evaluate responses
- ii. Complete film and new leaflet & issue on web and basic internal communications
- iii. Cleanse Groups and Associations data, segment data and issue legacy mailing to 33%, Annual Report mailing to 33% and Priorities Brochure to 34%
- iv. Hold a minimum of 5 x 1:1 meetings with solicitors
- v. Draw up plan for the first Awyr Las legacy month, due to be held in 2020

Conclusion

Committee members are asked to note this report and planned actions.

Charitable Funds Committee

 4th October 2019

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Report Title:	Charitable Funds Advisory Group
Report Author:	Rebecca Hughes, Charity Accountant
Responsible Director:	Sue Hill, Executive Director of Finance
Public or In Committee	Public
Purpose of Report:	<p>The minutes provide an update from the Charitable Funds Advisory Group meetings.</p> <p>Attached are the:</p> <ol style="list-style-type: none"> 1. Minutes from the Charitable Funds Advisory Group meeting held on the 18th July 2019. 2. Draft minutes from the Charitable Funds Advisory Group meeting held on the 5th September 2019.
Approval / Scrutiny Route Prior to Presentation:	The Report is brought for noting by the Charitable Funds Committee.
Governance issues / risks:	There are no governance issues for the Health Board of this paper.
Financial Implications:	There are no financial implications for the Health Board of this paper.
Recommendation:	The Committee is asked to note the discussions of the Advisory Group,

Health Board's Well-being Objectives <i>(indicate how this paper proposes alignment with the Health Board's Well Being objectives. Tick all that apply and expand within main report)</i>	√	WFGA Sustainable Development Principle <i>(Indicate how the paper/proposal has embedded and prioritised the sustainable development principle in its development. Describe how within the main body of the report or if not indicate the reasons for this.)</i>	√
1.To improve physical, emotional and mental health and well-being for all	√	1.Balancing short term need with long term planning for the future	√
2.To target our resources to those with the greatest needs and reduce inequalities	√	2.Working together with other partners to deliver objectives	√

3.To support children to have the best start in life	√	3. those with an interest and seeking their views	√
4.To work in partnership to support people – individuals, families, carers, communities - to achieve their own well-being	√	4.Putting resources into preventing problems occurring or getting worse	√
5.To improve the safety and quality of all services	√	5.Considering impact on all well-being goals together and on other bodies	√
6.To respect people and their dignity	√		
7.To listen to people and learn from their experiences	√		
Special Measures Improvement Framework Theme/Expectation addressed by this paper			
<i>Not applicable</i>			
Equality Impact Assessment			
<i>Not applicable – the report does not impact directly on staff or patients</i>			

Disclosure:

Betsi Cadwaladr University Health Board is the operational name of Betsi Cadwaladr University Local Health Board



CHARITABLE FUNDS ADVISORY GROUP COMMITTEE

**Minutes of the Meeting Held on Thursday 18th July 2019 at 10.00am
Meeting Room 3 Carlton Court, St. Asaph**

Present:

Ms Rebecca Hughes	Charitable Funds Accountant (Chair)
Ms Kirsty Thomson	Head of Fundraising
Ms Emma Jones	Fundraising Team
Mr Steve Morris	Lay Member
Ms Christine Hoyle	Lay Member & Former Haematology Consultant
Ms Eryl Gilliland	Head Of Podiatry And Orthotics: West
Ms Tracey Sellar	Deputy General Manager, Medicine Directorate

In Attendance:

Ms Paula Clayton	Assistant Financial Charity Accountant
Ms Wendy Marles	Minute Taker
Ms Nia Thomas (part)	Head of Organisational Development
Ms Nia Harris (part)	Organisational Development Manager

Agenda Item	Action
<p>CFAG19/20 APOLOGIES FOR ABSENCE & DECLARATION OF INTERESTS</p> <p>Apologies of absence were noted from Prof Rob Atenstaedt, Ms Beryl Roberts, Ms Keeley Twigg, Mr Andrew Gralton, Ms Lynne Joannou, Ms Gail Critchley and Mr Ian Fearn.</p> <p>Ms E Gilliland declared the staff member in question in application CFAG19/22.04, was a family member.</p>	
<p>CFAG19/21 MINUTES OF PREVIOUS MEETING HELD ON 23rd May 2019</p> <p>CFAG19/21.1 Accuracy</p> <p>The minutes of the previous meeting were approved as accurate. There was one amendment to the attendee list as Ms Eryl Gilliland was on the list but did not attend.</p> <p>CFAG19/21.2 MATTERS ARISING AND REVIEW OF SUMMARY ACTION PLAN</p> <p>Ms Hughes informed the group there were four outstanding actions still open. These will</p>	

be discussed in the Charitable Funds Committee meeting, which is September 2019.	
<p>CFAG19/22 REQUEST FOR EXPENDITURE APPROVALS</p> <p>CFAG19/22.1 E-Bug Project - £4,305</p> <p>Ms Hughes reminded the group that this application had been discussed at a previous meeting where the applicants requested £12,400. In light of comments from the group, they have considerably reduced the cost of the application. As it is less than £5,000 it did not need to come back to the group, but Ms Hughes wanted the group to see what changes had been made and whether it would now be supported.</p> <p>Ms Thomson queried whether, with little funds in the general fund, could it be funded from elsewhere. Ms Hughes informed the group that there was no other area to obtain funds and there is no Public Health fund.</p> <p>Ms Thomson suggested that Pharmacy could look at other avenues, possibly fundraising alongside pharmaceuticals. Ms Hoyle stated that in the past this was not allowed, and asked who would do the fundraising as Pharmacy is a very busy department.</p> <p>Ms Gilliland asked if they could use some of the fund from the Wrexham Pharmacy fund. Ms Hughes stated that this was not possible as the funds are required for Conwy/Denbighshire. Ms Hughes said that she would explore why it was not pan-BCU.</p> <p>The general feel from the group was for Pharmacy to start fundraising alongside the fundraising team. Ms Thomson will liaise with Ms Sassi-Jones the Lead Antimicrobial Pharmacist and then possibly offer a contribution towards the amount they require once they have raised some funds.</p> <p>Outcome – Explore fundraising and review</p> <p>CFAG19/22.2 Bladder Scanner – Tegid Ward - £6,300</p> <p>Ms Hughes gave a brief outline of the application explaining to the group that they have been actively fundraising for the new bladder scanner. Their current machine is 16 years old and has stopped working and has had to be condemned.</p> <p>The group again felt that this should perhaps come from core budget, but as they have fundraised for this then everyone was in agreement that it should be approved.</p> <p>Outcome – Approved subject to approval from Hospital Director, Chief Financial Officer and Medical Devices Group</p> <p>CFAG19/22.3 Bladder Scanner – Conwy Ward - £6,825</p> <p>Ms Hughes gave a brief outline of the application explaining to the group that they have been actively fundraising for a bladder scanner. They have to wait for a bladder scanner to become available for them to use on Conwy Ward as they do not have their own.</p>	<p>RH</p> <p>KT</p> <p>PC</p>

The group did question the price on both of the scanner varying but were reassured that once the application went through they would be the same price.

The group again felt that this should perhaps come from core budget, but as they have fundraised for this then everyone was in agreement that it should be approved.

Outcome – Approved subject to approval from Hospital Director

PC

CFAG19/22.4 MSc Biomedical Science 2 Year Part-Time Course - £7,500

Ms Hughes gave a brief outline of this application stating that this application was to fund a Biomedical Scientist to undertake further education and research that will ultimately benefit the department.

Ms Hoyle stated that as it was to be funded from their funds she was happy to agree.

Mr Morris asked what was the guarantee that the individual would stay with BCU is.

Ms Gilliland stated that this would enable the candidate to apply for future Band 7 posts and held provide a continuity plan for the department.

Ms Thomson commented that it is good to see departments using their funds for purpose that is intended for.

Outcome – Approved subject to approval from Directorate General Manager and Chief Financial Officer

PC

CFAG19/22.5 Reminiscence Interactive Therapy/Activities (RITA) System x2 - £11,990

Ms Hughes gave a brief outline of the application stating that this system helps to communicate with, involve and interest patients with dementia. The charity has purchased similar items for other areas on the Health Board. There is a lot of evidence demonstrating the benefits and an increase in patient happiness.

The group had many questions regarding this application. The application did not say how many tablets would be provided and it did not say whether there would be a Welsh version available for Welsh speaking patients.

Ms Thompson said her personal feeling was that the group should be saying that they would assist by part funding but the rest would have to be raised through fundraising as there is not much in the general funds.

Mr Morris informed the group that he had first-hand experience of patients with dementia and has seen nurses on the ward having to sit with patients. He saw that talking helped the patients, but that wards were always understaffed.

Ms Thomson suggested that maybe the wards should have trained volunteers to relieve the pressure from the staff.

<p>Ms Clayton informed the group that such equipment had already been approved for Chirk Hospital.</p> <p>Ms Hoyle suggested that the group could have some feedback from Chirk to see how successful the equipment had been over there.</p> <p>Ms Hughes confirmed with the group that they were all happy to fund one system from general funds and one would have to be fundraised for, as long as it was also available in Welsh. This will be confirmed with the applicants.</p>	RH
<p>Outcome – Approved 1 system from General Funds, subject to approval from Hospital Director and Chief Financial Officer</p>	PC
<p>CFAG19/22.6 Patient Journey App - £13,400</p> <p>Ms Hughes gave a brief outline of the application, which is for a Patient Journey app, which would help to provide information to patients having hip and knee arthroplasty at Ysbyty Gwynedd. Patients and their families will have up to date, relevant information readily available. Families can use the app to monitor patient progress, e.g. exercises that need completing, movement expected. Patients and staff will have a better understanding of what is expected during their stay and during recovery.</p> <p>Ms Gilliland asked if this would be replacing the current joint school that is run for the patients.</p> <p>Ms Hughes informed the group that this would replace the current paper information booklets and that attendance at joint school could probably be reduced. Exercises may be easier to follow on the app rather than on the paper copies.</p> <p>Ms Thomson reminded the group that this would be come out of their own funds and it is a very innovative idea.</p> <p>Ms Sellar suggested that this may be the way forward to patients and if successful could be rolled out to the other sites.</p> <p>The group were happy to support.</p>	
<p>Outcome – Approved subject to approval from Information Technology regarding the IT Application</p> <p>CFAG19/22.7 Faecal Incontinence - £24,000</p> <p>Ms Hughes gave a brief outline of the application, which is to purchase equipment to support diagnostic investigation of patients suffering from faecal incontinence in line with a report of the All Wales Task and Finish group. They are asking for £22,000 from General Funds and £2,000 from the Colorectal fund.</p> <p>The group as a whole felt this was a poor application with not enough details around what was required e.g. is the equipment portable, is there a special clinic, where would it be located? The Group recommended that the application was revised and submitted to the September meeting for consideration.</p>	PC

<p>Ms Thomson informed the group that the application was not good enough to be passed on to fundraisers.</p> <p>Ms Sellar asked whether the application has been to Capital for funding consideration prior to coming to the charity. Ms Clayton informed the group that the application had been to Medical Devices on 1st July, but that was for approval of the equipment and not consideration of funding. Ms Sellar felt that this should have been on the Capital plan, unless it was required as a result of a new all Wales pathway.</p> <p>Ms Thomson suggested that the application process might need reviewing. The group should look at this as whole as the process is not effective now. Applications and coming straight to CFAG rather than going to Capital.</p> <p>Outcome – Not approved. Decision deferred to the September meeting.</p>	PC
<p>APPLICATIONS FOR COMMENT</p> <p>CFAG19/22.8 Minor Works Scheme – Ysbyty Alltwen - £29,700</p> <p>Ms Hughes gave a brief outline of the application, which is for change of use of key areas in Ysbyty Alltwen. A reconfiguration of the space would provide additional clinic rooms in key places such as MIU and Outpatients departments.</p> <p>Ms Gilliland informed the group that she was familiar with the site can see why they want to make these changes, as the present corridors were very large and there could be better use of the space which would increase clinical capacity.</p> <p>Ms Thompson stated that the people who originally donated the money to the Madog Community and Hospital fund wanted the money to be used for this.</p> <p>Outcome – Recommended for approval</p> <p><i>Ms Nia Thomas and Ms Nia Wyn Harris joined the meeting.</i></p> <p>CFAG19/22.9 Staff Experience Fund Application £154,893</p> <p>Ms Hughes introduced Nia Thomas, Head of Organisation Development and Nia Wyn Harris, Organisational Development Manager to present the application for the Staff Experience Fund Application. Nia Thomas and Nia Wyn Harris gave a brief overview of what they have achieved so far with the Visual Slides, Be Proud and Senior Leaders as part of the staff engagement project.</p> <p>This application is for current Staff Development Fund to now become Staff Experience Hearts & Minds, grants to develop and build on staff engagement.</p> <p><u>Visual Slides</u> – 3D full circle of engagement. All online, user friendly. Staff engagement ambassadors. CPD sessions. 'We Said – We Did' Introduction pack on the day. 3D</p>	RH

branding.

Be Proud – Is an evidence based programme. Priority areas. 9 enablers of engagement. Survey with the team. How staff feel. Take through journey of engagements. Completely anonymous. 26-week journey – 2 key people in the team. Lego head – filling head with ideas. Visual aids – getting everyone involved.

Senior Leads – Changing behaviours leadership programme. 90 leaders going forward and cascading down to lower bands. Engagement index gone up. Invested in Be Proud – survey staff every ¼. Every member of staff would comment through the year. 20 teams going through.

Ms Hoyle enquired as to how staff levels of sickness/stress have been reduced since starting this and was there evidence of staff and not just the pioneers. Are the statistics across the whole area? Ms Wyn Harris informed the group that there was an available dashboard to share and shows absentees/stress levels.

Ms Hughes said that the application stated that the funding would be used for things such as whiteboards and chairs and asked for some further examples of what the money would be used for. It was confirmed that the grants would be for less than £5,000 and would come from frontline staff who have identified the investment as a key enabler to improve staff experience in the workplace. The same application system and scoring criteria developed for the Hearts and Minds grant scheme would be used.

Ms Hoyle enquired what happens when it runs out; it could be all gone in 4 months if offering £5,000 at a time. Ms Wyn Harris informed the group that they would be working closely with the charity and fundraising for future funds. The group was also informed that a committee had been set up.

Ms Thomson suggested that representative from the CFAG should sit on that panel. Looking at what other NHS charities have done may help in this area.

Ms Nia Thomas and Ms Wyn Harris left the meeting.

The group did not feel that the application provided sufficient detail as to how the funds would be used, particularly given the large amount requested. Ms Hughes suggested giving them a small amount of £20,000 to trial and then assess further funding following feedback on the trial.

Ms Thomson suggested that an alternative option would be for the charity team to run the scheme in the same way as 'Hearts & Minds'.

Ms Hughes confirmed with the group that general feel was that if it was run like 'Hearts & Minds', people would be more comfortable.

Ms Thomson suggested that an 'All Trust' email could be sent out. All applications will be reviewed equally. A draft could be drawn up end August/1st September and could be an agenda item for the next meeting with application criteria and the email.

<p>The group agreed that this should be done as an initial trial and using a maximum of £24,000 funding.</p> <p>Outcome – The group agreed that it should be run by the charity and will be discussed as an agenda item for the next meeting.</p>	KT
<p>CFAG19/23 FUND BALANCES AS AT 30th JUNE 2019</p> <p>Ms R Hughes presented the fund balances for information.</p>	
<p>CFAG19/24 FUNDRAISING PRESENTATION</p> <p>Ms K Thomson presented to the group on the work of the Fundraising Team, their priorities and plans for the future.</p> <p>She gave a brief insight into the structure of the fund raising team of who is employed and what their areas are. The principle goals/aim are for the need of the most vulnerable and impactful change.</p> <p>The Charity continues to provide support for all patients and service users but from 2019, an emphasis will be on the following in order to improve the health and wellbeing of the most vulnerable in society:</p> <ul style="list-style-type: none"> • Older People • Early Years • Mental Health • Cancer Care <p>Independent Charities and Third Sector Groups are also supported by the Awyr Las Support Team.</p> <p>Ms Thomson briefly explain their Hearts and Minds Grant Scheme where a minimum of five projects were to be selected with a total of £5,000 available. It was a simple online application process and the application period was open for one month only November 2018. Out of the 52 applicants, 12 were funded through Hearts and Minds and a further four applications were funded from specific ward/department/area funds. A total of £12,530 was granted to 16 of the 52 applicants.</p> <p>Ms K Thomson agreed to provide an update to each meeting going forward.</p>	
<p>CFAG19/25 ANY OTHER BUSINESS</p> <p>There was no other business. The group are still seeking new members to join.</p>	
<p>CFAG19/26 DATE OF NEXT MEETING</p> <p>Next meeting to take place on: Thursday, 5th September 2019 <i>at 10.00 a.m.</i> <i>Finance Meeting Room, Ysbyty Gwynedd</i> <i>Meeting Room 1, Carlton Court</i> <i>Boardroom, Wrexham Maelor</i></p>	

Betsi Cadwaladr University Health Board is the operational name of Betsi Cadwaladr University Local Health Board



CHARITABLE FUNDS ADVISORY GROUP COMMITTEE

**Minutes of the Meeting Held on Thursday 5th September 2019 at 10.00am
Meeting Room 3 Carlton Court, St. Asaph**

Present:

Ms Rebecca Hughes	Charitable Funds Accountant (Chair)
Ms Kirsty Thompson	Head of Fundraising
Mr Steve Morris	Lay Member
Ms Christine Hoyle	Lay Member & Former Haematology Consultant
Ms Eryl Gilliland	Head Of Podiatry And Orthotics: West
Ms Beryl Roberts	Lead Cancer Nurse
Ms Lynne Joannou	Assistant Director Primary Care Contracting
Prof Rob Atenstaedt	Consultant in Public Health Medicine & Associate Director of Public Health in North Wales

In Attendance:

Ms Paula Clayton	Assistant Financial Charity Accountant
Ms Wendy Marles	Minute Taker

Agenda Item	Action
<p>CFAG19/27 APOLOGIES FOR ABSENCE & DECLARATION OF INTERESTS</p> <p>Apologies of absence were noted from Ms Keeley Twigg, Ms Gail Critchley, Ms Dilys Percival, Ms Sue Murphy and Ms Tracey Sellar.</p>	
<p>CFAG19/28 MINUTES OF PREVIOUS MEETING HELD ON 23rd May 2019</p> <p>CFAG19/28.1 Accuracy</p> <p>The minutes of the previous meeting were approved as accurate.</p> <p>Ms Hughes asked the group to bear in mind the total amount requested from General Funds was £31,659 and the balance on General Funds is £154,132.67.</p> <p>CFAG19/28.2 MATTERS ARISING AND REVIEW OF SUMMARY ACTION PLAN</p> <p>Ms Hughes informed the group there were five outstanding actions still open relating to approvals required for applications.</p>	

<p>CFAG19/22.6 Patient Journey App – IM&T Approval Outstanding. Ms Hughes informed the group that the status on this application was that it they were currently reviewing security and functionality aspects of the application. DPIA and Cloud Security.</p> <p>The other four applications were still waiting on additional approval. These will be discussed in the Charitable Funds Committee meeting, which is 4th October 2019.</p>	
<p>CFAG19/29 REQUEST FOR EXPENDITURE APPROVALS</p> <p>CFAG19/29.1 Reminiscence Interactive Therapy/Activities (RITA) System - £5,995</p> <p>Ms Hughes gave a brief outline of the application to the group, explaining that this is to fund the information system for the Dementia Patients on Glaslyn Ward, Ysbyty Gwynedd. This would create dementia friendly hospital sites with secure, safe and therapeutic ward environments where dementia patients are cared for and wider environments that promote independence and orientation.</p> <p>The system has been evaluated widely and there are a number of reports from Trusts and services available.</p> <p>Ms Hughes reminded the group that three of these systems have been purchased. There was a previous concern that the system was not bilingual. This has now been confirmed and there is a Welsh function available.</p> <p>The group felt that with this functionality available there would be more applications for this system in the future and agreed to approve.</p> <p>Outcome – Approved pending approval from Medical Devices Group</p> <p>CFAG19/29.2 Replacement Flooring – Tywyn Hospital - £6,209</p> <p>Ms Hughes gave a brief outline of the application explaining that this application was to replace flooring, which is not fit for purpose. This would cover main reception, one ward and one toilet.</p> <p>The group again queried should items like this come from capital budgets and not charitable funds.</p> <p>The group felt that they have enough money in their General Purpose fund, which would enable them to purchase this.</p> <p>Ms Thomson agreed they should spend their money.</p> <p>Outcome – Approved pending approval from Capital Estates</p> <p>CFAG19/29.3 Bladder Scanner – Abergele District Nurses - £6,405</p> <p>Ms Hughes informed the group that the Abergele District Nurses have been fund</p>	<p>PC</p> <p>PC</p>

raising for this bladder scanner and have received a grant from Groundwork via funding with Tesco. The only machine they have access to, is based in Llandudno this affects patients and staff.

The group felt that as they have specifically fundraised for this piece of equipment the application should be approved.

Outcome – Approved pending approval from Medical Devices Group

PC

CFAG19/29.4 Capsule Endoscopy - £9,659

Ms Hughes gave a brief outline of this application stating that Capsule endoscopy is a technology that uses a swallowed video capsule to take photographs of the inside of the oesophagus, stomach and small intestine. BCUHB patients have been referred to the Royal Liverpool Hospital.

The application is for General fund to purchase the software package, diagnostics and scanner. The capsules would be at their cost.

Ms Clayton informed the group that Mr Adrian Butlin has approved, but there were other approvals outstanding.

Ms Joannou queried the application, as it was not clear if the service was just for the West or for the whole North Wales.

The group felt that the application should be pan BCU as it is definitely required.

Ms Clayton informed the group that 2 consultants have been trained in performing and analysing capsule endoscopies in order to provide a sustainable service.

Ms Thomson stated that applications accessing funds from limited general funds should be carefully considered. Commitment should be shown in fundraising and all general fund applications should be 50% and fundraise the other 50%.

Ms Roberts enquired if there were any other funds they could access in YG for this application.

Ms Hoyle informed the group that the health board should be moving forward with technology and it was a good use of general funds providing it was pan BCU.

Ms Hughes stated that she would question if this were BCU wide service.

PC

Outcome – Decision deferred to the November Charitable Funds Advisory Group

CFAG19/29.5 Installation of Software to Existing Mammography Unit in order to perform Contrast Enhanced Digital Mammography Examinations - £15,000

Ms Hughes gave a brief outline of the application stating this funding application is for the purchase of software to upgrade the existing Mammography equipment in YGC so that it is capable of performing 'Contrast Enhanced Digital Mammography (CEDM). The

<p>application is for £15,000 from the Cancer Charity. The cost of the software is £40,000. Treasure Chest is supporting £25,000.</p> <p>The whole group felt this was good use of their funds and all agreed to approve this application, as it is a direct benefit to the patients.</p> <p>Outcome – Approved pending approval from Chief Financial Officer and Medical Devices Group</p> <p>CFAG19/29.6 Replacement Bedside Tables - £18,810 CFAG19/29.7 Replacement Chairs - £18,891</p> <p>Ms Hughes joined these two applications together as they are both for Llandudno Hospital. The application is to purchase 75 tables and 75 chairs due to recent infection control issues have been identified and do not meet manual handling requirements.</p> <p>The application is to use the funds from the 'Friends of Llandudno Hospital' fund.</p> <p>Ms Roberts agreed that the funds were there to be used and was aware of the infection control issues.</p> <p>Ms Hughes reminded the group that there had been discussions regarding funding these type of items.</p> <p>Mr Morris asked would it be noted on the tables/chairs that they were purchased from charitable funds.</p> <p>Ms Thomson suggested that through social media and press released it would be noted that 'Friends of Llandudno Hospital' funded these items.</p>	<p>PC</p> <p>EJ/KT</p>
<p>Outcome – Approved</p> <p>CFAG19/29.8 Ophthalmology Equipment/Consumables - £20,255</p> <p>Ms Hughes gave a brief outline of the application, which is for Ophthalmology equipment/consumables due to increase in clinical staff this has resulted in insufficient volume of essential consumables (lenses). Current stock is outdated and of poor quality.</p> <p>Ms Roberts informed the group that there is now a large volume of patients suffering with glaucoma, the equipment requested within the application will directly support these patients.</p> <p>Ms Hughes stated that they did not have any funds to purchase this equipment.</p> <p>Ms Joannou stated that this would improve flow of patients, but said that it should be funded through core funds.</p> <p>Ms Thomson restructure of team to capture funds like this making sure patients are made aware of what they are funding. Able to promote on the ward/social media.</p>	<p>EJ/KT</p>

<p>Outcome – Approved pending approval from Hospital Director</p> <p>CFAG19/29.9 Faecal Incontinence - £24,000</p> <p>Ms Hughes gave a brief outline of the application, which was on the agenda of the previous meeting. The application at that time was not detailed or informative enough for the group. This second application is for £22, 000 from general funds and £2,000 from GS/Colorectal (West) fund.</p> <p>Ms Hughes informed the group that this still was not a very clear application; there should be more detail due to the cost.</p> <p>The group felt they would be more informed if Mr Williams were invited along to the next meeting to discuss that application with further information.</p> <p>Outcome – Decision deferred to the November Charitable Funds Advisory Group</p>	<p>PC</p> <p>PC</p>
<p>APPLICATIONS FOR COMMENT</p> <p>CFAG19/29.10 2 Year Project – Assessing the Mental Health of Patients on the Alaw Cancer Care Unit - £52,038</p> <p>Ms Roberts declared a conflict of interested and was not able to pass comment on this application.</p> <p>Ms Thomson presented the application to the group. Concerns have been raised by medical/nursing staff and patients regarding the lack of psychological support for cancer patients in the West area. Ms Manon Williams, Fund Advisor and Ms Rebecca Williams, Voluntary Fund Advisor Tim Irfon and Mental Health Practitioner have spoken to patients extensively in the ward and families affected by Cancer. They all agreed that there was insufficient mental health support.</p> <p>Ms Hughes queried the exit strategy and who would be funding in the future.</p> <p>Ms Thomson informed the group that part of the role would be to create an app for patients and families, which would be available after the 2 years. The post holder will also provide mental health training to Cancer services staff, so that they can continue to support patients. In addition, there is core staff in Central/East offering mental health support looked at by cancer services. However, the hope is that this pilot project will be successful and become embedded in core services.</p> <p>Mr Atenstaedt was supportive of this as he has been involved in a review of suicide in North Wales and a cancer diagnosis is a significant factor.</p> <p>Ms Hoyle suggested that this should be a permanent post across the 3 sites.</p> <p>Mr Atenstaedt enquired if the app was for Mental Health only. Ms Thomson replied that</p>	

<p>is was specifically for cancer but the model could be used and adapted for other services in the future.</p> <p>The group were supportive of this application as the services are required.</p> <p>Outcome – Recommended approval by the Charitable Funds Committee pending approval from Chief Financial Officer</p>	PC
<p>CFAG19/30 FUND BALANCES AS AT 31st JULY 2019</p> <p>Ms R Hughes presented the fund balances for information.</p>	
<p>CFAG19/31 Staff Experience Grant</p> <p>Ms Thomson informed the group that Awyr Las has launched a new Staff Experience small grant scheme; open from 10th September until 29th October 2019.</p> <p>Staff across BCUHB can submit an application for up to £2,000 to develop a project that has the primary aim of improvement to Staff Experience in ways that will have a direct positive impact on Patient Experience.</p> <p>Details on how this would look are available from: https://www.cognitoforms.com/AwyrLas/StaffExperienceGrants (This is an unformatted and not bilingual – this will be translated and branded once approval from the Advisory Group is granted).</p> <p>Ms Hughes clarified to the group that this will be run by Awyr Las and not by Workforce who submitted a similar application in the previous meeting. Ms Thomson and Ms Hughes would look to long list and then applications would be passed to a subset of the group for decision.</p> <p>Prof Atenstaedt suggested altering point 1 of the 'What will the Staff Experience Grant Fund' from</p> <ol style="list-style-type: none"> 1. Wellbeing, Exercise and Health; to 2. Wellbeing, Physical Activity and Health <p>Ms Joannou enquired was this available to GP's, Dentists etc? Ms Hughes confirmed that applications from GP's in North Wales must be led by Area teams. They can apply but need to be led by a BCUHB member of staff.</p> <p>Mr Morris asked was this open to all staff? Ms Thomson replied that it was available to all levels and departments within BCUHB.</p> <p>Ms Thomson informed the group that it was capped and open for 8 weeks then another request will be submitted in the New Year, this will be on a grant by grant basis.</p>	
<p>CFAG19/32 Fundraising Priorities Update 2019.21</p> <p>Ms Thomson informed the group that the Awyr Las Support Team are currently</p>	

<p>developing a new online process to streamline all fundraising and grant requests and better promote priority projects which require support. The new processes and systems are being introduced in phases and will be fully operational by December 2019.</p> <p>As an interim measure to help promote projects which require charitable funding, a new area has been created on the Awyr Las website for current greatest needs under £5,000. Projects identified through 'Hearts and Minds' grants scheme, 'I Can' grant scheme and the Staff Experience grants scheme will be added here, as will general grant requests under £5k received which can't be funded from existing funds.</p> <p>This is in the early stage of plans and what the support team are focusing on i.e. business cases, feasibility etc.</p>	
<p>CFAG19/33 Any Other Business</p> <p>There was no other business. The group are still seeking new members to join.</p>	
<p>CFAG19/34 DATE OF NEXT MEETING</p> <p>Next meeting to take place on: Thursday, 21st November 2019 at 10.00 a.m. <i>Finance Meeting Room, Ysbyty Gwynedd</i> <i>Meeting Room 3, Carlton Court</i> <i>Chairman's Office, Wrexham Maelor</i></p>	

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Charitable Funds Committee

 4th October 2019

CF19/39


GIG
CYMRU
NHS
WALES

 Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

To improve health and provide excellent care

Report Title:	Charity Risk Register
Report Author:	Rebecca Hughes, Charity Accountant
Responsible Director:	Sue Hill, Executive Director of Finance
Public or In Committee	Public
Purpose of Report:	<p>As agreed at the Charitable Funds Committee meeting in March 2019, the full charity risk register will be brought to the Committee on a yearly basis. This will be added to the Committee Cycle of Business for review every March. In intervening Committee meetings only red rated risks will be brought to the Committee for review.</p> <p>At October 2019 there are no red rated risks for the charity and so no risks are included in this paper.</p>
Approval / Scrutiny Route Prior to Presentation:	The Report is brought for review by the Charitable Funds Committee.
Governance issues / risks:	The Charity's risks have all been entered onto the Health Board's Datix system, allowing us to automate the way that the risk register is produced to mirror that of the Health Board. This will also ensure that they are reported consistently and concisely, with a robust method of rating.
Financial Implications:	There are no financial implications to the Health Board of this paper.
Recommendation:	The Committee is asked to review the report.

Health Board's Well-being Objectives <i>(indicate how this paper proposes alignment with the Health Board's Well Being objectives. Tick all that apply and expand within main report)</i>	√	WFGA Sustainable Development Principle <i>(Indicate how the paper/proposal has embedded and prioritised the sustainable development principle in its development. Describe how within the main body of the report or if not indicate the reasons for this.)</i>	√
1.To improve physical, emotional and mental health and well-being for all	√	1.Balancing short term need with long term planning for the future	√

2.To target our resources to those with the greatest needs and reduce inequalities	√	2.Working together with other partners to deliver objectives	√
3.To support children to have the best start in life	√	3. those with an interest and seeking their views	√
4.To work in partnership to support people – individuals, families, carers, communities - to achieve their own well-being	√	4.Putting resources into preventing problems occurring or getting worse	√
5.To improve the safety and quality of all services	√	5.Considering impact on all well-being goals together and on other bodies	√
6.To respect people and their dignity	√		
7.To listen to people and learn from their experiences	√		
Special Measures Improvement Framework Theme/Expectation addressed by this paper			
<i>Not applicable</i>			
Equality Impact Assessment			
<i>Not applicable – the report does not impact directly on staff or patients</i>			

*Disclosure:**Betsi Cadwaladr University Health Board is the operational name of Betsi Cadwaladr University Local Health Board*

**Charitable Funds
Committee**

 4th October 2019

CF19/40


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 Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

To improve health and provide excellent care

Report Title:	Rothschild Portfolio Report: 30 th June 2019
Report Author:	Ms Annick Crisford, Rothschild
Responsible Director:	Sue Hill, Executive Director of Finance
Public or In Committee	Public
Purpose of Report:	Attached is the Investments Report for the Charity as at the 30 th June 2019.
Approval / Scrutiny Route Prior to Presentation:	The Report is brought for noting by the Charitable Funds Committee.
Governance issues / risks:	There are no governance issues for the Health Board of this paper.
Financial Implications:	<p>Key points to note are:</p> <ol style="list-style-type: none"> 1. Investments are reported in calendar years, so Quarter 2 relates to April, May and June. 2. Market moves were shaped by two mounting concerns in the quarter: a revival of trade tensions and the impact this could have on the global economy, which appears to be slowing. Yet despite brief equity market volatility mid-quarter, the BCUHB portfolio appreciated by +3.3% over Q2 lifting year-to-date returns to +9.65%. 3. Overall, the portfolio maintains a solid allocation of 68.8% to 'return' assets. We continue to expect these assets to drive long-term performance, but, they are also likely to be volatile over shorter periods. The portfolio remains focused on the selection of high quality businesses that are trading at valuations which we believe should enable attractive forward looking returns over the long term. The 'return' assets continued to perform strongly in Q2 2019. 4. The portfolio continues to maintain a notable allocation of 31.2% to 'diversifying' assets -these assets are included to provide real diversification and protection in difficult market conditions. By way of reminder, the diversifying assets in the portfolio are primarily held to protect against a pronounced and protracted market sell-off.
Recommendation:	The Committee is asked to note the report.

Health Board's Well-being Objectives <i>(indicate how this paper proposes alignment with the Health Board's Well Being objectives. Tick all that apply and expand within main report)</i>	√	WFGA Sustainable Development Principle <i>(Indicate how the paper/proposal has embedded and prioritised the sustainable development principle in its development. Describe how within the main body of the report or if not indicate the reasons for this.)</i>	√
1.To improve physical, emotional and mental health and well-being for all	√	1.Balancing short term need with long term planning for the future	√
2.To target our resources to those with the greatest needs and reduce inequalities	√	2.Working together with other partners to deliver objectives	√
3.To support children to have the best start in life	√	3. those with an interest and seeking their views	√
4.To work in partnership to support people – individuals, families, carers, communities - to achieve their own well-being	√	4.Putting resources into preventing problems occurring or getting worse	√
5.To improve the safety and quality of all services	√	5.Considering impact on all well-being goals together and on other bodies	√
6.To respect people and their dignity	√		
7.To listen to people and learn from their experiences	√		
Special Measures Improvement Framework Theme/Expectation addressed by this paper <i>Not applicable</i>			
Equality Impact Assessment <i>Not applicable – the report does not impact directly on staff or patients</i>			

Disclosure:

Betsi Cadwaladr University Health Board is the operational name of Betsi Cadwaladr University Local Health Board



BCUHB

Q2 2019 Portfolio Report

June 2019

1

Executive summary – Investment report to 30th June 2019



Current portfolio positioning

An overview for Q2 2019

- The key objective of the portfolio is to preserve and grow its value in 'real' terms, in order to continue to support charitable distributions over the long term.
- A **'Balanced'** portfolio is intended to achieve steady growth over the long term through a diversified approach to investment. Attention is paid to avoiding the worst of the downside and capturing some but not all of the upside of financial market returns. Capital preservation in real terms over a long time horizon is the primary objective, and some volatility is acceptable in order to achieve this.
- Market moves were shaped by two mounting concerns in the quarter: a revival of trade tensions and the impact this could have on the global economy, which appears to be slowing. Yet despite brief equity market volatility mid-quarter, the anticipation of more lenient monetary policy from the US Federal Reserve (Fed) prevented a more significant correction. The BCUHB portfolio appreciated by +3.3% over Q2 lifting year-to-date returns to +9.65%.
- Global growth was remarkably buoyant in the first quarter. The OECD reported that advanced economies expanded at an above-trend +2.5% (quarter-on-quarter, seasonally adjusted annual rate), signalling the end of the soft patch at the end of the year. However, forward-looking indicators suggest a modest slowing. Increasingly volatile data from China – notably industrial output – highlight the visible fallout from trade tensions, with manufacturing sectors firmly under pressure. But manufacturing remains weak globally, with the latest business surveys and industrial production pointing to renewed weakness in Germany in particular, and now even in the US and the UK. Even the less cyclical, service-side of the economy, which accounts for three-quarters of US economic output, is pointing to a modest slowdown. Consumer confidence remains upbeat, and retail spending in the UK and US appears healthy, underpinned by the strongest labour market and the lowest unemployment rates in roughly half a century. Nonetheless, it remains prudent to expect the pace of growth to slow as we enter the second half of the year.
- On the surface the outlook for risk assets, such as equities, appears to warrant a little more caution. This cycle has finally eclipsed the decade-long upswing of the 1990s to become the longest US economic expansion ever. Echoes of the late 1990s – the prospect of Fed 'insurance cuts' and loss-making technology companies floating their businesses – make for unsettling comparisons. However, while equity market headroom may be lower than it has been for much of the past 10 years, we still believe the global economy will continue to move forwards, perhaps more slowly, but not yet on a scale – in our view – to significantly damage corporate profitability.
- That said – and as we have said before - when we consider the companies that we invest in on behalf of the BCUHB and we estimate the plausible long term projected returns we should expect to receive as investors, these remain comfortably above prospective inflation rates. We also consider that whilst the global economy may be slowing, it is not collapsing, which suggests we should not yet be poised for a more dramatic reversal in profits.
- Overall, the portfolio maintains a solid allocation of 68.8% to **'return'** assets. We continue to expect these assets to drive long-term performance, but, they are also likely to be volatile over shorter periods. The portfolio remains focused on the selection of high quality businesses that are trading at valuations which we believe should enable attractive forward looking returns over the long term. The 'return' assets continued to perform strongly in Q2 2019.
- The portfolio continues to maintain a notable allocation of 31.2% to **'diversifying'** assets - these assets are included to provide real diversification and protection in difficult market conditions. By way of reminder, the diversifying assets in the portfolio are primarily held to protect against a pronounced and protracted market sell-off.



Portfolio update – Q2 2019

Below we have provided an overview of the portfolio's performance and changes made within the portfolio over the course of the second quarter of 2019

Portfolio changes – Q2 2019

New positions

S&P 500 Put 2500 - Jun 2020	Diversifier	Mar
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Increases

Wells Fargo	Return - Special Sit	May
Ryanair	Return - Special Sit	Jun

Sales

Daily Mail & General Trust	Return - Special Sit	Apr
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Decreases

Lansdowne Developed Markets	Return - Core	Jun
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Portfolio activity – Q2 2019

- There were fewer changes to the portfolio this quarter following a busier end to 2018 and start to 2019.
- Increased two existing positions:** The monitoring of our portfolio is an ongoing process which includes formally reviewing the operating performance of all the companies in the portfolio and considering if position sizes remain optimised. Following such a review, we decided to increase our position in Wells Fargo as we believe our return expectations warranted a larger position size. At the end of the quarter Wells Fargo passed the regulatory stress test and their plan to increase their dividend and return capital to shareholders through repurchases of stock was approved.

We also increased our position in Ryanair, following a fall in the share price over the quarter, with lower fares and higher fuel and staff costs weighing on financial results. Airlines are a cyclical industry and shorter-term performance can be driven by factors beyond the company's control. However; the company's leading position as the lowest cost, highest volume carrier means we expect them to be net beneficiaries as weaker competitors falter when faced with a challenging environment.

- New positions:** Towards the end of the quarter we added a new put option warrant on the S&P 500 index. One of the existing puts was coming up to expiry and protection against a significant decline in this major index could be purchased at a reasonable cost. At the time of purchase this left us with a range of put options in the portfolio, with strikes 'laddered' between 15% and 25% out of the money, with protection spread across US and European equity indices.
- Sales:** Early in the quarter we completed the sale of our position in DMGT (previously Daily Mail & General Trust). DMGT is a holding company for a group of business-to-business and media companies. This had been held in the portfolio for a number of years, but we had been considering exiting due to our higher return expectations for other Return assets. The recent corporate activity, returning the stake in Euromoney and £200m in cash to shareholders, gave us an opportunity to do so.

Performance contributors – Q2 2019

- Over Q2 2019, the BCUHB portfolio returned +3.3%. Performance this quarter was driven by our Return assets, with positive performance from most positions. The most notable contributions came from our companies, with a few positions making double digit percentage gains. These included Cable One (+19.5%) and Charter (+13.9%) where internet subscriber numbers, which are central to our investment case, continued to grow. American Express (+13.3%) and Mastercard (+12.5%) both reported higher revenues from increased transaction volumes.
- Returns from our Diversifying assets were mixed, as we would anticipate given the market environment. With stock markets delivering decent returns we are not surprised to see the assets we hold to protect the portfolio against meaningful declines in equity markets producing negative returns. This was offset by the gains made by the trend following funds, ACL and CFM, which capitalised on trends across equity, fixed income and commodity markets.



Our investment view

Slower growth, revived trade tension. But slowdown remains moderate, and policy is lenient

POLITICS	TRUMP		President Trump's strengthened position – in the face of a fragmenting Democrat challenge and an inconclusive Mueller report – was quickly reflected in a more aggressive stance on trade – and now in a second “truce”. Whether this episode will do more damage than the earlier tussle remains to be seen. We doubt he has intimidated the Fed – its dovishness is genuine...
	GEOPOLITICS		Trade tensions, European populism, the stand-off with Iran, and the sad situation in Venezuela, all remain worrying. But the latest truce suggests that an eventual positive outcome with China – fully aware that it, not the US, is the most protected big economy – is indeed still feasible. And the Greek election represents another rebuff to the populist cause
	EUROPE		The UK looks ever more politically dysfunction. The new PM will not be confirmed until July 22; meanwhile, a no-deal exit on October 31 st looks increasingly possible. Meanwhile, Macron may not be getting his way in the French labour market, but he's won the ECB presidency, keeping the integrationist show on the road. Italy remains a sideshow
ECONOMY	CHINA		Data are softer, but still consistent with a glacial slowdown – subject to (partially postponed) tariff risks. The government has been using its monetary and fiscal flexibility, and has plenty still in reserve. China's aggregate debt is a domestic matter: the government's healthy balance sheet is more than capable of supporting the corporate sector's more fragile one
	INTEREST RATES		FOMC comments have further strengthened markets' belief that US rates will fall, and we would not now bet against lower rates during H2. The ECB has effectively shelved plans to raise rates; the BoJ also plans to remain accommodative into 2020; and the BoE is worrying about Brexit again. Inflation generally remains subdued, however.
	BUSINESS CYCLE		Data have softened further but economies are slowing, not in freefall. An inventory cycle is at work in the US, where the expansion this month likely becomes the longest ever. Risks currently are most focused on Germany and the UK. But there seem to be few macro excesses requiring correction: in particular, US consumers still have plenty of fuel in the tank
MARKETS	VALUATIONS		After rallying strongly in June, stocks' headroom has likely fallen (again). Nonetheless, they still seem the most likely asset to deliver long-term inflation-beating returns. Corporate profits remain healthy – so far. Bond yields have fallen even further below likely inflation rates (and in many cases in Europe, back into nominally negative – and unprecedented – territory)
	MARKET DYNAMICS		Volatility has faded once again. Until the economic outlook worsens more materially, and/or monetary policy becomes less friendly, we suspect implied volatility in particular may continue to trend at relatively low levels by historic standards

Source: Rothschild & Co

KEY

	OPTIMISM		Changing view: OPTIMISM ► NEUTRAL
	NEUTRAL VIEW		Changing view: NEUTRAL ► OPTIMISM
	CAUTION		

2

Investment approach for the BCUHB portfolio



Our understanding

We have summarised our understanding of the investment approach for the BCUHB charitable portfolio, based on our meetings and discussion

Background	<ul style="list-style-type: none"> • Charity details: The Betsi Cadwaladr University Health Board charity is a UK registered NHS charity covering the whole of North Wales. The overall objective of the charity is to provide additional support for the benefit of staff and patients within the Betsi Cadwaladr University Health Board, in accordance with the wishes of donors. • Source of wealth: Donations and fundraising, legacies and investment income. • Attitude to the charity assets: The Trustees aim to maintain and, if possible enhance the real value of the invested funds. Diversification is important, as is the minimisation of losses.
Income and Tax	<ul style="list-style-type: none"> • Income: There is no specific income requirement from the investment portfolio, although this will depend on the generation of new funds and expenditure commitments. • Tax: As a registered charity, the fund is not subject to income tax or CGT. VAT payable on investment management fees can be reclaimed back by the charity.
Return objective and risk	<ul style="list-style-type: none"> • Return: The Trustees wish to preserve and grow the real value (after inflation) of the portfolio and to generate a balance of capital growth and income. • Risk: The Trustees have agreed to adopt a 'balanced' portfolio strategy following the meeting in July 2015. • Time Horizon: Long-term time horizon (10 years+). • Ongoing: We recommend reviewing your return objectives and risk tolerance on a regular basis and confirm that nothing is 'set in stone'.
Currency	The reference or base currency for the portfolio is Pounds Sterling.
Comparators	The portfolio is reviewed against a range of indices.
Constraints	No direct investment is permitted into areas which may be in conflict with the principles of the BCUHB. Specifically this excludes direct investment into the following areas: Armament and weapon production, child labour, tobacco and alcohol, pornography and prostitution and companies known to cause substantial environmental damage.
Reporting	Contract notes, audited quarterly valuations, fee invoices and an annual tax pack are currently sent to Rebecca Hughes at Wrexham Maelor hospital. Monthly and quarterly valuations are also uploaded to eAccess for Rebecca Hughes. We are happy to attend regular update meetings with the investment committee and provide ad-hoc investment reports.

A **"Balanced"** portfolio is intended to achieve steady growth over the long term through a diversified approach to investment. Attention is paid to avoiding the worst of the downside and capturing some but not all of the upside of financial market returns. Capital preservation in real terms over a long time horizon is the primary objective, and some volatility is acceptable in order to achieve this.

3

The portfolio



Performance

The table below shows the performance and value of the portfolio compared to its return objective for a 'Balanced' investment strategy

Performance (net of all fees) to 30 th June 2019			
Period	BCUHB	Inflation*	Return objective (Inflation + 3%)
Cumulative since inception (6th September 2011)	+58.52%	+15.04%	+44.42%
Annualised since inception (6th September 2011)	+6.07%	+1.81%	+4.81%
2019 (to 30.06.19)	+9.65%	+0.75%	+2.23%
2018	-3.39%	+2.10%	+5.10%
2017	+6.89%	+2.94%	+5.94%
2016	+9.75%	+1.60%	+4.60%
2015	+0.94%	+0.20%	+3.20%
2014	+6.58%	+0.50%	+3.50%
2013	+8.23%	+2.05%	+5.05%
2012	+5.46%	+2.63%	+5.63%
2011 (06.09.11)	+3.88%	+1.39%	+2.34%
BCUHB portfolio value			£8,226,540
Estimated annual income & gross yield		£67,148	0.82%

'Balanced'
investment strategy

'Cautious'
investment strategy

The portfolio has generated an annualised return of 6.1% since inception, which equates to a return of 4.3% above inflation per annum.

Source: Rothschild & Co, Bloomberg

Notes

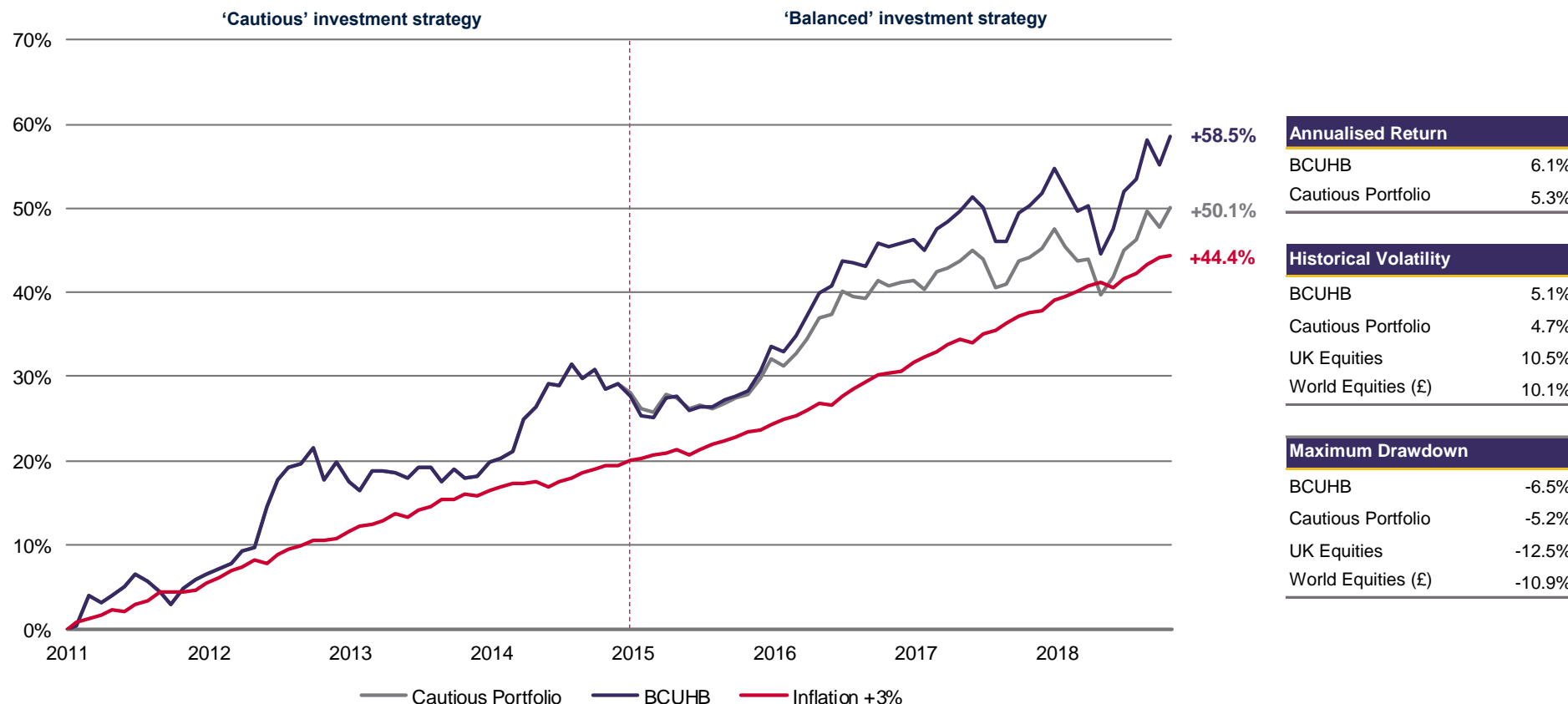
* Inflation data is calculated from 31st August 2011 to 30th June 2019.

1. Past performance is not indicative of future performance and the value of investments and income from them can fall as well as rise.
2. Returns may increase or decrease as a result of currency fluctuations.
3. Portfolio performance is shown after all fees. Performance shown is total return, combining income and capital growth.
4. Index used: Inflation (UK Consumer Price Index EU Harmonised YoY NSA).
5. All performance shown is for the BCUHB Main Portfolio and excludes the BCUHB re Ron and Margaret Smith portfolio which was closed in April 2016.
6. The investment strategy for the BCUHB portfolio changed in July 2015 from a "cautious" approach to a "balanced" approach.



Portfolio performance

Performance is not linear. The portfolio has achieved a return in excess of the return objective since inception to 30th June 2019



Source: Rothschild & Co, Bloomberg

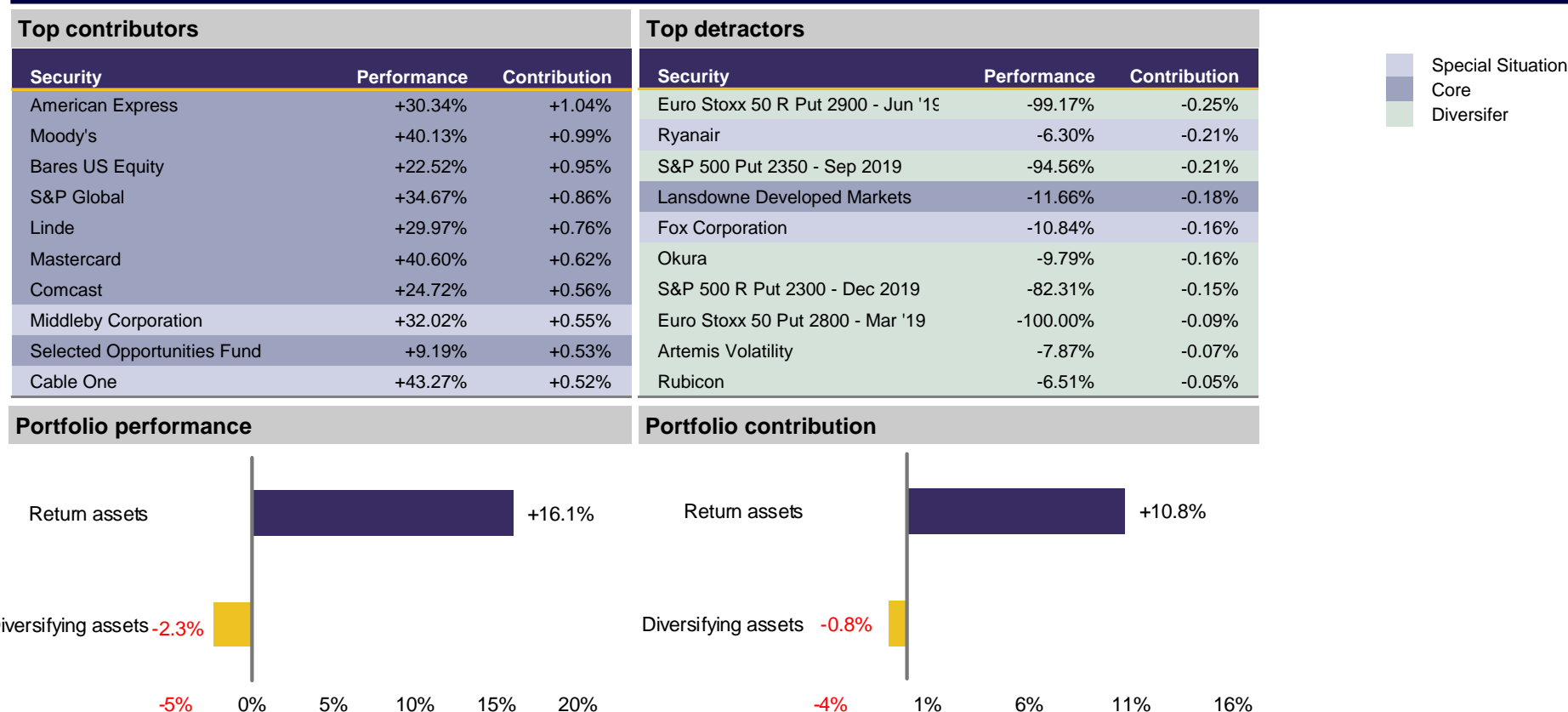
Notes

1. Inflation data is calculated from 31st August 2011 to 30th June 2019.
2. Past performance is not indicative of future performance and the value of investments and income from them can fall as well as rise. Returns may increase or decrease as a result of currency fluctuations. Portfolio performance is shown after all fees. Performance shown is total return, combining income and capital growth.
3. Volatility is calculated as the annualised standard deviation of monthly returns. Maximum Drawdown is a measure of risk and shows, in percentage terms, the worst peak the trough decline over the period.
4. Indices used are: Inflation (UK Consumer Price Index EU Harmonised YoY NSA). UK Equities (MSCI UK All Caps Net Total Return). World Equities (MSCI World AC Net Total Return in sterling terms).



Performance contribution

The tables below show the top contributors and detractors in the portfolio from 1st January 2019 to 30th June 2019



Source: Rothschild & Co

Notes

1. Performance shown is total return i.e. combining income and capital growth and in the security's local currency.
2. Past performance is not a reliable indicator of future results. The value of investments and income from them can fall as well as rise.
3. The above holdings illustrate investments made within the portfolio at the discretion of Rothschild & Co Wealth Management (UK) Limited. They are not shown as a solicitation, recommendation or promotion of any security or fund on a standalone basis. Holdings are subject to change without notice.
4. Put options behave like insurance; we pay a premium for them and hope that they expire worthless, losing only the premium (a very small deduction). They will make money if equity markets fall, thereby providing portfolio protection.
5. FX hedges (which contributed negatively to year-to-date returns to the end of Q2 2019 by -0.3%) are not included in the calculation of diversifying asset performance and contribution in the above bar charts.

Portfolio

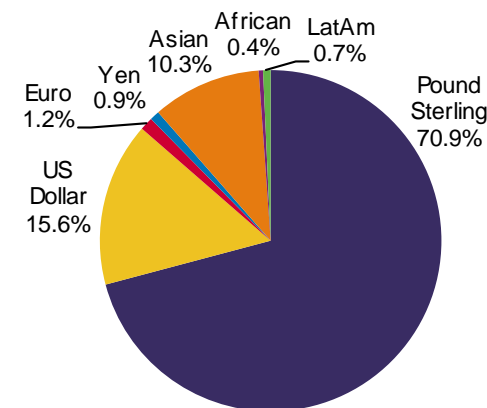


The table below shows the portfolio split between Return and Diversifying assets as at 30th June 2019

RETURN ASSETS (68.8%)		DIVERSIFYING ASSETS (31.2%)	
Equities - Companies	20.6%	Equities - Companies	20.4%
Admiral	3.6%	American Express	4.0%
Cable One	1.6%	Comcast	2.5%
Charter Communications	1.3%	Deere	2.9%
Fox Corporation	1.9%	Linde	3.0%
Liberty Broadband	0.6%	Mastercard	1.9%
Lloyds	3.2%	Moody's	3.1%
Middleby Corporation	2.1%	S&P Global	3.0%
Ryanair	3.1%		
Wells Fargo	3.3%		
Equities - Funds	7.2%	Equities - Funds	20.6%
Albizia ASEAN*	1.8%	Bares US Equity	4.6%
Cederberg Greater China Equity**	2.7%	Berkshire Hathaway	4.4%
Ward Ferry Asian Smaller Cos*	2.6%	IVI European	3.3%
		Lansdowne Developed Markets	1.2%
		Phoenix UK	3.8%
		TCI	3.3%
		Alternative Strategies	5.8%
		Abbey Capital	1.8%
		Artemis Volatility	0.8%
		CFM IS Trends	1.3%
		CFM Trends	1.8%
		Portfolio Protection	1.5%
		Okura	1.3%
		Euro Stoxx 50 R Put 2850 - Mar 2020	0.1%
		S&P 500 Put 2350 - Sep 2019	<0.1%
		S&P 500 R Put 2300 - Dec 2019	<0.1%
		S&P 500 Put 2500 - Jun 2020	0.2%
		Fixed Income - Investment Grade	22.7%
		RMW Investment Grade Bond Fund	22.7%
		Cash	1.2%
		Cash	0.4%
		Cash / T Bills (SOF)*	0.7%
		Currency Hedges	
		GBP FX Hedge	19.9%
		EUR FX Hedge	-4.0%
		USD FX Hedge	-15.9%

Special Situation
Core
Diversifier

Currency exposure



Source: Rothschild & Co

Notes

* Position held via the Selected Opportunities Fund (SOF). This is a Rothschild vehicle that allows us to allocate to talented managers with limited capacity or liquidity. We do not charge an investment management fee within the SOF and RWM Investment Grade Bond Fund.

** Position held via the SOF and on a standalone basis.

- Percentages may not sum to 100% due to rounding. The above shows a summary composition of the portfolio. For a more detailed composition, please rely on official publications. The above holdings illustrate investments made within the portfolio at the discretion of Rothschild Wealth Management UK Limited. They are not shown as a solicitation, recommendation or promotion of any security or fund on a standalone basis. Holdings are subject to change without notice.
- We show the currency exposures of the portfolio on a "see-through" basis, looking into the currency exposures of underlying holdings. We do this to provide a more accurate view of actual economic currency exposures rather than use the base currencies of holdings (such as a security listed in USD or a Fund in GBP) which do not provide that currency exposure insight. The information is based on the most up to date information from the underlying security and fund providers.

4

Important information

Important information

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Charitable Funds Committee

 4th October 2019

CF19/41


**GIG
CYMRU
NHS
WALES**

 Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

To improve health and provide excellent care

Report Title:	Request for Expenditure Approvals
Report Author:	Rebecca Hughes, Charity Accountant
Responsible Director:	Sue Hill, Executive Director of Finance
Public or In Committee	Public
Purpose of Report:	The funding application requests received for this Committee are itemised in the following paper.
Approval / Scrutiny Route Prior to Presentation:	The Report is brought for approval by the Charitable Funds Committee.
Governance issues / risks:	The applications have all been to the Charitable Funds Advisory Group for consideration and comments are included at the end of each application.
Financial Implications:	The summary report details the individual funding applications, the amounts requested and the funding source. Each request is supported by an individual application which provides a more detailed explanation and justification. These are attached as appendices to this report.
Recommendation:	The Committee is asked to review each application for approval or rejection.

Health Board's Well-being Objectives <i>(indicate how this paper proposes alignment with the Health Board's Well Being objectives. Tick all that apply and expand within main report)</i>	√	WFGA Sustainable Development Principle <i>(Indicate how the paper/proposal has embedded and prioritised the sustainable development principle in its development. Describe how within the main body of the report or if not indicate the reasons for this.)</i>	√
1.To improve physical, emotional and mental health and well-being for all	√	1.Balancing short term need with long term planning for the future	√
2.To target our resources to those with the greatest needs and reduce inequalities	√	2.Working together with other partners to deliver objectives	√
3.To support children to have the best start in life	√	3. those with an interest and seeking their views	√

4.To work in partnership to support people – individuals, families, carers, communities - to achieve their own well-being	√	4.Putting resources into preventing problems occurring or getting worse	√
5.To improve the safety and quality of all services	√	5.Considering impact on all well-being goals together and on other bodies	√
6.To respect people and their dignity	√		
7.To listen to people and learn from their experiences	√		
Special Measures Improvement Framework Theme/Expectation addressed by this paper			
<i>Not applicable</i>			
Equality Impact Assessment			
<i>Not applicable – the report does not impact directly on staff or patients</i>			

Disclosure:

Betsi Cadwaladr University Health Board is the operational name of Betsi Cadwaladr University Local Health Board

Request for Expenditure Approvals

1.0 Introduction

The following summarises the funding application requests submitted for consideration by the Committee.

2.0 Applications

Item	Title of Funding Application	Amount of Application £	Funding Source	Service
.1	Applications Recommended for Approval by the Charitable Funds Advisory Group	155,675	See attached	See attached
.2	Minor Works Scheme at Ysbyty Alltwen	29,700	Fund 9B10 - Madog Community & Hospital Fund	Ysbyty Alltwen, West Area
.3	Olympus Stack and Diathermy Unit for Urology Diagnostic Unit at YGC	34,881	Fund 8N02 - Diagnostic & Treatment Facility, Urology Fund	Urology, YGC
.4	Assessing the Mental Health of Patients on the Alaw Cancer Care Unit: 2 Year Project	52,038	Fund 9Q18 - #TeamIrfon	Cancer Services, Ysbyty Gwynedd

Total £272,294

The above applications have all been reviewed by the Charitable Funds Advisory Group and a summary of the comments from the Group are noted at the end of the individual applications. The total amount requested from General Funds is £5,995.

4.0 Recommendation

The Committee is asked to review each application for approval or rejection.

Applications Submitted to Charitable Funds Advisory Group

1. Applications Recommended for Approval

Item	Title of Funding Application	Amount of Application £	Funding Source	Service	Comments of Advisory Group
.1	Bladder Scanner – Tegid Ward	6,300	Fund 9N16 - Urology (West)	Tegid Ward, Ysbyty Gwynedd	The group felt that ideally this should come from core budget, but as they have fundraised specifically for this item and it provides additionality, then it should be approved.
.2	Bladder Scanner - Conwy Ward	6,825	Fund 9B03 - Surgical Admission Unit, YG	Conwy Ward, Ysbyty Gwynedd	The group felt that ideally this should come from core budget, but as they have fundraised specifically for this item and it provides additionality, then it should be approved.
.3	MSc Biomedical Science 2 Year Part-time Course	7,500	Fund 9J06 - Microbiology Research, YG	Microbiology, Ysbyty Gwynedd	Application to fund a Biomedical Scientist to undertake further education and research that will ultimately benefit the department and help provide a staffing continuity plan.
.4	Reminiscence Interactive Therapy/Activities (RITA) System	5,995	General Funds	Wards, Ysbyty Gwynedd	This system helps to communicate with, involve and interest patients with dementia. The charity has purchased similar items for other areas of the Health Board. There is a lot of evidence demonstrating the benefits and an increase in patient happiness. The group were happy to fund one system from General Funds and one would have to be fundraised for.
.5	Patient Journey App	13,400	Fund 9N17 - Trauma & Orthopaedic, YG	Orthopaedics, Ysbyty Gwynedd	Will help to provide information to patients having hip and knee arthroplasty at Ysbyty Gwynedd. A very innovative idea. May be the way forward and if successful could be rolled out to the other sites.

Item	Title of Funding Application	Amount of Application £	Funding Source	Service	Comments of Advisory Group
.6	Staff Experience Fund Application	24,000	Fund 8T48 - Staff Development Fund	Workforce & Organisational Development	The application was originally for £154,893 to offer grants to develop and build on staff engagement. The group did not feel that the application provided sufficient detail as to how the funds would be used, particularly given the large amount requested. It was suggested that an alternative option would be for the charity team to run the scheme in the same way as 'Hearts & Minds'. The group agreed that this should be done as an initial trial and using a maximum of £24,000 funding.
.7	Reminiscence Interactive Therapy/Activities (RITA) System	5,995	Fund 8T35 - Older People Fund - Glaslyn Ward	Glaslyn Ward, Ysbyty Gwynedd	This system helps to communicate with, involve and interest patients with dementia. The charity has purchased similar items for other areas of the Health Board. There is a lot of evidence demonstrating the benefits and an increase in patient happiness.
.8	Replacement Flooring – Tywyn Hospital	6,209	Fund 9B34 - Tywyn General Purposes	Tywyn Hospital, West Area	This would cover main reception, one ward and one toilet. The group felt that they have enough money in their fund and this is one of their priorities.
.9	Bladder Scanner – Abergele District Nurses	6,405	Fund 8B08 - Abergele District Nursing	Community, Central Area	Abergele District Nurses have been fund raising for this bladder scanner and have received a grant from Groundwork via funding with Tesco. The only machine they have access to, is based in Llandudno, which affects patients and staff.
.10	Contrast Enhanced Digital Mammography Examination Software	15,000	Fund 8Q02 – Cancer, YGC	Cancer Services, Glan Clwyd Hospital	The purchase of software to upgrade the existing Mammography equipment in YGC so that it is capable of performing 'Contrast Enhanced Digital Mammography (CEDM)'. The application is for £15,000 from the Cancer Charity. The cost of the software is £40,000. Treasure Chest is supporting £25,000.

Item	Title of Funding Application	Amount of Application £	Funding Source	Service	Comments of Advisory Group
.11	Replacement Besides Tables – Llandudno Hospital	18,810	Fund 9T26 - Friends of Llandudno Hospital	Llandudno Hospital Wards, Central Area	Recent infection control issues have been identified and the current furniture does not meet manual handling requirements.
.12	Replacement Chairs – Llandudno Hospital	18,981	Fund 9T26 - Friends of Llandudno Hospital	Llandudno Hospital Wards, Central Area	Recent infection control issues have been identified and the current furniture does not meet manual handling requirements.
.13	Ophthalmology Equipment/Consumables	20,255	Fund 7N27 - Eye Unit, YMW	Ophthalmology Wrexham Maelor Hospital	Currently there is an insufficient volume of essential consumables (lenses). Current stock is also outdated and of poor quality. Will directly support patients.

TOTAL APPROVED £155,675

2. Applications Recommended to be Deferred

Item	Title of Funding Application	Amount of Application £	Funding Source	Service	Comments of Advisory Group
.1	E Bug Project	4,305	General Funds	Pharmacy, Central Area	The general feel from the group was for Pharmacy to start fundraising alongside the fundraising team and then possibly offer a contribution towards the amount they require once they have raised some funds.
.2	Capsule Endoscopy	9,659	General Funds	Endoscopy, Ysbyty Gwynedd & Llandudno Hospital	The application is to purchase the software package, diagnostics and scanner to enable capsule endoscopy to take place. The purchase of the capsules would be paid for by the department. The group agreed that the Health Board should be moving forward with technology and it is a good use of funds providing it is pan BCU. This query has been raised with the service.
.3	Faecal Incontinence	24,000	Fund 9N20– GS / Colorectal (West) & General Funds	Ysbyty Gwynedd	The application was not detailed or informative enough for the group. The applicants have been invited to the next meeting to discuss the application with further information.

3. Applications Recommended for Rejection

Item	Title of Funding Application	Amount of Application £	Funding Source	Division	Comments of Advisory Group
.1	Reminiscence Interactive Therapy/Activities (RITA) System	5,995	General Funds	Wards, Ysbyty Gwynedd	This system helps to communicate with, involve and interest patients with dementia. The charity has purchased similar items for other areas of the Health Board. There is a lot of evidence demonstrating the benefits and an increase in patient happiness. The group were happy to fund one system from General Funds and one would have to be fundraised for.

AWYR LAS
FUNDING APPLICATION FORM

<u>Title of Funding Application</u>	Minor Works Scheme – Ysbyty Alltwen	
<u>Name & Job Title of Lead Applicant</u>	Joyce Jones, Dwyfor Locality Administrator	
<u>Name & Job Title of Other Applicants</u>	Rhona Jones, Locality Matron Dwyfor	
<u>Maximum Expenditure Requested</u>	£29,700.00	
<u>Fund to be Sourced</u>	<u>Fund Number & Title</u>	Madog Community & Hospital Fund – Fund 9B10
	<u>Current Uncommitted Balance</u>	£ 26,802.27
<u>Introduction and Background</u>		
<ul style="list-style-type: none"> • Change of use of key areas at Alltwen. Since the site opened in 2009 the volume of services operational at the hospital has increased significantly, the original layout of areas do not lend themselves to today's method of working. Development of these spaces would provide additional clinic rooms in key places such as Minor Injuries Unit and Out Patient's dept., the areas could be shared use by multidisciplinary staff, the additional space would provide a comfortable environment to support integrated working. • Change of use at the OP dept – by re-design of area; 2 rooms into one will provide the Nursing staff with a dedicated clinical room to support Patients with one to one Health Promotion sessions and to undertake diagnostic tests. • Change of use, by re-design of area within the specified area at the Minor Injury Unit will provide a much needed additional clinical room which will 		

- enable integrated working between the ENPs/ANPs (Emergency and Advanced Nurse Practitioners) as well as the GP out of hours service
- The obs. Room Out Patient Dept. does not have hand washing facilities, Nursing staff are walking back and forth to the nearest point to wash their hands, area requires development to include hand washing facilities –(no other space available for BP/Urinalysis)

Key Service Benefits and Measures (to be reported back to the Committee 6 months after approval granted, unless otherwise stated in approval letter)

Service Benefit (insert further rows if needed, must include patient care and financial benefits)	Measure
Will enhance Patient Care by allowing care closer to home, reducing the need for travelling to the acute site.	Patient satisfaction questionnaire. Collation of data to measure outcome - ongoing
Reduction in Patient transport mileage / costs.	Appointments closer to home
Reduction in waiting times for Patient appointments in keeping RTT	Clinic lists shorter in the Community, less wait for appointments

Financial Management and Costing

Pay				
Job Title	Annual Salary (inc. on-costs)	Period in Months	Project Role	£
Non-pay				
Quote or Estimate?	Description			
Estimate	Change of use clinical area			14500
Estimate	Change of use WC area			8500
Estimate	Hand washing facilities clinical area			6700
Total Pay and Non-pay				£29,700

Ongoing Revenue Costs	
Ongoing revenue costs which will be charged to NHS budgets	£
Less: Savings generated by this application	£
Net ongoing revenue costs charged to NHS budgets	£
Risk Assessment	
Risk (insert further rows if needed)	Mitigation
Unable to provide conducive areas for integrated working	
Exit Strategy (Charitable Funds cannot fund ongoing commitments)	
N/A scheme one off	
Dementia Strategy (State how the scheme meets the Health Board's dementia strategy)	
N/A – meets the needs of all patients.	
Health Inequalities (State how the scheme addresses health inequalities)	
N/A – meets the needs of all patients.	
Equalities Impact	
Will any racial equality groups (racial, gender, disability, sexuality, age, language, religion/belief be differently affected by this scheme?	NO
If YES, then please submit a copy of the Equality Impact Questionnaire with this form.	

If NO, then state below what information/evidence the decision is based on.		
Modifications will be beneficial to all users including staff/patients and families.		
Approvals		
	Name & Date Approved	Comments
Fund Advisor	Louise Davies 11.07.19	
Capital Approval (Estates/IM&T/Medical Devices)	Capital Estates 24.07.19	
Chief Financial Officer	Viv Vandenblink 11.07.19	
Area/Hospital/Secondary Care/Mental Health/Executive Director	Ffion Johnstone 11.07.19	
Charitable Funds Advisory Group	CFAG 18.07.19	A reconfiguration of the space would provide additional clinic rooms in key places such as MIU and Outpatients departments. At present the corridors are very large and there could be better use of the space which would increase clinical capacity.

AWYR LAS
FUNDING APPLICATION FORM

<u>Title of Funding Application</u>	Olympus Stack and Diathermy Unit for Urology Diagnostic Unit at YGC	
<u>Name & Job Title of Lead Applicant</u>	Mr Kingsley Ekwueme, Urology Consultant and Clinical Lead	
<u>Name & Job Title of Other Applicants</u>	Jenny Pratt, Sister Bethan Davies Williams, Surgical Lead Manager	
<u>Maximum Expenditure Requested</u>	£ 34,880.64	
<u>Fund to be Sourced</u>	<u>Fund Number & Title</u>	Diagnostic and Treatment Facility – Urology Fund – Fund 8N02
	<u>Current Uncommitted Balance</u>	£ 56,194.54
<u>Introduction and Background</u> (concise, in bullet points)		
<ul style="list-style-type: none"> • Urology Diagnostic Unit (UDU) undertakes high volume diagnostic procedures for Urology in YGC including 5 procedure lists and 5 Rapid Access Cancer Clinics per week • Volume of work undertaken continues to rise and it's imperative that essential equipment is in good working order, up to date and easily accessible to meet needs of service users and providers 		

- Current stack system can only perform limited procedures (bladder washouts, JJ stents and flexible cystoscopy guided urethral catheter insertion) and is not capable of performing therapeutic treatments such as bladder biopsies and cystodiathermy.
- This provides compromised and limited vision of possible pathology in the bladder, resulting in patients being booked in for rigid cystoscopies and biopsies requiring general anaesthetic (GA).
- There is also a risk that that actual pathology within the bladder may be missed due to limited clarity.
- In cases where there is suspicion of a sinister lesion a photograph is taken so that the next procedure under GA can be planned appropriately. A high definition image will allow the surgeon to plan the list effectively as smaller lesions will require less time and larger lesions requiring more time. As it is now, photographs sometimes cannot be taken as the function is not always working and even when it does work, the pictures taken are of poor quality.
- Lesions that are suspicious, no matter how tiny, are booked for a GA cystoscopy and biopsy, cystodiathermy or transurethral resection of bladder tumour. The waiting times for a GA procedure are often many months and in fact, many breach the recommended times. This is not only unsafe for patients as smaller non-invasive lesions may progress to invasive lesions but these procedures are also added to the long waiting list of patients awaiting GA procedures and add to the anxiety of patients who may have a possible diagnosis of cancer. These problems could be avoided if therapeutic treatments such as biopsy or cystodiathermy can be done under LA in the UDU.
- The current waiting time for a flexible cystoscopy is 2 weeks and only a maximum of 8 procedures can be completed in one half day list. While the reasons for these are multifactorial, a large contributing factor is the time taken to complete a cystoscopy. With a successful bid, UDU could increase its current endoscopy capacity, offering more procedures and potentially run 2 simultaneous list. The location for this is already available in UDU at YGC.
- Although financial benefits will not be cash releasing, the estimated decrease in number of theatre lists for cystoscopies needed is 34 per annum (based on 126 procedures per year at a saving of an hour each), which will reduced the reliance on WLI sessions to achieve RTT waiting times

Key Service Benefits and Measures (to be reported back to the Committee 6 months after approval granted, unless otherwise stated in approval letter)

Service Benefit (insert further rows if needed, must include patient care and financial benefits)	Measure
Increase number of cystoscopies being performed on a list	
Improve waiting times for flexible cystoscopies	
Enhance diagnostic accuracy of pathology	
Reduce number of patients awaiting GA cystoscopy and biopsy for suspicious lesions	

Reduce risks to patients associated with GA procedures				
Reduce anxiety of patients awaiting GA procedures				
Improve planning of theatre lists				
Reduce reliance on WLI payments to achieve RTT targets				
<u>Financial Management and Costing</u>				
Pay				
Job Title	Annual Salary (inc. on-costs)	Period in Months	Project Role	£
none				
Non-pay				
Quote or Estimate?	Description			
Quote	Olympus stack and diathermy unit (detail on attached quote dated 12/4/19) (including VAT)			33,880.64
Estimate	One off training costs for UDU staff			1,000.00
Total Pay and Non-pay				34,880.64
Ongoing Revenue Costs				
Ongoing revenue costs which will be charged to NHS budgets				£ 2,500
Less: Savings generated by this application – <i>note this is note cash releasing</i>				£0
Net ongoing revenue costs charged to NHS budgets				£ 2,500
<u>Risk Assessment</u>				
Risk (insert further rows if needed)			Mitigation	

Exit Strategy (Charitable Funds cannot fund ongoing commitments)		
One off Purchase		
Health Inequalities (State how the scheme addresses health inequalities)		
Ensuring that the most up to date, cost effective and clinically proven treatments can now be offered to all patients in North Wales .		
Equalities Impact		
Will any racial equality groups (racial, gender, disability, sexuality, age, language, religion/belief be differently affected by this scheme?		NO
If YES, then please submit a copy of the Equality Impact Questionnaire with this form.		
If NO, then state below what information/evidence the decision is based on.		
All patients will benefit regardless of age, sex, race etc		
Approvals		
	Name & Date Approved	Comments
Fund Advisor	Paul Andrew 15.05.19	
Capital Approval (Estates/IM&T/Medical Devices)	Medical Devices Group 09.07.19	
Chief Financial Officer	Elaine Cartwright 28.05.19	

Area/Hospital/Secondary Care/Mental Health/Executive Director	Ellen Greer 12.06.19	
Charitable Funds Advisory Group	CFAG 23.05.19	This would ensure the most up to date, cost effective and clinically proven treatment to all patients in North Wales. The group agreed that this was good use of their monies.

AWYR LAS
FUNDING APPLICATION FORM

<u>Title of Funding Application</u>	2 year project: Assessing the mental health of patients on the Alaw Cancer Care Unit	
<u>Name & Job Title of Lead Applicant</u>	Manon Williams on behalf of Tim Irfon	
<u>Name & Job Title of Other Applicants</u>	Rebecca Williams, Voluntary Fund Advisor Tim Irfon & Mental Health Practitioner	
<u>Maximum Expenditure Requested</u>	£52,038.00	
<u>Fund to be Sourced</u>	Fund Number & Title	#TeamIrfon Fund – Fund 9Q18
	Current Uncommitted Balance	£ 88,435.02
<u>Introduction and Background</u>		
<ul style="list-style-type: none"> • Serious concerns have been raised by medical / nursing staff and patients regarding the lack of psychological support for cancer patients in the West Area. • These concerns are regularly highlighted during Alaw Unit meetings. Nursing and medical staff unanimously agree on the importance of mental health support for the truly holistic management of patients with cancer and the need to provide psychological support for patients with a cancer diagnosis is well documents (see, for example, https://www.cnwl.nhs.uk/news/psychological-support-people-living-cancer/ and https://www.macmillan.org.uk/images/Psychological-and-Emotional-Support_tcm9-283186.pdf). The issue of insufficient access to psychological support for cancer patients in the West was highlighted at a number of tumour site Peer Review visits over the last year. • Previously the original funding from the Welsh Health Specialised Services Committee (WHSCC) for the Inherited Bleeding Service had provided Psychological Support Service for all Alaw patients. Since the departure of Ms Sally Burns in the summer of 2017, individual patients on a special case 		





basis have been referred for counselling services to MEDRA but this pathway has proven to be not always appropriate or timely. This counselling service provision has been funded through the Awyr Las Alaw Unit Fund and was only intended to be a short-term solution. The Cancer Care division's intention was to always have on-site mental health support.

- Members of the North Wales Cancer Patient Forum have raised the issue of there being a lack of psychological provision with the Cancer Care division and have recommended appropriate steps to ensure psychological support is provided. This group has also reported their concern to the Community Health Council.
- The Cancer Care Division is aware of current inequalities in the psychology service across North Wales, and discussions are ongoing to identify new sources of long term funding to reduce these inequalities.

Patients are currently referred to 'Medra', but this is a private counselling service based on Anglesey and does not alleviate the need for more instant, informal and regular psychological support, which is what both patient representatives and Alaw Unit staff have long highlighted a need for.

- The vision for the 2 year project is that the post holder will:
Be a part of Alaw Team; Attend ward rounds and handovers; engage regularly on an informal basis with patients; hold formal consultations; support staff with psychological support education so that they have confidence to support patients' mental health needs.

Key Service Benefits and Measures (to be reported back to the Committee 6 months after approval granted, unless otherwise stated in approval letter)

Service Benefit (insert further rows if needed, must include patient care and financial benefits)	Measure
Improved Mental Health for patients, which will in turn lead to an improvement in overall physical health.	Note and record details in agreed reporting format
Patients receiving support will self-manage their mental health well being Supporting literature below	A wellness score will be introduced that can be utilised pre and post intervention
    Infographic_-_depre MH_and_cancer_posi ssion_and_cancer.pdtion_statement_(draf cer_article.pdf TCST_Lon_(2018)_p sychological_cancer.p	

Financial Management and Costing				
Pay				
Job Title	Annual Salary (inc. on-costs)	Period in Months	Project Role	£
(Exact Title TBC) Emotional Support Practitioner	Band 6 @ 24 hour week £25,919	24 months	To enhance the psychological and emotional support for patients with cancer receiving care and treatment on the Alaw Unit.	£51,838
Non-pay				
Quote or Estimate?	Description			
Estimate	Lap top			
Total Pay and Non-pay				£500
Ongoing Revenue Costs				
Ongoing revenue costs which will be charged to NHS budgets				£ 0
Less: Savings generated by this application				£9,807 in 2017-18, Medra Counselling Fees, currently funded through Awyr Las
Net ongoing revenue costs charged to NHS budgets				£ 0
Risk Assessment				
Risk (insert further rows if needed)			Mitigation	
Current risk is that there is no psychological support available. Patients are referred on a named patient basis for MEDRA counselling which does not always meet the needs of the patient.			The use of Medra counselling funded from charitable funds	

Exit Strategy (Charitable Funds cannot fund ongoing commitments)	
<p>As part of the 2 year project, the post holder will look at sustainable systems to help provide mental health support to patients. One initiative that will be explored is to develop an app which would promote and support self management and sign-post to resources and organisations which can be accessed.</p> <p>Referral to MEDRA counselling would also be reinstated, should the role not receive long-term funding from alternative sources.</p>	
Dementia Strategy (State how the scheme meets the Health Board's dementia strategy)	
<p>The post holder would be expected to be actively involved in the assessment, planning and implementation of care for patients who have dementia.</p>	
Health Inequalities (State how the scheme addresses health inequalities)	
<p>There is a currently a psychological care service at the North Wales Cancer Treatment Centre which cannot be accessed by Alaw patients due to capacity issues. The introduction of this new post will address the current inequalities in the service.</p>	
Equalities Impact	
Will any racial equality groups (racial, gender, disability, sexuality, age, language, religion/belief be differently affected by this scheme?	NO
If YES, then please submit a copy of the Equality Impact Questionnaire with this form.	
If NO, then state below what information/evidence the decision is based on.	
<p>No impact on any equality group.</p>	

Approvals		
	Name & Date Approved	Comments
Fund Advisor	Manon Williams, Matron 28.08.19	This application was written by Manon Williams, who will play an integral role in: developing the Job Description; drawing up the monitoring and evaluation plan; recruiting for this role; overseeing the role-holder and identifying additional routes of long-term funding.
Capital Approval (Estates/IM&T/Medical Devices)	N/A	
Chief Financial Officer	Paula Jones 19.09.19	Approval Outstanding: All revenue costs associated with this post, including laptop and uniform, will be funded through the Tim Irfon Fund.
Area/Hospital/Secondary Care/Mental Health/Executive Director	Geraint Roberts, General Manager, Cancer Services 28/08/19	Representatives from the Cancer Care Division and Mental Health Services will be involved in the development of a Job Description and monitoring plan for this role, but the overall management of the role-holder will be overseen by the Cancer Care Division.
Charitable Funds Advisory Group	CFAG 05.09.19	The group felt that this was an important pilot project as there is insufficient mental health support available for patients with Cancer.

Charitable Funds Committee

 4th October 2019

CF19/42


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 Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

To improve health and provide excellent care

Report Title:	Charitable Funds Committee Terms of Reference
Report Author:	Rebecca Hughes, Charity Accountant
Responsible Director:	Sue Hill, Executive Director of Finance
Public or In Committee	Public
Purpose of Report:	The Charitable Funds Committee Terms of Reference are brought for review and approval by the Committee. They have been updated to reflect the changes to the membership of the Committee.
Approval / Scrutiny Route Prior to Presentation:	The Terms of Reference were approved by the Audit Committee on the 9 th February 2018 and ratified by the Board on the 5 th April 2018. The updated Terms of Reference will be taken to the Audit Committee in December 2019.
Governance issues / risks:	There are no governance issues for the Health Board of this paper.
Financial Implications:	There are no financial implications for the Health Board of this paper.
Recommendation:	The Committee is asked to review and approve the Terms of Reference.

Health Board's Well-being Objectives <i>(indicate how this paper proposes alignment with the Health Board's Well Being objectives. Tick all that apply and expand within main report)</i>	√	WFGA Sustainable Development Principle <i>(Indicate how the paper/proposal has embedded and prioritised the sustainable development principle in its development. Describe how within the main body of the report or if not indicate the reasons for this.)</i>	√
1.To improve physical, emotional and mental health and well-being for all	√	1.Balancing short term need with long term planning for the future	√
2.To target our resources to those with the greatest needs and reduce inequalities	√	2.Working together with other partners to deliver objectives	√
3.To support children to have the best start in life	√	3. those with an interest and seeking their views	√

4.To work in partnership to support people – individuals, families, carers, communities - to achieve their own well-being	√	4.Putting resources into preventing problems occurring or getting worse	√
5.To improve the safety and quality of all services	√	5.Considering impact on all well-being goals together and on other bodies	√
6.To respect people and their dignity	√		
7.To listen to people and learn from their experiences	√		
Special Measures Improvement Framework Theme/Expectation addressed by this paper			
<i>Not applicable</i>			
Equality Impact Assessment			
<i>Not applicable – the report does not impact directly on staff or patients</i>			

Disclosure:

Betsi Cadwaladr University Health Board is the operational name of Betsi Cadwaladr University Local Health Board

Betsi Cadwaladr University Health Board

Terms of Reference and Operating Arrangements

CHARITABLE FUNDS COMMITTEE

1. INTRODUCTION

- 1.1 In accordance with standing orders (and the LHB scheme of delegation), the Board shall nominate a committee to be known as the **Charitable Funds Committee** “the Committee”. The detailed terms of reference and operating arrangements set by the Board in respect of this committee are set out below.

2. CONSTITUTION

- 2.1 The Betsi Cadwaladr University LHB was appointed as the corporate trustee of the charitable funds by virtue of Statutory Instrument and its Board (acting as The Board of Trustees) serves as its agent in the administration of the charitable funds held by the LHB.
- 2.2 The purpose of the Committee” is to make and monitor arrangements for the control and management of the LHBs Charitable Funds.

3. SCOPE AND DUTIES

- 3.1 Within the budget, priorities and spending criteria determined by the LHB as trustee and consistent with the requirements of the Charities Act 1993, Charities Act 2006 (or any modification of these acts) to apply the charitable funds in accordance with their respective governing documents, including the “Declaration of Trust” (Trust Deed).
- 3.2 To ensure that the LHB policies and procedures for charitable funds investments are followed. To make decisions involving the sound investment of charitable funds, managing the risk of any loss in capital value alongside producing a return consistent with prudent investment in the long term and ensuring compliance with:-
- Trustee Act 2000
 - The Charities Act 1993
 - The Charities Act 2006
 - Terms of the fund’s governing documents
- 3.3 To receive at least four times per year reports for ratification from the Executive Director of Finance, and to make and enact investment decisions taken through delegated powers upon the advice of the LHB’s investment adviser.
- 3.4 To oversee and monitor the functions performed by the Executive Director of Finance as defined in Standing Financial Instructions.

- 3.5 To respond to, and monitor the level of, donations and legacies received, including the progress of any Charitable Appeal Funds.
- 3.6 To monitor and review the LHB's scheme of delegation for Charitable Funds expenditure and to set and reflect in Financial Procedures the approved delegated limits for expenditure from Charitable Funds.
- 3.7 To ensure that funds are being utilised appropriately in line with both the instructions and wishes of the donor. To ensure such funding provides added value and benefit to patients and staff, and that all expenditure is reasonable, clinically and ethically appropriate,,
- 3.8 To keep the reserve policy under review to ensure that balances are not inappropriately retained.
- 3.9 To establish and approve the Terms of Reference and Scheme of Delegation for a Charitable Funds Advisory Group to review specific funding applications. To receive reports from the Chair of the Advisory Group at each Committee meeting for scrutiny and ratification.
- 3.10 To ensure that there is a clear strategy and framework for decision making, agreed by the Board of Trustees, against which bids for funding can be evaluated by Fund Advisors, other Health Board staff, the Charitable Funds Advisory Group and the Committee.
- 3.11 To receive, scrutinise and approve the Charity's Annual Report and Accounts on behalf of the Health Board.

4. DELEGATED POWERS AND DUTIES OF THE DIRECTOR OF FINANCE

- 4.1 The Executive Director of Finance has prime responsibility for the LHB's Charitable Funds as defined in the LHB's Standing Financial Instructions. The specific powers, duties and responsibilities delegated to the Executive Director of Finance are:-
 - Administration of all existing charitable funds;
 - To identify any new charity that may be created (of which the LHB is trustee) and to deal with any legal steps that may be required to formalise the trusts of any such charity;
 - Provide guidelines with respect to donations, legacies and bequests, fundraising and trading income;
 - Responsibility for the management of investment of funds held on Trust;
 - Ensure appropriate banking services are available to the LHB;
 - Prepare reports to the LHB Board including the Annual Accounts and Annual report;

- To monitor the balance of monies held within the Fund
- To ensure that all expenditure (where appropriate) is ordered through the procurement process

5. AUTHORITY

5.1 The Committee is empowered with the responsibility for:-

- Day to day management of the investments of the charitable funds in accordance with the investment strategy set down from time to time by the trustee and the requirements of the LHB's Standing Financial Instructions.
- The appointment of an investment manager to advise it on investment matters. The Committee may delegate day-to-day management of some or all of the investments to that investment manager. In exercising this power the Committee must ensure that:
 - a) The scope of the power delegated is clearly set out in writing and communicated with the person or persons who will exercise it;
 - b) There are in place adequate internal controls and procedures which will ensure that the power is being exercised properly and prudently;
 - c) The performance of the person or persons exercising the delegated power is regularly reviewed;
 - d) Where an investment manager is appointed, that the person is regulated under the Financial Services Act 1986;
 - e) Acquisitions or disposal of a material nature must always have written authority of the Committee or the Chair of the Committee in conjunction with the Executive Director of Finance.
- Ensuring that the banking arrangements for the charitable funds should be kept entirely distinct from the LHB's NHS funds.
- Separate current and deposit accounts should be minimised consistent with meeting expenditure obligations.
- The amount to be invested or redeemed from the sale of investments shall have regard to the requirements for immediate and future expenditure commitments.
- The operation of an investment pool when this is considered appropriate to the charity in accordance with charity law and the directions and guidance of the Charity Commission. The Committee shall propose the basis to the Health Board for

applying accrued income to individual funds in line with charity law and Charity Commissioner guidance.

- Obtaining appropriate professional advice to support its investment activities.
- Regularly reviewing investments to see if other opportunities or investment managers offer a better return.

5.2 Authority

5.2.1 The Committee is authorised by the Board of Trustees to investigate or have investigated any activity (clinical and non-clinical) within its terms of reference. It may seek relevant information from any:

- Employee (and all employees are directed to cooperate with any legitimate request made by the Committee); and
- Any other committee, sub committee or group set up by the Board to assist it in the delivery of its functions.

5.2.2 The Committee is authorised by the Board of Trustees to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers it necessary, in accordance with the Boards procurement, budgetary and other requirements.

6. MEMBERSHIP

6.1 Members

Seven (7) Members

Members	Up to four (4) Independent Members including the Chair and Vice Chair of the committee, plus three (3) Executive Members
Chair	An Independent Member
Vice Chair	Another Independent Member of the Committee
Executive members	Executive Director of Finance (Lead Director) Executive Director of Planning and Performance Executive Medical Director
Secretary	As determined by the Board Secretary

6.2 In attendance

6.2.1 The Committee may require the attendance for advice, support and information routinely at meetings from:

Charitable Funds Accountant
Charitable Funds Fundraising Manager
LHB Investment Advisor

6.2.2 Other Directors will attend as required by the Committee Chair, as well any others from within or outside the organisation who the committee considers should attend, taking into account the matters under consideration at each meeting.

6.2.3 Trade Union Partners are welcome to attend the public session of the Committee

6.3 Member Appointments

6.3.1 The membership of the Committee shall be determined by the Board of Trustees, based on the recommendation of the LHB Chair, taking account of the balance of skills and expertise necessary to deliver the Committee's remit and subject to any specific requirements or directions made by the Welsh Government.

6.3.2 Appointed Independent Members shall hold office on the Committee for a period of up to 2 years. Tenure of appointments will be staggered to ensure business continuity. Independent Members may be reappointed up to a maximum period of 4 years.

6.3.3 In order to demonstrate that there is a visible independence in the consideration of decisions and management of charitable funds from the LHB's core functions, the Board of Trustees should consider extending membership to the Charitable Funds Committee to individuals outside of the Board.

6.4 Secretariat

6.4.1 Secretary: as determined by the Board Secretary.

6.5 Support to Committee Members

6.5.1 The Board Secretary, on behalf of the Committee Chair, shall:

- Arrange the provision of advice and support to committee members on any aspect related to the conduct of their role; and
- Co-ordinate the provision of a programme of organisational development for committee members.

7. COMMITTEE MEETINGS

7.1 Quorum

7.1.1 At least three members must be present to ensure the quorum of the

Committee, one of whom should be the committee Chair or Vice-Chair and one Executive Director.

7.2 Frequency of Meetings

7.2.1 Meetings shall be held quarterly and otherwise as the Committee Chairs deems necessary - consistent with the LHB's annual plan of Board Business.

7.3 Withdrawal of individuals in attendance

7.3.1 The Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

8. RELATIONSHIP WITH THE BOARD AND ITS COMMITTEES/GROUPS

8.1 The Committee, through the Committee Chair and members, shall maximise cohesion and integration across all aspects of governance and assurance through the:

- joint planning and co-ordination of Board and Committee business; and
- sharing of information, as appropriate .

8.2 The Committee shall embed the LHBs corporate standards, priorities and requirements, e.g., equality and human rights through the conduct of its business, , and in doing and transacting its business shall seek assurance that adequate consideration has been given to the sustainable development principle and in meeting the requirements of the Well-Being of Future Generations Act.

8.3 The requirements for conduct of business as set out in the LHBs Standing Orders and Board Standards are equally applicable to the operation of the Committee.

9. REPORTING AND ASSURANCE ARRANGEMENTS

9.1 The Committee Chair shall:

- report formally, regularly and on a timely basis to the Board of Trustees on the Committee's activities. This includes verbal updates on activity, the submission of committee minutes and written reports, as well as the presentation of an annual report;
- bring to the Board of Trustee's specific attention any significant matters under consideration by the Committee;
- ensure appropriate escalation arrangements are in place to alert the LHB Chair, Chief Executive or Chairs of other relevant committees of any

urgent/critical matters that may affect the operation and/or reputation of the LHB.

- 9.2 The Board Secretary, on behalf of the Board of Trustees, shall oversee a process of regular and rigorous self assessment and evaluation of the Committee's performance and operation.

10. APPLICABILITY OF STANDING ORDERS TO COMMITTEE BUSINESS

- 10.1 The requirements for the conduct of business as set out in the LHB/Trusts Standing Orders are equally applicable to the operation of the Committee, except in the following areas :

- Quorum

11. REVIEW

- 11.1 These terms of reference and operating arrangements shall be reviewed annually by the Committee and any changes recommended to the Health Board for approval.

12. CHAIR'S ACTION ON URGENT MATTERS

- 12.1 There may, occasionally, be circumstances where decisions which would normally be made by the Committee need to be taken between scheduled meetings. In these circumstances, the Committee Chair, supported by the Committee Secretariat as appropriate, may deal with the matter on behalf of the Board of Trustees – after first consulting with two other Members of the Committee, one of whom must be an Executive Member. The Secretariat must ensure that any such action is formally recorded and reported to the next meeting of the Committee for consideration and ratification.
- 12.2 Chair's action may not be taken where the Chair has a personal or business interest in the urgent matter requiring decision.

13. DATE OF ACCEPTING THE TERMS OF REFERENCE AND APPROVAL

Approved 04.10.19
V10.0