

CHARITABLE FUNDS COMMITTEE

Draft Minutes of the meeting held on Thursday 17th March 2022 Via Teams

Present:

Ms Jackie Hughes	Independent Member (Chair)
Ms Cheryl Carlisle	Independent Member
Mrs Sue Hill	Executive Director of Finance (<i>left meeting after 2hrs 20min</i>)
Ms Linda Tomos	
Ms Kirsty Thomson	Independent Member
Ms Helen Stevens- Jones	Head of Fundraising Director Of Partnerships/communications And Engagement
Mr Tim Woodhead	Director of Finance (Operational)
Mr John Gallanders	Independent Member (Third Sector)
Ms Bethan Roberts	Principal Finance Manager (Charitable Funds & Financial Reporting)
Ms Paula Clayton	Assistant Financial Accountant

In Attendance:

Ian lush	CEO, Imperial Health Charity
Miss Hayley Powell	PA to Executive Director of Finance
Mr Paul Matthias	Investment Manager Brewin Dolphin

Agenda Item	Action
<p>CF22/1 Welcome & Introductions</p> <p>CF22.2 All those present were welcomed to the meeting.</p>	
<p>CF22/2 Apologies for Absence and Declarations of Interest</p> <p>CF22.3 Apologies were received from Nick Lyons – Executive Medical Director, Cath Humes - Fundraising Support Manager , Mari Jones - Awyr Las Communication Officer</p> <p>CF22.4 The following Declarations of Interest were received:</p> <ul style="list-style-type: none"> The Head of Fundraising is Deputy Chair of NHS Charities Together. 	
<p>CF22/3 Guest speaker Ian Lush – CEO Imperial Health Charity</p> <p>CF22.3.1 KT introduced IL to the group. IL is the CEO of Imperial Health Charity. He received an OBE last year for his services to charity and the NHS. He has experience in the healthcare sector as a former lead governor of the Great Ormond St. Hospital. IL has been involved in arts charities in leading senior marketing roles.</p>	

CF22.3.2 2 years ago IL oversaw the launch of the national COVID-19 Urgent Appeal when he became chair of NHS Charities Together (NHSCT) in April 2020. The appeal went on to raise £155 Million to support the pandemic response and recovery.

CF22.3.3 The Imperial Health Charity started off as a “Bank and Thank” whereby a low profile charity receives money from donations, donors are thanked and money is carefully spent in their hospitals. The hospitals in the Imperial group came together in 2007 followed by the charities in 2009

CF22.3.4 the charity has grown from 12 to 42 staff raising on average £7 million a year. The charity delivers services as well as funding them. They have vastly extended their arts programme with acquired gifted and commissioned art work from British artists. They are the only hospital with an art collection with the Arts Council Museum accreditation.

CF22.3.5 The charity takes art therapists, dancers, musicians and poets into the wards, working with tiny babies in the paediatric unit up to care of the elderly. They have a intergenerational program bringing in primary school children into care of the elderly wards to do giant art projects.

CF22.3.6 The charity took on the volunteering service including a youth volunteering programme in the hospital in 2016. The numbers of volunteers increased the level of the activities they undertake and they work very closely with the local authorities in West London. They use volunteering to bring people into work for the trust so that they can use volunteering as a route into being employed which is being launched in April 2022.

CF22.3.7 IL highlighted the importance of professionalizing fund raising. Specialists are needed in each area, the trusts and foundations, the corporates, the community and particularly around the major gifts and grateful patients. The charity now has a director of development who came from the Alzheimer's Society and previously to that the Prince's Trust. This enables greater support for NHS patients.

CF22.3.8 The Charity also has an Evaluation Manager that allows them to show the impact of what they are doing and give assurance to patients, community and the wider NHS.

CF22.3.9 LT wanted to know if the charity had difficulties in terms of fundraising communication within the geographical area and if the model imperial charity had adopted could be used within BCU. Also how they have managed to gain good engagement with the clinicians.

<p>CF22.3.10 IL commented that by adapting certain elements of the model it could work for BCU too. The recruitment of volunteers and recruiting community fundraisers could help. Communication was a key part in the success of the model and the charity uses a lot of social media to promote its services .In terms of the consultants IL commented that it's been a long term project. IL spent his first 6 months in the role meeting people and going to all five hospitals and getting appointments in the diaries.</p> <p>CF 22.3.11 The charity spent £15 million in the first two years which had been sitting in an endowment. They used this to significantly transform three outpatient areas, a paediatric intensive care unit and the trauma unit at Saint Mary's. Pre Covid the Charity held an annual consultants dinner including entertainment / speeches.</p> <p>CF22.3.12 JG noted that in terms of fundraising we have 3 general hospitals and other hospitals.</p> <p>CF 22.3.13 IL added that they have had significant television coverage including four programs on Channel 4 about major trauma in London. The first two series of the hospital documentaries were about imperial hospitals.</p> <p>CF 22.3.14 The TV coverage highlighted specialised services such as focused ultrasound treatment for essential tremor (the only hospital in the country that does this) This has encouraged more people from all over the UK to seek treatment.</p> <p>CF22.3.15 JH highlighted that North Wales have a volunteering programme called “Project search” and if IL had a strategy for this type of programme and if this was something that could be shared.IL noted he would be happy to share a strategy for this from his volunteering manager.</p> <p>CF22.3.16 SH asked if there was a simple lesson about how we could re-engage with our community around fundraising. IL responded by adding that we should not underestimate the coming year and possibility of a recession type scenario following the current economic state. Therefore people are more likely not to give due to having less money than before. Large scale fundraising events will continue and should be encouraged but casual one off donations may not been seen in the same way.</p> <p>CF22.3.17 IL added that COVID showed us that some staff facilities within the NHS are still poor. By encouraging donations we could improve the morale of staff within the NHS also.</p>	IL
<p>CF22/4 Investment Managers Portfolio Report & Presentation – Paul Matthias</p> <p>CF22.4.1 In terms of how BD viewed the world coming into 2022, we saw economic growth to be above trend, inflation was at a higher level, but not out of control. We were expecting healthy corporate profits and a resumption to economic normality as COVID subsided.</p>	

CF22.4.2 The end of last year saw the Omicron variant and concerns that a further lockdown scenario would hamper economic activity. This did not occur. The authorities have a much better understanding of how to deal with the trade-off between economic normality and the health concerns. Instead, inflation and geopolitics have come to the forefront of investors' concerns.

Central banks, having said in 2021 that inflation would be transitory (short lived), then backtracked. This saw markets sell off at the time from pricing in a low number of interest rates to a much higher number of interest rates; for example the market expects a further 6 interest rate raises from the Bank of England in 2022.

CF22.4.3 Russia's invasion of Ukraine this year came at a time when the Western world was seeing an increase in inflation rates. Russia has a considerable degree of control over some of the world's key commodities (Oil, Gas, Wheat, Grains).

CF22.4.4 Central banks feel that they can raise interest rates by those levels without causing recession, ultimately if you raised interest rates too far it will choke off economic growth and bring about a recession sooner.

CF22.4.5 Markets will continue to be very volatile but it is still worth maintaining our overweight position to equities which will recover further. We have provided some economic scenarios of the crisis. There is more modest oil and gas supply disruption which has had an impact on markets, and bonds have outperformed equities in the short term, but this will reverse over time.

CF 22.4.6 We don't think that that we're in that bottom scenario where there are maximal sanctions and that either Europe or indeed Russia decides to cut off supply one way or the other and which would raise inflation further.

CF22.4.7 – We are maintaining an overweight position relative to the benchmark in in equities and have a corresponding underweight position to bonds. In terms of the specifics in terms of the performance of the portfolio, it has been a disappointing one on a relative basis. For example: in a war type scenario with an overweight position to equities relative to the benchmark you would sell off more aggressively than the market as you are taking a slightly higher degree of risk. Secondly is the composition of the areas of the market that have done best during this crisis and how they map across with what the charity is ultimately asking Brewin Dolphin to achieve.

CF22.4.8 The best performers in the marketplace have largely been ones, which are precluded from investment within the portfolio (defence, oil, gas and mining companies) on ethical grounds.

Due to the war between Russia and Ukraine companies have been pulling out of Russia. Due to a globally diversified portfolio there will be some underlying exposure

to Russia. One of the bond funds which is around 2.25% of the portfolio. This had roughly 1% waiting to Russia and Ukraine. This accounts to 0.03% of the portfolio. There is a negligible exposure within this.

CF22.4.9 In emerging markets, (Fidelity Emerging Markets Fund) The written down value of the holdings in Russia is 0 as the Russian stock markets are closed. Therefore many of these funds would probably look to be selling their Russian companies, but the stock exchanges are closed to overseas investors. The last statement is on the 21st of February 2022 (7%) which is 0.03% of the portfolio. The other company to note was Linde (gas engineering company) who have Russian subsidiaries.

CF22.4.10 PM asked the committee what their position was on this and if they wanted zero exposure to Russia. If so then they would sell those particular funds. But if as part of diversified portfolio there will be a small element of the portfolio that has exposure to those. Also if Brewin Dolphin were being asked to take part in no new investment in Russia (this would be added to the committee's ethical policy)

CF22.4.11 LT asked in terms of responsibility as a committee and as a health board, would we reflecting the wishes of people of North Wales. LT commented that she thought most people would not view favourably of their charity investing in Russia. If we were to dis-invest would a similar return be made by re-investing elsewhere.

CF22.4.12 SH asked the committee to consider if the charity backed out of the equities (that include Russian investment) how easily it could be done and what impact this would have on the portfolio, if this was marginal then the committee would expect to approve this.

CF22.4.13 PM assured the committee that this was a straightforward switch. The bond fund is 2.25%. A Like for Like alternative could be found. As the percentage in emerging markets is marginal and the Russian aspect could not be isolated then the alternative would be the better solution (with a zero weighting). There is no financial detriment by selling.

CF22.4.14 CC proposed that the committee remove themselves financially from Russia as this was morally the right thing to do.

CF 22.4.15 JH agreed with this position as well. However the Chair wanted the committee to consider that by dis-investing in Russia, we may impact on employment of people in our own country. An example was given of the company Holland and Barrett which has Russian links and by people not shopping in those areas potentially impacts on employment of the staff in those shops.

CF22.4.16 PM assured the committee that in this case UK businesses would not be impacted. The underlying investments are Russian based and classed as emerging

markets because their operations are in Russia. In terms of the bond, this is a Russian government bond. It will not have an impact on them. There is no causal effect on the UK.

CF22.4.17 JH made the proposal to disinvest based on PM's response, re- investing in something similar.

CF22.4.18 PM noted in a paper written on 30th November to the committee that we are able to continue to run the existing strategy based on a proposal to withdraw £3m, and provided a number of options for doing so. Clearly the markets can move significantly in the short term, and the Committee could see the difference in capital value of the fund. PM noted that as soon as a decision to disinvest is made, BD would action this as soon as possible. The Committee would of course need to sign off the strategy, or be comfortable with taking out cash in advance of this being finalised.

CF 22.4.19 One of the options to achieve a £3m withdrawal could be taking £1 million out imminently and withdrawals of £250,000 each quarter thereafter. If the committee wanted to be very risk averse and the strategy would be signed off then a proposal to take £3 million out imminently would be a risk averse thing to do. Equally, only taking out funds at the moment they are required would be the least risk averse option. PM enquired whether the Committee are in a position to instruct a drawdown imminently, or whether they would wait to approve the plan in full before doing so.

CF22.4.20 It was decided to go through the Awyr Las strategy Development plan Agenda item in the first instance in order to make the decision on the withdrawals. At this stage there would be no call to disinvest from the portfolio, and an instruction would not be given until at least September 2022.

CF22/8 Awyr Las Strategy Development Plan – Helen Stevens-Jones

CF22.8.1 HSJ noted that this was originally going to be presented by Peter Panteli of UCS consultants but apologies have been noted.

CF22.8.2 The draft strategy was circulated end of last year and has been reviewed by UCS consultants since then with recommendations. The overall direction in the current draft strategy is the right one for NHS charity developments. There are risks associated which are drawn out by UCS around the risk of crystalizing the reserves.

CF22.8.3 Recommendations around the budget and the plan for the next six months was discussed. KT has developed a 6 month strategy development plan which

addresses the report's recommendations based on a risk scale. The committee were asked to approve funding for further data analysis to inform the charity strategy. The Committee were asked to approve the increase in hours of the Head of Fundraising from 0.6WTE to 1 WTE funded staff.

CF22.8.4 KT noted that a lot of thought had gone into the different options on the draft strategy and the outcomes of these. By having some external support doing the additional benchmarking and analysis will be integral to the success of the strategy. September 2022 will see a more detailed plan in place based on additional evidence.

CF22.8.5 KT added that we will be some challenging circumstances for some time. There is a need to make sure that our Charity and Third Sector strategies reflect and consider the challenges our key partners are going to be facing moving forward. In terms of the third sector KT noted that early prevention was core to the strategy, and considering what our partners would like to see is essential.

CF 22.8.6 LT commented that last time the strategy was shared there were a lot of unanswered questions but thanked the team for their hard work on progressing this and welcomed the report. Having the external support has strengthened the areas identified under the recommendations. LT asked if we were to increase the corporate size of the charity could we demonstrate that this will result in the subsequent increase in fundraising, which would justify the use of the charity's funds to pay for additional staff. In terms of the current evidence supplied LT was in support of the approach that KT and HSJ were suggesting.

CF22.8.7 JG noted there 2 aspects to fundraising that need to be noted. Firstly how to raise the funds and secondly around the administrative nature and purpose. JG highlighted that the purpose for why funds are required should be very much at first and foremost. There seemed to be a lack of information within the documentation on what we are looking to raise the funds for (expenditure for the next 3 years). Discussions need to be held around the governance arrangements: BCUHB is the charity's corporate trustee. Should it be an independent charity in its own right?

CF22.8.8 JG noted that Imperial Health Trust charity is a completely independent charity with its own specific board of trustees with pros and cons for both sides .JG would welcome the decision to bring in some additional analysis and some external thought which will help with overall direction in September.

CF22.8.9 KT highlighted that in terms of expenditure budget it was initially in the draft strategy document. Included in the fundraising reports it notes some of the projects that are coming which require additional funding. In terms of a large scale appeal, Awyr Las has worked with an external consultancy have been looking at the needs of radiology and how this fits in with early prevention and what is needed moving forward in terms of their case for support. A report will be due at the next CFC meeting that will be used to form part of the strategy.

<p>CF22.8.10 Awyr Las have worked closely with finance colleagues to identify what the needs are from the capital list and how this will be funded. And where they match with existing funds. The option moving forward is to ensure there is professionalism and capacity within the team to enhance grants management provision.</p> <p>CF22.8.11 JH noted that the committee are asked to note a number of documents attached to the draft strategy. Appendix 1 the paper with recommendations from UCS. This was noted as read. The committee approved Appendix 2 (Work Plan). The committee approved Option B. LT asked for PM's view on crystallising the funds</p> <p>CF22.8.12 PM noted that in terms of investment there are a wide range of outcomes that could happen.</p> <p>CF22.8.12 KT, SH, TW and HSJ agreed to wait until September when they would have a better view of what funds will be needed and for what. JH agreed that on behalf of the committee they would defer crystallization until September when they are in possession of more facts.</p> <p>CF22.8.13 PM noted that in September when crystallisation will take place 2 authorised signatories will need to be on the portfolio to take these funds off the market. A draft letter is in place to have previous trustees removed and replacements added.</p>	<p>TW</p>
<p>CF22/5 Minutes of the Previous Meeting Held on 16 September 2021</p> <p>CF22/5.1 Accuracy CF22/5.1.2 The following queries were made from the previous minutes:</p> <p>It should be noted that Mark Polin who was in attendance at the meeting was in attendance for part of the meeting. It was agreed that when attendees are only in attendance for part of a meeting this will be noted on future minutes.</p> <p>CF22/5.2Matters arising and Summary Action Plan CF2123.1 Head of Fundraising to present an update to the next Charitable Funds Committee regarding information, monitoring and evaluation of grants. A detailed outline of the plans to overhaul grants management will be included in the Strategy documentation presented for approval at the September 2022 Charitable Funds Committee. Committee agreed to close on the 17th March 2022</p> <p>CF2143.4 Draw up a plan to crystallise gains on investment and release some of these funds back into the charity for end year spend linking with the reserves. The committee approved the crystallisation of funds in September when they are in a better position with evidence in the Awyr Las Strategy Plan. Agreed to close item</p>	
<p>CF22/6 Staff Lottery Update Report – Helen Stevens-Jones</p>	

<p>CF22.6.1HSJ noted that until the draft Awyr Las strategy plan has been fully developed and the recommendations have been considered the staff lottery will postponed.</p> <p>CF22.6.2 KT noted that a campaigns and marketing manager will be joking the team in April 2022. In the first 6 months of this role the “pennies from heaven” campaign will be revised.</p> <p>CF22.7.3 JG added that he launched the Wrexham Community Lottery in December 2021 and has secured 55 organisations. The lottery also boasted a £25,000 top cash prize in its first week.as ACTION: JG would welcome any discussions outside of the meeting on his experiences to date.</p> <p>CF22.7.4 CC wanted to highlight again the importance of making sure we are looking after vulnerable staff when it came to gambling and making sure we have governance processes in place when considering the staff lottery proposal. ACTION: JH added that this has been discussed in the partnership forum as well JH to share workbook on gambling from partnership forum with CFC members.</p>	<p>JG / KT</p> <p>JH</p>
<p>CF22/9 Awyr Las 2022/2023 Budget – Kirsty Thomson</p> <p>CF22.9.1 HSJ noted that this discussion took place earlier on the meeting when the Draft Strategy was discussed under point number CF22/8 and all points to be considered were raised and discussed. Budget Option B was approved. Committee agreed.</p>	
<p>CF22/10 Reserve’s Policy – Tim Woodhead / Kirsty Thompson</p> <p>CF22.10.1 TW commented that the reserves policy was in line with what we would expect in terms of how much reserves we hold. We are holding more reserves than our policy at present. Our targets are in the region of £3-£4 million but we are holding investments in the region of £10-£11 million. Even with crystallising these we will still be within the reserves policy.</p> <p>CF22.10.2 LT queried if the finance team would be in constant contact with Brewin Dolphin in terms of investments for the reserves in case there was a change in the markets. LT still supported option B of the draft strategy in the crystallisation of the fund in September. TW agreed that they would be in contact with Brewin Dolphin should a development like this occur.</p> <p>CF22.10.3 LG queried how much of the funding was defined as free reserves as opposed to designated. TW responded that half of the funds are classed as undesignated. If it seen that the organisation has funds and reserves that are not being used then this would have a detrimental effect. TW noted that this came back to JG</p>	

<p>earlier comment about having a robust expenditure plan in place for the utilisation of funds.</p> <p>CF22.10.4 KT highlighted that the strategy now contains extra information on the charity structure which was not previously included in detail. 50% of the charity income is unrestricted and only 9% of the funds are undesignated.</p> <p>CF22.10.5 The committee approved Option B of the Reserves policy.</p>	
<p>CF22/12 Charity Risk Register Matrix – Kirsty Thomson</p> <p>CF22.12.1 KT highlighted that the purpose of the document was to review all the risks that were initially drawn up and now following an external review that was undertaken as part of the strategy the position of the next 6 months.</p> <p>CF22.12.2 Additional training including DATIX training (incident management system) has been put into place with the help of the Risk Assurance Manager to bring the register in line with other committee risk registers. Headline risks will be presented to the committee on a quarterly basis going forward.</p> <p>CF22.12.3 LT commented that she felt that there was a relaxed approach to the risk about technology. There have been a few papers including the CRM which shows that technology is a high risk. The ability to source and access suitable technology needed to be improved.</p> <p>CF22.12.4 KT responded that after discussion with the Head of Risk and Assurance that technology was a part of everything the charity does therefore this would permeate through all of the risks as a whole. As part of option B that has been approved by the committee professional support will be brought in to oversee data and reporting mechanisms. An additional role of a campaign and marketing manager is being introduced in April 2022 to help with digital projects. ACTION: However KT noted she would make sure that points in relation to technology are made clearer in the document.</p> <p>CF22.12.5 JG added that the reputation of the health board in the risk register was highlighted as green, noting the balance of the charity as an independent body and that this was aligned to BCU as a whole. Following some significant reputation issues for BCUHB at present it would seem more fitting to place this category as amber (taking into account the public's perception of BCUHB as well)</p> <p>CF22.12.6 ACTION: KT agreed that the category would be changed from green to amber via the risk register action log.</p> <p>CF22.12.7 JH added that the DATIX system was an operational tool to manage risk and not a useful system in terms of gaining assurance on risks. For example when an incident was opened and reviewed. JS also wanted to know if the key risks are included from the UCS document as a number are red and high risk. KT confirmed they are included. JH wanted to see the risks back as an Agenda items in order to</p>	<p>KT</p> <p>KT</p> <p>JH</p>

<p>report to the board. ACTION: Discussion with Molly Marcu – Interim Deputy Board Secretary on how we use the charity risk register needs to take place.</p> <p>CF22.12.8 KT responded that now that Option B was agreed at today's meeting she now has the insight to move this forward and be able to give a report in greater detail.</p>	
<p>CF22/14 Committee Work plan – Kirsty Thomson</p> <p>CF22.14.1 KT noted that a work plan will be available at every meeting going forward. A workshop and strategy day will be arranged for quarter 2, and more information will follow in due course. Committee members were encouraged to be a part of the design of this workshop.</p> <p>CF22.14.2 JH noted that the workshop should be arranged when it is not a committee day in order for people to attend. JH noted that the work plan needed to include consideration for trustees meetings. Currently there is 1 trustee meeting per year which has been noted as insufficient for the operation of a tracked charity. A minimum of 4 meetings per year in line with the committee was suggested. Trustee training was also noted as high priority as it is not currently available.</p> <p>CF22.14.3 SH responded that the trustee meetings could be in the Health Board Workshops as part of their Work plan to ensure more frequent meetings are taking place. The trustee training could also be used as part of the Health Board workshops and then refreshed annually.</p> <p>CF22.14.4 The committee approved the cycle of business and work plan.</p>	<p>SH</p>
<p>CF22/15 Items for Information</p>	
<p>CF22/16 Finance Report Q3 Tim Woodhead</p> <p>CF22.16.1 TW highlighted there was a reduction in expenditure and income because of COVID-19 compared to last year. Performance on the funds was still strong based on investments.</p> <p>CF22.16.2 LT noted that had been delays in expenditure due to restrictions of COVID-19 therefore there were still a lot of outstanding commitments in terms of substantial projects. Would these now be pushed forward and they would not impact of commitments for the following year.</p> <p>CF22.16.3 TW responded that there was no reason these commitments could not be upheld and moved forward. If funds could not be used in this quarter then they could be used in the next quarter.</p> <p>CF22.16.4 JH noted that under expenditure the appendix for the COVID-19 grant has been removed from the report as expenditure is significantly lower JH assumed that this expenditure has been included elsewhere in the report. TW responded that this is included within the main tables of the report.</p>	

<p>CF22.16.5 JH highlighted that more work may need to be undertaken on legacy strategies as the West seemed to have more legacies. KT responded that this is already within the existing strategy.</p> <p>CF22.16.6 At this stage it was noted that the Executive Director of Finance had to leave the meeting and the group was no longer quorate. However all other items on the AGENDA were for discussion only.</p>	
<p>CF22/17 Charity Support Team Update Q3 & CF22.18 Third Sector Groups Update Report (AGENDA items were discussed as one item together)– Kirsty Thomson</p> <p>CF22.17.1 KT noted that Legacy giving was something the charity promoted throughout all aspects of their work. The communications officer who is in place and taken this forward with getting stories out about the impact of some of the grants that have been funded in recent years.</p> <p>CF22.17.2 KT added that the “Keep the Beats” founder Julie Starling will be taking on more work with Welsh Government and maintaining an honorary contract with BCU for a few hours to keep up her registration. A meeting has been set up with the Director of engagement and partnerships (WAST and Welsh Ambulance Services) to discuss the Keep the Beats scheme and how to move forward.</p> <p>CF22.17.3 A meeting took place on the 16.03.2022 with planning to assess the first draft of the reaffirming commitment and Third sector documentation that's being compiled. KT has to provide comments by the end of this week on the first draft.</p> <p>CF22.17.4 KT highlighted that we are still unclear at the moment as to BCUHB ambitions around volunteering. This will be looked at as part of the strategy over the next 6 months. JG welcomed the progress that is being made with this. In terms of the development of the third sector strategy there is a terms of reference at the moment of potential membership. JG thought it would be important that Awyr Las had a volunteering representative somewhere on that group. This would be brought up outside of the meeting. JH commented that trade unions needed to be consulted and considered in the “use of space document”.</p>	<p>KT / JG</p>
<p>CF22/19 Summary of expenditure Approvals – Tim Woodhead</p> <p>CF22.19.1 The group took this items as read and had no questions in relation this this</p>	
<p>CF22/20 Review Actions – Hayley Powell</p> <p>CF22.20.1 Actions are provided in a separate action log to the committee members and updated from today’s meeting.</p> <p>CF22/21 Issues of Significance to Report to the Health Board</p>	

<p>NO issues of significance were raised. All points have been included in the Chair's Report. X:\2022\Charitable Funds Committee\March 2022\Chair's Assurance Report CFC March for May 2022.docx</p> <p>CF22/22 Review of risks highlighted within the meeting The Charity's risks were discussed in 22/12</p> <p>CF22/23 Review of meeting Effectiveness</p> <p>CF22.23.1 LT commented that the meeting was very effective and well chaired and even though it overrun slightly this was because there were a lot of important issues to discuss</p>	
<p>CF21/24 Date and time of next meeting: Date of next Trustee meeting: 19th January, 2023, time TBC Date of next CFC meeting: 1st July 2022, 9:30 – 12:00</p>	