

Charitable Funds Committee

Wed 07 January 2026, 09:30 - 12:30

Microsoft Teams



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Agenda

1. PRELIMINARY MATTERS

CFC 20260107 Agenda - Approved .pdf (3 pages)

1.1. Welcome and Introductions

Oral *Chair*

1.2. Apologies for Absence

Oral *Chair*

1.3. Declarations of Interest

Oral *Chair*

1.4. Draft Minutes of the last Meeting held on 30th September 2025

Attached *Chair*

CFC 20260107 1.4 20250930 Committee Minutes - Draft.pdf (11 pages)

1.5. Committee Action Log

Attached *Chair*

CFC 20260107 1.5 Committee Action Log.pdf (5 pages)

2. ITEMS FOR APPROVAL/RATIFICATION/DECISION

2.1. Finance & Performance Report

Attached *Head of Financial Services and Accounting*

CFC 20260107 2.1 Finance Performance Report.pdf (3 pages)

CFC 20260107 2.1 Finance Performance Report - Appendix 1.pdf (19 pages)

2.2. Final Accounts and Annual Report for Approval

Attached *Head of Financial Services and Accounting*

CFC 20260107 2.2 Final Annual Accounts Annual Report 2024-25.pdf (7 pages)

CFC 20260107 2.2 Final Accounts and Annual report - Appendix 1.pdf (42 pages)

CFC 20260107 2.2 Final Accounts and Annual report - Appendix 2.pdf (21 pages)

2.3. Annual Accounts Representation Letter 2024/25

Attached *Head of Financial Services and Accounting*

CFC 20260107 2.3 Annual Accounts Representation Letter 2024-25.pdf (3 pages)

CFC 20260207 2.3 Letter of Representation 2024-25 - Appendix 1.pdf (3 pages)

2.4. Charitable Funds 2024/25 Accounts ISA 260 Report

Attached *Audit Wales*

 CFC 20260107 2.4 Charitable Funds Audit of Accounts Final ISA 260.pdf (28 pages)









2.5. Funds Available to the Committee

Attached *Head of Financial Services and Accounting*

 CFC 20260107 2.5 Funds Available to the Committee.pdf (5 pages)

2.6. Consideration of Bids/Small Grants

Attached *Head of Financial Services and Accounting*

-  CFC 20260107 2.6 Consideration of Bids and Small Grants.pdf (7 pages)
-  CFC 20260107 2.6 SGS-033 Integrated Autism Service - Appendix 1.pdf (4 pages)
-  CFC 20260107 2.6 SGS-034 Deaf Blind BSL Training - Appendix 2.pdf (5 pages)
-  CFC 20260107 2.6 SGS-035 Maternity Recliner Chairs x4 - Appendix 3.pdf (5 pages)
-  CFC 20260107 2.6 Appendix 3.1 - SGS-035 Bid Quotation.pdf (1 pages)
-  CFC 20260107 2.6 CFC-281 Tissue Viability - Appendix 4.pdf (6 pages)
-  CFC 20260107 2.6 CFC-279 SUS-Speaking Up Safely - Appendix 5.pdf (10 pages)
-  CFC 20260107 2.6 CFC-280 Staff Recognition Awards 2026 - Appendix 6.pdf (4 pages)

2.7. Administration Charge 25/26

Attached *Head of Financial Services and Accounting*

 CFC 20260107 2.7 Administration Costs 2025-26.pdf (8 pages)




3. ITEMS FOR DISCUSSION

3.1. Legislation Changes

Oral *Assistant Finance Director*

3.2. 1) Priority plan for growing the charity and promoting the benefits. 2) Benchmarking with other NHS Wales Charites

Attached *Assistant Finance Director*

-  CFC 20260107 3.2 part 1 Priority Plan for Growing the Charity Report.pdf (5 pages)
-  CFC 20260107 3.2 Part 1 Growing the Charity - Appendix 1.pdf (18 pages)
-  CFC 20260107 3.2 Part 2 Benchmarking with other NHS Wales Charities.pdf (11 pages)

3.3. Review of Investment Composition and Performance (Churches Charity Local Authority) (CCLA)

Attached *CCLA Client Director*







 CFC 20260107 3.3 Review of Investment Composition and Performance.pdf (54 pages)

3.4. Attendance of Current CFC Fund Holders for Slow Moving Funds

Attached *Assistant Finance Director*

- Account F306 RGH VASCULAR LABORATORY

- Gastroenterology Account F831 - Detailed plan with costings

-  CFC 20260107 3.4 Fundholders Presentation of Spending Plans for Slow moving Funds.pdf (4 pages)
-  CFC 20260107 3.4 Over 25k Report F306 - Vascular Fund - Appendix A.pdf (2 pages)
-  CFC 20260107 3.4 Over 25k Report F831 - Legacy Gastroenterology - Appendix B.pdf (3 pages)
-  CFC 20260107 3.4 Appendix B.1 - F831 Clicker Flicker PPD Template Dec 2023.pdf (4 pages)
-  CFC 20260107 3.4 Appendix B.2 F831 MDC BREAKDOWN COSTING SHEET.pdf (2 pages)
-  CFC 20260107 3.4 Appendix B.3 - F831 Q-05568561_ABUHB_23-Sep-2025_ULS Sales UKI.pdf (8 pages)

4. ITEMS FOR INFORMATION

4.1. Development of Committee Annual Programme of Business 2025/26

Attached *Director of Corporate Governance*

 CFC 20260107 4.1 Review of Committee Forward Work Plan 2025-26.pdf (4 pages)

 CFC 20260107 4.1 Appendix 1 - Forward Work Plan 2025-2026 (002).pdf (7 pages)

4.2. 2026/27 Committee Dates

Oral *Director of Corporate Governance*

5. OTHER MATTERS

5.1. Items to be Brought to the Attention of the Board and Other Committees

Oral *Chair*

5.2. Any Other Urgent Business

Oral *Chair*

5.3. Date of the Next Meeting: 18th March 2026

AGENDA

Date and Time	Wednesday 7th January 2026, 09:30AM-12:30PM
Venue	Microsoft Teams

Item	Title	Format	Presenter
1	PRELIMINARY MATTERS		
1.1	Welcome and Introductions	Oral	Chair
1.2	Apologies for Absence	Oral	Chair
1.3	Declarations of Interest	Oral	Chair
1.4	Draft Minutes of the last Meeting held on 30th September 2025	Attached	Chair
1.5	Committee Action Log	Attached	Chair
2	ITEMS FOR APPROVAL/RATIFICATION/DECISION		
2.1	Finance & Performance Report	Attached	Head of Financial Services and Accounting
2.2	Final Accounts and Annual report for approval	Attached	Head of Financial Services and Accounting
2.3	Annual Accounts Representation Letter 2024/25	Attached	Head of Financial Services and Accounting
2.4	Charitable Funds 2024/25 Accounts ISA 260 report	Attached	Audit Wales
2.5	Funds Available to the Committee	Attached	Head of Financial Services and Accounting
2.6	Consideration of Bids/Small Grants <ul style="list-style-type: none"> To include clearer breakdown of CFC-279 by financial year and further information on the impact and affordability of the proposal 	Attached	Head of Financial Services and Accounting
2.7	Administration Charge 25/26	Attached	Head of Financial Services and Accounting



3 ITEMS FOR DISCUSSION			
3.1	Legislation Changes	Oral	Assistant Finance Director
3.2	1) Priority plan for growing the charity and promoting the benefits. 2) Benchmarking with other NHS Wales Charities	Attached	Assistant Finance Director
3.3	Review of Investment Composition and Performance (Churches Charity Local Authority) (CCLA) <ul style="list-style-type: none"> To include Briefing report on transition 	Attached	CCLA Client Director
3.4	Attendance of Current CFC Fund Holders for Slow Moving Funds <ul style="list-style-type: none"> Account F306 RGH VASCULAR LABORATORY Gastroenterology Account F831 - Detailed plan with costings 	Attached	Assistant Finance Director
4 ITEMS FOR INFORMATION			
4.1	Development of Committee Annual Programme of Business 2025/26	Attached	Director of Corporate Governance
4.2	2026/27 Committee Dates	Oral	Director of Corporate Governance
5 OTHER MATTERS			
5.1	Items to be Brought to the Attention of the Board and Other Committees	Oral	Chair
5.2	Any Other Urgent Business	Oral	Chair
5.3	Date of the Next Meeting: <ul style="list-style-type: none"> 18th March 2026 		

Motion to Exclude Members of the Public and the Press



There may be circumstances where it would not be in the public interest to discuss a matter in public. In such cases the Chair shall move the following motion to exclude members of the public and the press from the meeting:

“Representatives of the press and other members of the public shall be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest”.

Motion under Section 1(2) Public Bodies (Admission to Meetings) Act 1960



DATE OF MEETING	Tuesday 30th September 2025 at 09:30-12:30
VENUE	Microsoft Teams

PRESENT	Paul Deneen, Independent Member (Chair) Neil Patrick, Independent Member (Vice Chair) Robert Holcombe, Director of Finance and Procurement Nicola Prygodzicz, Chief Executive
IN ATTENDANCE	Gareth Lewis, Head of Financial Services & Accounting Alison Griffiths, Charitable Funds Manager Robert Jones, Assistant Director of Finance Julie Rees, Audit Wales (Items 3.5 only) Matthew Argyle, Audit Wales (Items 3.5 only) Sarah Wilson, Directorate Manager for Gastroenterology (Item 3.6 only) Naomi Murtagh, Board Business Manager Fern Woodhead, Governance Support Officer
OBSVERING	None
APOLOGIES	Akmal Hanuk, Independent Member Rani Dash, Director of Corporate Governance

CFC/3009/01	Welcome and Introductions Paul Deneen (PD), Chair, welcomed everyone to the meeting.
CFC/3009/02	Apologies for Absence Paul Deneen (PD), Chair, noted the apologies for absence.
CFC/3009/03	Declarations of Interest There were no declarations of interest to record.
CFC/3009/04	Draft Minutes of the meeting held on 4th June 2025 The minutes of the previous meeting held on 4 th June 2025 were agreed as a true and accurate record.



	<p>The Committee APPROVED the minutes from the previous meeting.</p>
<p>CFC/3009/05</p>	<p>Committee Action Log</p> <p>The Committee received the action log and was content with progress made on the completed actions.</p> <p>The Committee NOTED the report for information.</p>
<p>CFC/3009/06</p>	<p>Finance & Performance Report</p> <p>Robert Jones (RJ), Assistant Director of Finance, provided the Committee with an overview of the Finance & Performance Report for Quarter 1 from April to June 2025, this quarter's report introduced a new, more accessible format, which was positively received by the Committee for its clarity and strategic focus.</p> <p>During the discussion, it was noted that both expenditure and income for the quarter were significantly lower than the same period in the previous year, with expenditure down by 37% and income down by 48%. The reduction was attributed mainly to fewer grants being received. Despite these decreases, the overall fund size remained steady, and the CCLA investment showed an unrealised gain of £10K at the end of June, which had increased to £38K by the end of August.</p> <p>The Committee was advised that the CCLA investment had been acquired by Jupiter, the Finance Team would be undertaking a due diligence to ensure the continued suitability of this relationship. The Committee agreed that a briefing paper on the transition would be brought to the next Committee in January. Action: Assistant Director of Finance</p> <p>The Committee commended the new reporting style for its clarity and usefulness in supporting strategic planning. It was agreed for the report to be shared with the Executive Committee to enhance understanding of the charity's financial position and activities. Action: Assistant Director of Finance/ Director of Finance and Procurement</p>



	<p>The Committee approved the opening of the following 5 new funds:-</p> <ul style="list-style-type: none"> • SGS 012/013/019/020 Mental Health Conferences/Wellbeing Schemes • CFC-274 Decarbonisation Project • CFC-275 Patient & Family Inclusion Officer • CFC-276 Volunteer Co-ordinators • CFC-278 Language & Interpretation Services <p>The Committee NOTED the report and APPROVED the opening of 5 new funds.</p>
CFC/3009/07	<p>Funds available to the Committee</p> <p>Gareth Lewis (GL), Head of Financial Services & Accounting, provided the Committee with an overview of the funds available at 31 August 2025, advising the report provided an update on the current balance of general purpose funds, as well as recent transactions and commitments.</p> <p>The Committee was advised that as of the reporting date, the charity had £56.6K available to allocate. This figure reflected the release of a £2.5K commitment previously set aside for the Pride Staff Network, which had since been incorporated into a broader request covering all Staff Networks.</p> <p>GL outlined the relevant transactions and commitments, and confirmed that the available funds were sufficient in supporting the small grant scheme applications and other requests under consideration. The Committee acknowledged the importance of monitoring available balances and ensuring that commitments were accurately reflected in the reported figures.</p> <p>The Committee NOTED the funds available.</p>
CFC/3009/08	<p>Consideration of Bids/Small Grants</p> <p>Gareth Lewis (GL), Head of Financial Services & Accounting, provided the Committee with an overview of</p>



small grant and bid requests, outlining that a total of 7 requests had been received, 6 small grants and 1 general bid exceeding £5K.

The Committee was advised that the Executive Committee had reviewed the small grant applications, 5 received full support and the grant relating to the Military Wives Choir, was not supported as a standalone bid. Instead, it was agreed that this could be incorporated into another grant (SGS 027), which provided £1K to each staff network, including the Veterans Network. The Veterans Network would therefore have the flexibility to allocate part of its funding to the choir.

The Committee discussed the need for flexibility in supporting one-off events, such as the Military Wives Choir, while maintaining fairness across all networks. It was agreed that the Veterans Network would have discretion over how to use its allocation, including the option to support the choir.

The total value of the 5 supported small grant applications was confirmed as £25.8K. The Committee noted that sufficient funds were available to support these requests, with the current balance available funds standing at £56.6K.

In addition to the small grants, the Committee considered a substantial bid (CFC 279) for £204K, to be distributed over 3 years. It was noted that the Committee did not have sufficient uncommitted funds to support the full bid at this time. The Committee requested a clearer breakdown of the bid by financial year and further information on the impact and affordability of the proposal, to be brought to the next Committee meeting in January.

Action: Head of Financial Services & Accounting

The Committee **APPROVED** 5 of the small grants application.



Legislation Changes

Robert Jones (RJ), Assistant Director of Finance, provided the Committee with an update on forthcoming changes to the Charities Statement of Recommended Practice (SORP), which were expected to take effect from 1 January 2026 following the closure of the consultation in June 2025.

The Committee was advised that the revised SORP would introduce a three-tier classification system for charities, based on the value of funds held. The Health Boards Charitable Funds was expected to fall under Tier 2, which applied to charities holding more than £500K but less than £15M. This tier would require enhanced narrative reporting but would exclude some disclosures, such as the cash flow statement.

The Committee was assured that the finance team were well prepared for these changes and that many of the recommended actions had already been adopted in the charity's annual reporting.

During the discussion, it was clarified that the changes were national and would apply to all charities, both inside and outside the public sector. The Committee noted the update and assured that the necessary preparations were in place to ensure compliance with the new requirements.

The Committee **NOTED** the changes to SORP 2026.

Options appraisal for growing the charity and promoting the benefits

Robert Jones (RJ), Assistant Director of Finance, provided the Committee with overview on the options for growing the charity and promoting its benefits. RJ advised that the report included benchmarking data comparing the Health Boards Charitable Funds with other NHS charities, as well as a range of potential strategies for increasing income and raising the charity's profile.



The Committee noted that the Health Boards Charitable Funds was in a stable financial position compared to other NHS charities in Wales. Of the 9 NHS charities, 5 had significant fundraising costs, 2 had no associated costs, and 2 including Aneurin Bevan had costs under £20K. The average fundraising cost for the 5 charities with fundraising teams over 3 years were £435k. The Committee recognised that while some charities had invested heavily in fundraising, there was a trend towards reducing such expenditure due to the limited return on investment.

The Committee agreed that, although the charity was stable, there were scope to increase income through low-cost, incremental changes rather than large-scale investment in fundraising infrastructure. Suggestions included making better use of the annual report and communications channels, developing a marketing strategy and including a new logo, exploring partnerships with local businesses and community groups. The Committee also discussed the potential for a staff lottery, drawing on positive experiences from other Health Boards, and the use of patient stories and awards to promote the charity's impact.

The Committee considered the proposal to produce a magazine in partnership with an external company, which would use content from the annual report and be distributed in outpatient departments and online. The magazine would be funded by the initial £1K as well as through advertising. The charity would retain editorial control as well as agree type of advertising included. The Committee welcomed the idea in principle, subject to further due diligence and legal review of the contract.

The Committee agreed that the Finance Team would conduct a feasibility review of the various options presented, including benchmarking with other NHS Wales charities, and present a prioritised plan for further



	<p>discussion at January's meeting. Action: Assistant Director of Finance/Finance Team</p>
<p>CFC/3009/11</p>	<p>The Committee NOTED the report.</p> <p>Spending Plans over £25K</p> <p>Gareth Lewis (GL), Head of Financial Services & Accounting, provided the Committee with an overview of the status of the charitable funds with balances exceeding £25K. GL advised that there were 37 funds currently holding balances above this threshold as at 31 August 2025, representing 10% of the total number of funds and 40% of the total value held by the charity.</p> <p>The Committee was advised that the total value of funds over £25K had decreased by a third since fund monitoring was introduced, reflecting increased expenditure in this period. Of these 37 funds, 13 were restricted legacy funds totalling £611K, and 24 were unrestricted funds totalling £1.343K.</p> <p>The Committee discussed the use of the traffic light system to indicate the status of each fund. Most funds were marked green, indicating regular and appropriate expenditure, while a small number were marked amber or red, indicating slow or no movement.</p> <p>The Committee agreed that fund holders of slow-moving funds should be prompted to provide spending plans, and where necessary, be invited to attend future meetings to discuss their plans and encourage appropriate use of the funds.</p> <p>The Committee discussed the need to clarify the rules around legacy and restricted funds, and to ensure that income generated from activities such as training were being allocated appropriately, either to charitable funds or to the Health Board's income, as appropriate. The Committee agreed for the Finance Team to review the current practice and provide recommendations at a future</p>



	<p>meeting. Action: Head of Financial Services & Accounting/Finance Team</p>
<p>CFC/3009/12</p>	<p>The Committee NOTED the report.</p> <p>Draft Accounts and Annual report</p> <p>Gareth Lewis (GL), Head of Financial Services & Accounting, provided the Committee with an overview of the draft Annual Accounts and Annual Report for the year ending 31 March 2025, highlighting the main themes and key issues contained within the accounts.</p> <p>The Committee was advised that the 2024/25 financial year saw an increase in expenditure alongside a reduction in income, resulting in a net decrease in total funds of £880K for the year. The total funds carried forward at the end of the financial year stood at £4.956K.</p> <p>The Committee noted that the Annual Accounts and Annual Report had been shared with Audit Wales, with the main audit scheduled to begin at the start of November. Once the audit was complete, the final accounts and report would be presented to the Board for approval at the January’s meeting, and subsequently filed with the Charity Commission before the 31 January 2026 deadline.</p> <p>The Committee expressed their appreciation for the comprehensive nature of the report, particularly the sections highlighting the achievements of the charity, the impact on staff and patients, and the contributions of volunteers.</p> <p>The Committee thanked the Finance Team for their work in preparing the annual report and for clearly demonstrating the charity’s achievements over the year.</p>



The Committee was informed that there were no significant issues raised by Audit Wales at this stage, and the Committee was advised that the audit process was on track for timely completion. The Committee noted the report and agreed to await the outcome of the audit before final approval and submission.

The Committee **NOTED** the report.

CFC/3009/13

Audit Wales Progress Update

Julie Rees (JR), Audit Wales, provided the Committee with an update on the progress of the Audit Wales review of the Aneurin Bevan University Health Board Charitable Fund and related charities, outlining the key areas of focus for the current audit cycle.

It was confirmed that the draft Annual Accounts and Annual Report had been submitted to Audit Wales, and the main audit was scheduled to commence at the start of November. The audit plan highlighted several areas of focus, including the valuation of investment assets, the sale of a material asset post-balance sheet date, related party disclosures, and the accounting for grant income.

The Committee was informed that the materiality threshold for the audit would be £54K, based on 1% of gross assets, and that a lower threshold would be applied for related party transactions.

Audit Wales reported that the timetable for the audit was on track, with the intention to complete the majority of the work before the end of December and to report back in early January. The Committee was reassured that no significant issues had been identified at this stage.

The Committee expressed their appreciation for the support provided by Audit Wales and noted the importance of timely completion to ensure compliance with Charity Commission deadlines. The Committee thanked Audit



	<p>Wales for their continued engagement and clear communication throughout the process.</p> <p>The Committee NOTED the update.</p>
<p>CFC/3009/14</p>	<p>Attendance of Current CFC Fund Holders for Slow Moving Funds</p> <p>Robert Jones (RJ), Assistant Director of Finance, provided an update on the monitoring of fund balances, with a focus on those identified as static or slow moving, with 1 slow moving funds account F831 Legacy Gastroenterology Fellowship being reviewed.</p> <p>Sarah Wilson (SW), Directorate Manager for Gastroenterology, advised the Committee that the account balance was £101,908.88, which was left as a legacy specifically for the Brian Calcraft Memorial Fund, supporting Endoscopy and Gastroenterology.</p> <p>The Committee was advised of the current and future plans for the fund. Although the original intention had been to support a fellowship, this had not come to fruition. The directorate was actively promoting the fund to support training initiatives, subsidise national programmes, and purchase equipment, including ultrasound scanners and a critical flicker device for hepatology patients. The refurbishment of rooms designated for breaking bad news and pre-admission consultations was also discussed.</p> <p>The Committee was supportive of the proposals and requested a detailed plan with costings to ensure the funds were used in line with its intended purpose. Action: Charitable Funds Manager</p> <p>The Committee agreed that fund holders should be prompted to provide clear spending plans, and that where funds remain unspent for extended periods without good reason, consideration should be given to reallocating them in accordance with Charity Commission guidance. The Finance Team were asked to continue to monitor slow moving funds, supporting fund holders in developing spending plans, and report the progress at a future meeting. Action: Finance Team</p>



	<p>The Committee thanked SW and the Finance Team for their contributions and reaffirmed the importance of ensuring charitable funds were used effectively and in a timely manner.</p> <p>The Committee agreed for the account F306 RGH VASCULAR LABORATORY spending plans review to be deferred to the next Committee meeting in January. Action: Charitable Funds Manager</p> <p>The Committee APPROVED the requests and NOTED the spending plans.</p>
CFC/3009/15	<p>Review of Committee Programme of Business</p> <p>The review of Committee Programme of Business was provided to the Committee for information.</p>
CFC/3009/16	<p>Items to be Brought to the Attention of the Board and Other Committees</p> <p>Paul Deneen (PD), Chair, summarised that the following key topics should be reported to the Board:</p> <ul style="list-style-type: none"> • The Committee’s ongoing work on strategic direction, including the development of a policy for the release of funds and the exploration of future funding opportunities. • Progress on the charity’s logo and marketing strategy, which had been discussed as part of the options appraisal for growing the charity and promoting its benefits. • Approval of the draft accounts and annual report, and that the Audit Wales plan was on target for completion.
CFC/3009/17	<p>Any Other Urgent Business</p> <p>There was not any other urgent business.</p>
CFC/3009/18	<p>Date of Next Meeting</p> <p>Wednesday 7th January 2025</p>





Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

**CYFARFOD BWRDD IECHYD PRIFYSGOLN ANEURIN
BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD
MEETING**

Outstanding	Overdue: In Progress	Not Due	Completed	Transferred to another Committee
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Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
September 2025	CFC/3009/06	<p>Finance and Performance Report</p> <p>The Committee agreed that a briefing paper on transition would be brought to the next Committee in January.</p>	Assistant Director of Finance	January 2026	<p>Completed</p> <p><u>October Update</u> Briefing paper on transition has been added to the Committee forward work plan.</p> <p><u>December Update</u> CCLA – Attending January meeting and will present as part of briefing</p>
September 2025	CFC/3009/06	<p>Finance and Performance Report</p> <p>It was agreed for the report to be shared with the Executive Committee to enhance understanding of</p>	Assistant Director of Finance/ Director of Finance and Procurement	January 2026	<p>Completed</p> <p><u>December Update</u> ADOF Presented to Executive Committee in November</p>



Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
		the charity's financial position and activities.			
September 2025	CFC/3009/08	<p>Consideration of Bids/Small Grants</p> <p>A clearer breakdown of the bid by financial year and further information on the impact and affordability of the proposal, to be brought to the next Committee meeting in January.</p>	Head of Financial Services & Accounting	January 2026	<p>Completed</p> <p><u>October update</u> Action has been included in the Committee forward work plan.</p> <p><u>December update</u> Bid CFC-279 to be presented to Committee in January 2026</p>
September 2025	CFC/3009/10	<p>Options appraisal for growing the charity and promoting the benefits</p> <p>The Finance Team to conduct a feasibility review of the various options presented, including benchmarking with other NHS Wales charities, and</p>	Assistant Director of Finance/Finance Team	January 2026	<p>Completed</p> <p><u>October</u> Action has been included in the Committee forward work plan.</p> <p><u>December update</u> Included on in the January 2026 Agenda.</p>



Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
		bring back a prioritised plan for further discussion at January's meeting.			
September 2025	CFC/3009/11	<p>Spending Plans over £25K</p> <p>The Finance Team to review the current practice and provide recommendations at a future meeting.</p>	Head of Financial Services & Accounting/Finance Team	March 2026	<p>In Progress</p> <p><u>October update</u> Action has been included in the Committee forward work plan.</p> <p><u>December update</u> Process under review – to be presented at next CFC Meeting - March 2026 <i>(also to include proforma template for those presenting at CFC)</i></p>
September 2025	CFC/3009/14	<p>Attendance of Current CFC Fund Holders for Slow Moving Funds</p> <p>A detailed plan with costings to ensure the fund were</p>	Charitable Funds Manager	January 2026	<p>Completed</p> <p><u>October</u> Action has been included in the Committee forward work plan.</p>



Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
		used in line with its intended purpose for account F831.			<u>December update</u> Included on in the January 2026 Agenda.
September 2025	CFC/3009/14	Attendance of Current CFC Fund Holders for Slow Moving Funds The Finance Team to continue to monitor slow moving funds, supporting fund holders in developing spending plans, and report the progress at a future meeting.	Finance Team	March 2026	Completed <u>October update</u> Action has been included in the Committee forward work plan. <u>December update</u> Bi-annual agenda item. Next update to be presented to Committee in March 2026
September 2025	CFC/3009/14	Attendance of Current CFC Fund Holders for Slow Moving Funds Account F306 RGH VASCULAR	Charitable Funds Manager/Governance Support Officer.	January 2026	Completed <u>October update</u> Action has been included in the Committee forward work plan.



Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
		LABORATORY spending plans review to be deferred to the next Committee meeting in January.			<u>December update</u> Included on in the January 2026 Agenda.

*All actions in this log are currently active and are either part of the Committee's forward work programme or require more immediate attention, such as an update on the action or confirmation that the item scheduled for the next Committee meeting will be ready.
Once the Committee is assured that an action is complete, it will be removed. This will be agreed at each Committee meeting.*





**CYFARFOD BWRDD IECHYD PRIFYSGOLN
ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD
COMMITTEE MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 January 2026
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Financial Report for Quarter 2, Period Ending 30 September 2025
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Robert Holcombe, Director of Finance, Procurement and Value Based Healthcare
SWYDDOG ADRODD: REPORTING OFFICER:	Gareth Lewis, Head of Financial Services & Accounting

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

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

This report updates the committee on a range of financial issues, including the following items, that were agreed as part of the annual work plan:

- Financial update including investment valuation.
- Report on significant donations
- Overdrawn accounts
- Key Performance Indicators (KPI's)
- New fund requests
- Update on cash balances

The key findings for quarter 2 (July to September 2025) are as follows:

- Expenditure is 78% higher than the same quarter in 2024/25.
- Income is 85% higher than the same quarter in 2024/25.
- The CCLA investment reflected an unrealised loss of £27k in quarter, a swing from the previous quarter of an unrealised gain of £10k.
- At 30th November 2025, the investments showed a year-to-date gain of £34k).
- Funds held at the end of the 2nd Quarter are 16% lower than the same quarter in 24/25.

Cefndir / Background

This report provides a financial update for the Charitable Funds Committee for Quarter 2, the period from 1 July 2025 to 30 September 2025.

Asesiad / Assessment

The full financial analysis update is provided in Appendix 1.

Argymhelliad / Recommendation

The Charitable Funds Committee is asked to note this report and provide approval for the new funds that have been requested.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	The monitoring and reporting of committee business is a key element of the Health Boards assurance framework
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability Choose an item. Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Choose an item. Choose an item.
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Governance
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Improve the wellbeing and engagement of our staff Choose an item. Choose an item.

Gwybodaeth Ychwanegol:

Further Information:

Ar sail tystiolaeth: Evidence Base:	N/A
--	-----

Rhestr Termau: Glossary of Terms:	KPIs – Key Performance Indicators
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	N/A

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Resource Assessment:	
• Workforce	Not Applicable
• Service Activity & Performance	Yes, outlined within the paper
• Financial	Yes, outlined within the paper
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	No does not meet requirements An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk
Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working https://futuregenerations.wales/about-us/future-generations-act/	Integration - Considering how the public body's well-being objectives may impact upon each of the well-being goals, on their objectives, or on the objectives of other public bodies Choose an item.



Aneurin Bevan Health Charity Finance & Performance Report

Quarter 2 - 01 July to 30 September 2025



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board



Summary



The following information is presented in this report:

<p>Balance Sheet</p> <p><i>Funds Reduced by 4.83%</i> <i>↓ £239k to £4.7m in Q2</i></p>	<p>Statement of Financial Activities</p> <p><i>Unrealised Loss of £27k on Investments in Q2</i></p>	<p>Income</p> <p><i>£380k in Q2</i> <i>85% Higher than Q2-24/25</i></p>	<p>Expenditure</p> <p><i>£592k In Q2</i> <i>78% Higher than Q2-24/25</i></p>
<p>Cashflow</p> <p><i>↓ £247k since Q1</i> <i>£219k forecast closing for 25/26</i></p>	<p>New Fund Requests</p> <p><i>6 Requests</i></p>	<p>Fund Sizes</p> <p><i>398 Funds</i> <i>61% of £4.7m held in 41 funds</i></p>	<p>Overdrawn Account</p> <p><i>2 Accounts</i></p>
	<p>Events After Reporting Period</p> <p><i>£34k Unrealised Gain on CCLA to Nov-26</i> <i>£22k legacies received</i></p>	<p>NHS Charities Together</p> <p><i>£300k funding "Canopi" project</i> <i>Strategy change to growing sector</i></p>	

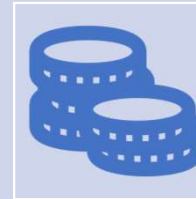


Balance Sheet

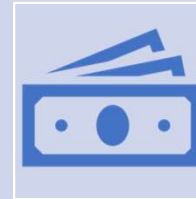


During the quarter, the Charitable Funds have reduced by 4.83%

	31-Mar-25	30-Jun-25	30-Sep-25	Movement in Qtr
	£	£	£	£
Fixed Assets				
13 Clytha Square	187,000	0	0	0
Oakdale 1M Strip of Land	55,000	55,000	55,000	0
Painting - The Domestic Chaplain	25,000	25,000	25,000	0
Other Assets				
CCLA Investments	4,419,294	4,429,239	4,402,299	-26,940
Cash	517,383	534,403	283,595	-250,808
Debtors	235,553	116,222	264,137	147,915
Creditors	-483,398	-210,598	-319,906	-109,308
Total Net Assets	4,955,832	4,949,266	4,710,124	-239,142
of which				
Restricted Funds	966,286	1,030,224	987,120	-43,104
Unrestricted Funds	3,989,546	3,919,043	3,723,005	-196,038



CCLA investment reflect an unrealised loss of £27k during the quarter reflecting continued underperformance against the market driven by AI related holdings.



£987k of funds are currently restricted (Legacies and Grants) reflecting 21% of total funds held.



Statement of Financial Activities



Funds have decreased by £239k, driven by expenditure exceeding income

	31-Mar-25	30-Jun-25	30-Sep-25	Movement in Qtr
	£000's	£000's	£000's	£000's
Income				
Donations	168	51	251	200
Legacies	10	0	0	0
Grants	235	140	246	106
Investment Income	189	43	84	41
Other Income	205	36	69	33
Total Income	807	270	650	380
Expenditure	1,394	283	875	592
Gains/(Losses) on investment assets	-221	6	-21	-27
Surplus/(Deficit)	-808	-7	-246	-239

Income for the quarter is £380k higher than last quarter following a significant donation of £71k

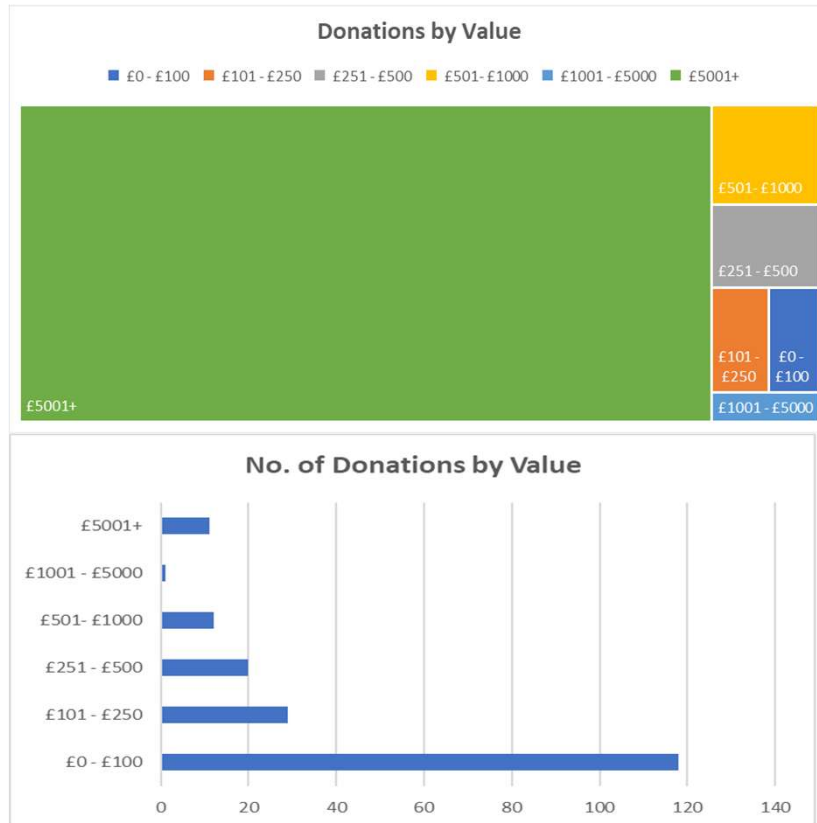
Expenditure for the quarter is £592k higher than last quarter driven by a significant increase in equipment purchases



Income



Donations totalling £200k were received in the quarter



The following table shows significant donations (over £1k) received in the quarter

Fund Ref	Received From	Amount £	Location
Jul-25 F804-GUH B2 ACUTE CARDIAC UNIT ACU F400-RGH RLG UROLOGY FUND	BE HEART HAPPY R JONES & L MAIDMENT	71,295.00 2,500.00	ABUHB RGH
Aug-25 F231-ABUHB DINKY DRAGONS	JUST GIVING	2,130.46 2,130.46	ABUHB
Sep-25 F477-ABUHB PHARMACY F231-ABUHB DINKY DRAGONS	IQVIA LTD JUST GIVING	1,611.00 1,399.54	ABUHB ABUHB
Overall Total		78,936.00	

62% of donations relate to donations under £100.
6% of donations are over £5k.

A donation of £71k was received from the Be Heart Happy Charity (external) and has been used to fund the purchase of a new ECG machines



Income



Grant Income of £106k represents the final grant instalment for the Meaningful Activities Project

Other Income of £33k was received, mainly through training courses whose fee is charged through the Charity

Training & Course Fees Income

- Postgraduate courses received training income totalling £5.8k in the quarter
- Maternity/Obstetrics & Gynaecology Service received £5k in relation to various courses.
- There were several Sexual Health Study Days arranged in the quarter, which generated over £9.8k in income.



Income – In Pictures

Donation for Breast Unit



The Breast Unit has gratefully received a £250 donation from local group Crafting for Charities. The group raised the funds through the sale of their handmade creations and chose to support the unit with the proceeds.

Natalie North, Breast Unit Support Manager said: “We are grateful for the kindness shown by local group Crafting for Charities, for donating the profits from their beautiful creations to benefit patients of the Breast Unit.”



Income - CCLA Investment



Investments reflected an unrealised loss of £27k in the quarter

Portfolio summary

	Opening value (£)	Purchases (£)	Sales (£)	Income retained (£)	Capital returns (£)	Closing value (£)
Long-term portfolio						
Ethical Investment	3,612,636	-	-	-	(28,248)	3,584,388
Property	816,603	-	-	-	1,308	817,911
Total Long-term portfolio	4,429,239	-	-	-	(26,940)	4,402,299
Total portfolio	4,429,239	-	-	-	(26,940)	4,402,299

Income earned during the quarter

COIF Charity Funds	Distribution per income unit	Payment date	Income payable (£)	
Ethical Investment	2.32p	28/11/2025	28,248.45	The payment is 5.5% more than the equivalent payment in 2024.
Property	1.39p	28/11/2025	10,696.18	The payment is unchanged from the equivalent payment in 2024.
	Total payable		38,944.63	

In Quarter 2, the Property Fund has an unrealised gain of £1k
However, the Ethical Fund has an unrealised loss of £28k in Quarter 2.

This is a swing from the previous quarter which showed an overall unrealised gain of £10k.

The Ethical Investment Fund is suffering from the poor performance of the share prices of some key stock holdings due to concerns that Artificial Intelligence will disrupt business.

Income earned during the quarter is £39k, which is consistent with the previous 2 quarters.



Income – In Statistics



Breakdown of how we receive our income

Breakdown of Income Received	Quarter 1 24/25		Quarter 1 25/26		Quarter 2 24/25		Quarter 2 25-26	
	£	%	£	%	£	%	£	%
Cheques	33,174	2%	17,218	4%	20,556	3%	14,647	6%
Cash	4,494	0%	6,219	1%	18,731	3%	4,425	2%
Direct into bank	1,374,089	97%	429,485	95%	639,509	94%	231,616	92%
Total	1,411,757	100%	452,922	100%	678,795	100%	250,688	100%

Cheques and cash relate to monies received at our sites and consists of donations and staff fundraising such as raffles.

Breakdown of Monies paid into Bank A/C	Quarter 1 24/25		Quarter 1 25/26		Quarter 2 24/25		Quarter 2 25-26	
	£	%	£	%	£	%	£	%
Donation Platforms - Just Giving/Much Loved etc	8,164	0.59%	7,227	1.68%	12,091	1.89%	7,706	3.33%
Donations	4,505	0.33%	24,082	5.61%	5,986	0.94%	77,683	33.54%
Legacies	0	0.00%	0	0.00%	0	0.00%	0	0.00%
Grants	0	0.00%	78,470	18.27%	0	0.00%	0	0.00%
Paid Invoices	54,748	3.98%	72,591	16.90%	23,246	3.63%	82,919	35.80%
Courses and Sponsorship	2,045	0.15%	6,911	1.61%	14,898	2.33%	19,399	8.38%
Interest & Dividends	49,790	3.62%	42,804	9.97%	47,311	7.40%	41,903	18.09%
Other/Monies rec'd in error	1,253,880	91.25%	11,531	2.68%	35,244	5.51%	0	0.00%
VAT Reclaim	958	0.07%	1,531	0.36%	733	0.11%	2,007	0.87%
Land Sale	0	0.00%	184,337	42.92%	0	0.00%	0	0.00%
Drawdown from CCLA Investments	0	0.00%	0	0.00%	500,000	78.19%	0	0.00%
Total	1,374,089	100.00%	429,485	100.00%	639,509	100.00%	231,616	100.00%

This is a breakdown of the monies that is paid directly into our bank account. Monies received in error relate to monies paid to the Charity instead of the main Health Board.



Expenditure



Expenditure for the quarter was £592k, benefitting patients and staff through the purchase of equipment, welfare and training.



Equipment - £338k was spent funding purchases of equipment. This includes a number of items funded by Nevill Hall League of Friends (£43k), 10 ECG Systems for Cardiology funded by Be Heart Happy (£71k), a Pintuition System for the Breast Unit in YYF (£66k), 3 Impella Cardiology Systems (£40K)



People - £177k was spent on training and wellbeing. This included staffing related to several projects (£63k), Staff Recognition Event funded by the Committee (£20k), Bursaries to support individuals to become qualified doctors (£45k)



Research costs totalled £40k and relates to a Thyroid Project.



Administration costs totalled £38k, 6% of the quarter's expenditure.



Expenditure

Thank You to the Charitable Funds Committee



"On behalf of the entire maternity team, we would like to extend our deepest gratitude for your generous financial support that enabled the purchase of 11 saturation monitors for our service.

This equipment plays a vital role in monitoring the oxygen levels of new-borns in our care, ensuring timely interventions and enhancing the safety and wellbeing of our most vulnerable patients. Your contribution directly supports our commitment to delivering high-quality, compassionate care to families during one of the most critical and precious moments of their lives.

The addition of these monitors has already made a meaningful impact on our clinical practice, and the reassurance they provide to both staff and parents is immeasurable. Your continued support empowers us to maintain the highest standards of maternity care and reflects the shared values we hold in prioritising the health of mothers and babies.

Thank you once again for your kindness and dedication to improving patient outcomes. We are truly grateful for your partnership."



Expenditure –in Statistics



Alongside the increase in expenditure, we have processed more payments in Quarter 2. There were less transfers processed than Quarter 1

EXPENDITURE	Quarter 1 2025-26	Quarter 2 2025-26	Total
Number of requisitions processed	223	224	447
Number of payments processed	158	183	341
Total value of payments processed	£153k	£326k	£479k
Average number of payments processed per month	53	61	114
Average value of each payment	£1k	£1.8k	£1.4k
Number of internal transfers to ABUHB	23	21	44
Total value of internal transfers to ABUHB	£272k	£96k	£368k
Number of transactions in transfers	86	71	157
Average value of each transfer transaction	£3.2k	£1.4k	£2.3k

Internal transfers relate to payments to the Health Board from the Charity and mainly relate to the recharge of salaries for our grants and bid projects.



Cashflow 1 of 2



Our Cashflow forecast for year-end remains a reduction; from £516k to £219k as we continue to fund expenditure on reduced income

A monthly cash flow forecast on the next slide presents actual figures for April to November and forecasted figures for the remaining period up to March 2026.


It should be noted that:

- CCLA interest & dividends are paid quarterly in arrears.
- The final instalments of grant income of £167k from NHS Charities Together in relation to two projects (F995 & F997) were paid in November.
- We received a legacy of £12k in October for Royal Gwent Hospital.
- The administration charge is usually paid at the end of the financial year in March, and this has been estimated based on last year at £180k.
- We have assumed a further release of £300k from CCLA investments, due to anticipated expenditure towards the end of the financial year.



Cashflow 2 of 2



 Bwrdd Iechyd Prifysgol Aneurin Bevan University Health Board	ACTUAL Apr-25 Mth 1	ACTUAL May-25 Mth 2	ACTUAL Jun-25 Mth 3	ACTUAL Jul-25 Mth 4	ACTUAL Aug-25 Mth 5	ACTUAL Sep-25 Mth 6	ACTUAL Oct-25 Mth 7	ACTUAL Nov-25 Mth 8	FORECAST Dec-25 Mth 9	FORECAST Jan-26 Mth 10	FORECAST Feb-26 Mth 11	FORECAST Mar-26 Mth 12	TOTAL 2025/26
BALANCE B/F	516,228	330,766	357,872	527,565	436,877	320,601	280,008	173,434	341,937	271,731	201,525	469,320	
INCOME													
DONATIONS INCOME	10,654	20,202	16,726	80,754	3,108	9,276	17,489	12,963	17,758	17,758	17,758	17,758	242,205
JUST GIVING INCOME	1,308	3,724	2,066	2,120	3,262	746	591	4,460	2,334	2,334	2,334	2,334	27,614
LEGACY INCOME							12,688	7,888					20,576
GRANT INCOME			78,470					166,564					245,034
INVOICE RECEIPTS	62,276	9,195	1,120	6,580	8,210	68,129	2,160	10,900	10,493	10,493	10,493	10,493	210,543
COURSE INCOME	2,880	1,040	2,401	3,635	11,584	4,180	1,165	1,370	2,535	2,535	2,535	2,535	38,394
OTHER INCOME		80	184,342			2,475		400			300,000		487,297
PAID TO CF IN ERROR	3,100		8,431	2,710		10	175						14,426
BANK INTEREST	1,599	1,441	1,203	1,533	1,699	1,187	900	821	1,733	1,733	1,733	1,733	17,314
VAT RECLAIMED		615	916	524	1,483		5,798		689	689	689	689	12,094
CCLA INTEREST & DIVIDENDS		38,561			37,484			38,945			38,000		152,989
TOTAL INCOME	81,817	74,858	295,675	97,855	66,829	86,003	40,966	244,311	35,543	35,543	373,543	35,543	1,468,485
EXPENDITURE													
FASTER PAYMENTS	58,500	24,334	70,633	91,445	170,652	63,804	119,469	43,404	64,476	64,476	64,476	64,476	900,146
TRANSFERS - PAYMENTS TO ABUHB	204,224	12,154	50,854	29,749	7,536	52,844	23,799	16,526	39,562	39,562	39,562	39,562	555,936
TRANSFERS - PAYMENTS TO ABUHB FOR ERRORS				2,710									2,710
PAYABLE ORDERS		170						88					258
OTHER	2,938	780	5,000	66,380		5,439		725				180,000	261,262
JUST GIVING	47	47	47	47	47	47	47	47	47	47	47	47	562
BANK CHARGES	30	26	28	29	28	28	28	27	28	28	28	28	337
G4S	1,540	2,050	2,410	1,180	5,940	3,515	1,355	9,945	1,634	1,634	1,634	1,634	34,472
TOTAL EXPENDITURE	267,279	39,561	128,972	191,540	184,204	125,677	144,697	70,762	105,748	105,748	105,748	285,748	1,755,684
<i>(Outstanding lodgements/Uncleared cheques)</i>		-8,190	2,989	2,997	1,098	-919	-2,844	-5,047					
NET INCOME/(EXPENDITURE)	-185,462	35,297	166,703	-93,684	-117,375	-39,674	-103,731	173,549	-70,206	-70,206	267,794	-250,206	-287,199
BALANCE C/F	330,766	357,872	527,565	436,877	320,601	280,008	173,434	341,937	271,731	201,525	469,320	219,114	-287,199



New Fund Requests

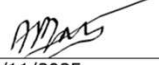
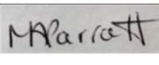


The Committee is asked to approve the following requests to open 6 new funds

The Charitable Funds Team wish to request the set up of the following 6 funds:

- LEGACY RGH M SULLIVAN (£12k)
- LEGACY OPHTHALMOLOGY E WRIGHT (£2k)
- LEGACY ABUHB M BAILEY (£8k)
- *EDI EQUALITY DIVERSITY & INCLUSION*– To manage the approved bid SGS-027
- *ABUHB STAFF RECOGNITION AWARDS* – To manage upcoming bid assuming successful

We have also received a request, shown on the right, to set up a fund for ABUHB Cancer Services.

Proposed Name of Account:	ABUHB Cancer Fund
Hospital:	Pan Gwent
Department/Ward:	Cancer Services
Purpose of Account:	To support the 6 domains of ABUHB cancer strategy 1: Cancer prevention 2: Early detection of cancer 3: Timely Diagnosis 4: Improved and standardised cancer care for everyone 5: Living with cancer/reducing the impact of cancer for patients. 6: Improve our knowledge of cancer through education and research.
1 st Account Signatory:	
Name:	Anne May
Designation:	Strategic Lead Cancer Nurse
Signed:	
Date:	12/11/2025
2 nd Account Signatory:	
Name	Margaret Parrott
Designation	Cancer Services Manager
Signed	
Date	18/11/2025





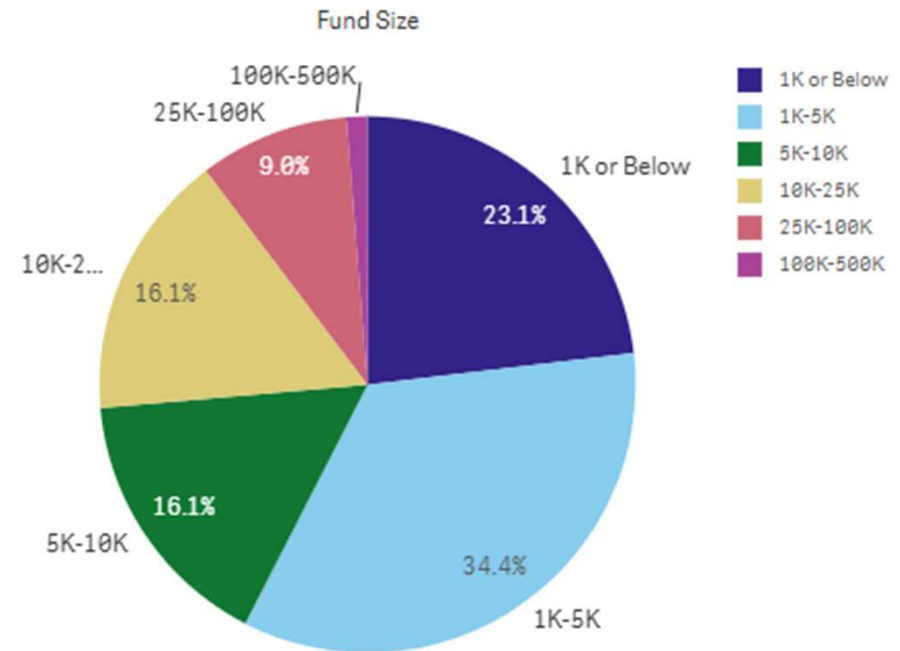
Fund Size Breakdown

398 Funds totalling £4.7M with 61% of funds held in just 41 funds

Fund Size	No. of Funds	Total Fund Value
1k or Below	92	(£22,651.36)
1k-5k	137	(£364,035.94)
5k-10k	64	(£451,363.06)
10k-25k	64	(£985,720.94)
25k-100k	36	(£1,628,870.15)
100k-500k	5	(£1,257,432.93)

Open Funds	Inactive Funds
398	0

Fund Size Breakdown



Matters to Note

Overdrawn Accounts



There are two overdrawn accounts as of 30 September 2025.

- F003 which is the holding account used for the interest and dividends and the administration charges, is overdrawn as the estimated admin charge is more than the estimated interest and dividends. The fund is likely to remain overdrawn until the end of the financial year when it will be nil following the apportionment of the admin charge across the funds and the removal of the interest and dividends to the reserve or Committee funds.
- F001 which is the holding account for the unrealised gain/loss is overdrawn as we currently have an unrealised loss on our investments of £17k.



Events after Reporting Period



We are aware of the following for next quarter

Expenditure

- A payment of £20k made in December 2025 for the development of an Ovarian Cancer Algorithm as presented by Professor Paul Edwards at a previous Committee Meeting.

Income

- As of 30th November 2025, the year-to-date unrealised gain in investments was £34k (unrealised loss of £17k as of 30 September 2025).
- We received a legacy of £12k for Royal Gwent Hospital in October 25.
- We received a legacy of £8k for ABUHB in November 25.
- We have been notified of a legacy to Ophthalmology of £2k.
- The final instalments of grant income of £167k from NHS Charities Together in relation to two projects (F995 & F997) were paid in November.



NHS Charities Together



Workforce Wellbeing Programme Update

In March 2025 we reported that NHS Charities Together were in contact with Welsh Government (WG) to explore match funding of £300k to be made available for NHS Charities in Wales in total.

Since then, WG stated there would be no match funding and discussions were held with WG NHS Workforce & Organisational Development policy team to explore options to use the one-off grant of £300k.

A proposal has been developed to use this funding to support and expand "Canopi", a WG funded mental health service for health and care workers across Wales, delivered by Cardiff University.

WG have advised that, having concluded an internal evaluation of options, this is the only proceedable proposal for them, being the most equitable and likely to have a positive sustained impact, given the funds available.

The NHS CT strategy is shifting focus from grant giving to growing the NHS charity sector's income, influence, and impact; strengthening how they support members, building relationships with trust leaders and Government; and becoming a more efficient, joined-up organisation to do this effectively.



DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 January 2026
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Final Annual Accounts & Annual Report 2024-25
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Robert Holcombe, Director of Finance, Procurement and Value Based Healthcare
SWYDDOG ADRODD: REPORTING OFFICER:	Gareth Lewis, Head of Financial Services & Accounting

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

Er Sicrwydd/For Assurance

This report gives an overview of the Final Annual Accounts and Annual Report for the year ending 31 March 2025 for Aneurin Bevan University Health Board Charitable Fund and Other Related Charities and highlights the key issues that are contained in the accounts.

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

Aneurin Bevan University Health Board, as corporate trustee of its charitable funds, must file accounts for the year ended 31 March 2025 with the Charities Commission before 31 January 2026. The draft accounts and annual report are attached and will be subject to external audit by Audit Wales.

The audit process is complete and Audit Wales intend to issue an unqualified audit opinion on the accounts following approval of the accounts by the Board.

Cefndir / Background

This report presents the Final Annual Accounts and Annual Report of the charity for 2024/25.



1. Annual Accounts

Following completion of the draft accounts, one amendment was identified which are reflected in these final accounts. This highlighted to the committee below.

The only adjustment to the accounts was in relation to income which should have been deferred. This related to training courses which were paid for in 2024/25, but due to availability, were delivered after year-end. The net effect of this on the Statement of Financial Activities is £12k.

The detailed accounts are shown at Appendix 1 and the following are key points to note from the accounts for 2024/25:

Statement of Financial Activities for year ended 31 March 2025: (Page 2 of Accounts)

Line	2023/24	2024/25	Movement	Movement %
Total Incoming Resources	£876k	£795k	(£81k)	-9%
Total Expenditure	£1,257k	£1,394k	£137k	11%
Total Funds Brought Forward	£5,764k	£4,944k	(£820k)	-14%

The 2024/25 financial year saw an increase in expenditure by the charity alongside a reduction in income received. These factors, together with a significant unrealised loss on the charity’s investment portfolio has meant a net decrease for the year of £820K.

The total funds carried forward at the end of 2024/25 is £4,944k.

Income from Donations, Legacies and Grants (Note 4, Page 10 of Accounts)

Line	2023/24	2024/25	Movement	Movement %
Income from Donations, Legacies and Grants	£507k	£413k	(£94k)	-18%

Income from Donations, legacies and grants has decreased by £94K from the previous year to £413K. This was due to a reduction in the value of donations and legacies received in 2024/25. There were 2 legacies received in the year.



Income from Charitable Activities (Note 5, Page 10 of Accounts)

Line	2023/24	2024/25	Movement	Movement %
Income from Charitable Activities	£158k	£193k	£35k	22%

Income from courses has increased by £44k from the previous year to £199k, due to an increase in the number of courses held. Other income is £0k for 2024/25, a reduction of £9k from the previous year.

During the audit process, it was identified that income in relation to 2 courses should have been deferred and the income should not have been recognised in the 2024/25 accounts. Within these final accounts we have adjusted for this error, which had a total value of £12k.

Investment Income (Note 7, Page 10 of Accounts)

Line	2023/24	2024/25	Movement	Movement %
Investment Income	£211k	£189k	(£22k)	-10%

Investment income has decreased by £22K from the previous year to £189K due to a decrease in the income received from the investment portfolio. This is a direct result of the reduction in our investments held with CCLA.

Expenditure (Page 2 of Accounts and Notes 8 & 9, Page 11 of Accounts)

Line	2023/24	2024/25	Movement	Movement %
Expenditure on Raising Funds	£10k	£11k	£1k	10%
Expenditure on Charitable Activities	£1,247k	£1,383k	£136k	11%

Expenditure has increased by £137K. The main increase in spend relates to patient and staff education & welfare and the purchases of equipment. Increases in these areas was offset by a reduction in building and refurbishment expenditure.



The net impact of income and expenditure is a decrease in funds of £593k before investment losses, compared with a decrease of £381k in the previous year. (Page 2 of Accounts)

Loss on Investment Assets (Page 2 of Accounts)

Line	2023/24	2024/25	Movement	Movement %
Net Gains/ (Losses) on Investments	£375k	(£221k)	(£596k)	-159%

During the year there has been a net loss of £221K on our investments, the majority of which is with CCLA. This loss reflects the significant stock market decreases on our underlying investments.

The Charity released £900k of our investment holdings in 2024/25 to support the increase in expenditure on funds in the year.

Alongside the stock market decreases since the previous year this has resulted in a decrease in our CCLA investments from £5,477K on 1st April 2024 to £4,419K on 31st March 2025 (Note 16, Page 13 of Accounts).

The net movement in funds for the year is therefore a decrease of £820k between 2023/24 and 2024/25. (Page 2 of Accounts)

Balance Sheet as at 31 March 2025 (Page 3 of Accounts)

Net assets / liabilities have decreased by £820K reflecting the decrease in funds during the year. The main movements in the balance sheet consist of a decrease in the value of the CCLA investments offset by an increase in creditors. The balance sheet movements are as follows:

	£000
Investments	-1121
Decrease in Cash Balances	-124
Increase in Debtors Balances	34
Decrease in Creditors Balances	391
Total	-820

The following table gives a more detailed breakdown of our fixed assets (Note 16, Page 13 of Accounts):



	Balance 1 Apr 2024 £000	Disposals £000	Realised Gains / (Losses) £000	Unrealised Gains / (Losses) £000	Balance 31 Mar 2025 £000
Fixed Asset Investments					
Investments					
CCLA	5,477	- 900	-	- 158	4,419
	5,477	- 900	-	- 158	4,419
Property					
13 Clytha Square	250	-	- 63	-	187
TP Price - Strip of land Oakdale	55	-	-	-	55
	305	-	- 63	-	242
Other					
Painting	25	-	-	-	25
Total per Note 16 of the Accounts	5,807	- 900	- 63	- 158	4,686

Cash Balances (Note 18, Page 14 of Accounts)

Cash at 31 March 2025 totalled £517K as follows:

	£000
NatWest Current Account	516
Petty Cash	1
Total	517

2. Annual Report

The Trustees Annual Report is shown at Appendix 2 and is subject to audit, by Audit Wales, in conjunction with the Annual Accounts.

There have been some small amendments as a result of the audit, mainly relating to the deferred income adjustment mentioned above.

References to a fundraising activity was removed from the final report, as the income related to a different financial period.

3. Next Steps and Actions

The audit of Annual Accounts and Annual Report has been completed, and they will be presented to the Board for approval on 28 January 2026.

The final step will be to file the Annual Accounts and the Annual Report with the Charity Commission before the 31st January 2026 deadline, and the accounts and annual report will then be available on the Charity Commission website.

Argymhelliad / Recommendation



The Charitable Funds Committee is asked to note this report and the intended audit opinion, and to recommend to the Board that they approve the Annual Accounts and Annual Report of the charity for 2024/25.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	The monitoring and reporting of committee business is a key element of the Health Boards assurance framework
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability Choose an item. Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Choose an item.
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Finance
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Improve the Wellbeing and engagement of our staff Choose an item. Choose an item. Choose an item.

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	N/A
Rhestr Termau: Glossary of Terms:	CCLA – Churches, Charities & Local Authorities
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	N/A

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Resource Assessment:	
• Workforce	Not Applicable



<ul style="list-style-type: none"> • Service Activity & Performance 	<p>Yes, outlined within the paper</p>
<ul style="list-style-type: none"> • Financial 	<p>Yes, outlined within the paper</p>
<p>Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed</p>	<p>No does not meet requirements</p> <p>An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk</p>
<p>Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working</p> <p>https://futuregenerations.wales/about-us/future-generations-act/</p>	<p>Integration - Considering how the public body's well-being objectives may impact upon each of the well-being goals, on their objectives, or on the objectives of other public bodies</p> <p>Choose an item.</p>



2024-2025



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Annual Report & Accounts

**Aneurin Bevan University Local Health Board
Charitable Fund and Other Related Charities**

**Trustee's Annual Report and Accounts
2024-2025**

Registered Charity No: 1098728



Aneurin Bevan Health Charity

About Us

We are a registered charity, receiving monies given to Aneurin Bevan University Local Health Board from grateful patients, their loved ones and the wider community; thanking us for the NHS care and treatment they receive.

Our NHS Health Board

Aneurin Bevan University Local Health Board was established in October 2009 and achieved 'University' status in December 2013.

The Health Board serves the population of Gwent of just over 600,000, which reflects the five local authority areas: Blaenau Gwent, Caerphilly, Monmouthshire, Newport and Torfaen. The demographics of Gwent are varied and include rural countryside areas, urban centres and the most easterly of the South Wales valleys.

The Health Board is the largest employer in Gwent, with a budget of just over £1.7 billion, employing 13,424 whole time equivalent (WTE) staff (17,111 people at the end of March 2025) and providing an exceptional workplace to start, grow and build a career.

The workforce is ageing, as is the demographic profile of our population and the health inequalities of our population are also found within our workforce and 80% of our staff live within our communities. Therefore, it is essential that staff health and wellbeing is a key priority and a feature of the Health Board's preventative plans.

Introduction to the Annual Report & Accounts

By law, every charity must prepare annually a set of accounts and an annual report which is subject to audit by an independent auditor and should explain to the reader what the charity's purpose is; where the charity gets its money from; how the charity spends its money; what the charity achieved during the year and what plans it has for the future.

We present the Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities Annual Report together with the audited financial accounts for the year ending 31st March 2025.



Message from the Chief Executive

Croeso / Welcome

I want to start by thanking you all for your continued support in making donations, leaving gifts in your will and generating funds for our Charity over what has been a particularly challenging time. I truly appreciate everything you do to enable us to provide those added extras that make a difference to our patients, our staff and our services.

Our population is growing and ageing, demand for services is increasing, and we need to adapt to new challenges and opportunities, along with technological and medical advancements. We are shifting our focus beyond just treating illness and looking at how we can help keep people well, reduce health inequalities, and improve access to care.

We continue to look to charitable funds to support us in this, funding numerous initiatives as shown below in the highlights of our past year.

Thank You



Nicola Prygodzicz
Chief Executive, Aneurin Bevan University Health Board

Message from Chair of the Charitable Funds Committee

I would like to take this opportunity to thank all members of the public, patients and their family and friends, staff and others who have raised and donated funds to Aneurin Bevan Health Charity, the registered charity of Aneurin Bevan University Health Board.

The funds really do make a difference, helping to improve the quality of life for our patients and individuals from the Aneurin Bevan University Health Board Community, as well as supporting our staff who deliver such wonderful care and treatment.

Throughout this report we provide an overview of the Charity's achievements over the period April 2024 to March 2025. Your contributions have allowed us to fund many projects and items of equipment, and this great work is evidenced through the stories and information presented here.

The Charitable Funds Committee has the responsibility of administering the Charity and ensures that there are policies and procedures in place in relation to legislative framework, ensuring funds are used for public benefit. The Charity is also audited annually by Audit Wales.



Paul Deneen
Chair of the Charitable Funds Committee

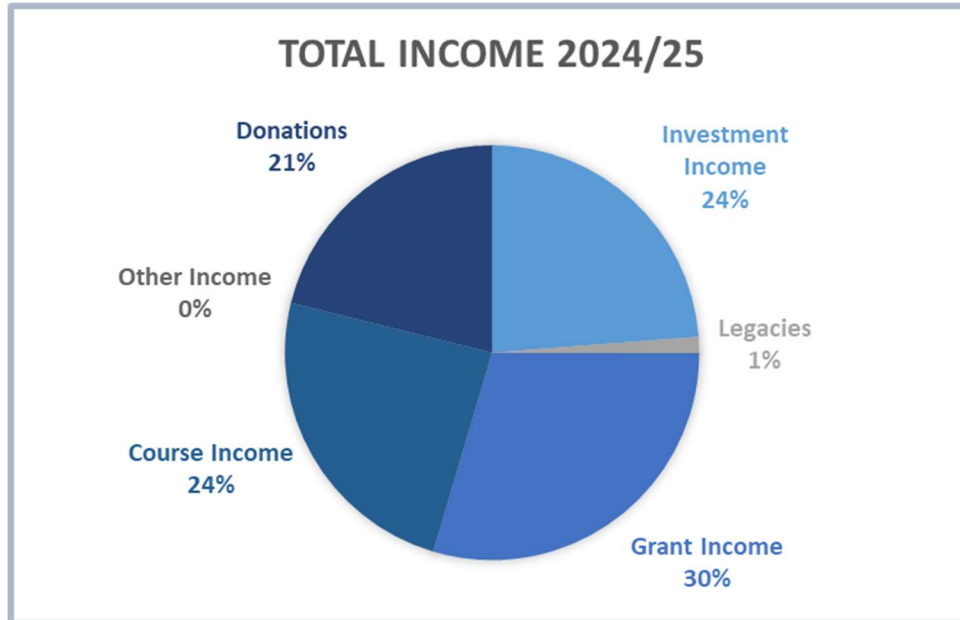
I would like to thank all members of the committee for their input and advice over the past 12 months. I also place on record my particular thanks to all the staff at ABUHB and to all others who have been involved with the Charity's work, for their support and professionalism, which has been much appreciated. I am very pleased to present this Annual Report for the year ended 31st March 2025.

Diolch yn Fawr / Thank you

2024-2025 At a Glance

INCOME

This year we received **£795,000**



DONATIONS £168,000

We are so grateful for the donations we receive thanks to the generosity of patients, their relatives and friends in recognition of the care and treatment received from Aneurin Bevan University Local Health Board.

LEGACIES £10,000

We are extremely grateful to those individuals who choose to leave a gift to us in their will.

GRANT INCOME £235,000

This money is received from external organisations to fund specific schemes / projects. Most of this funding was received from NHS Charities Together (NHS CT).

COURSE AND OTHER INCOME £193,000

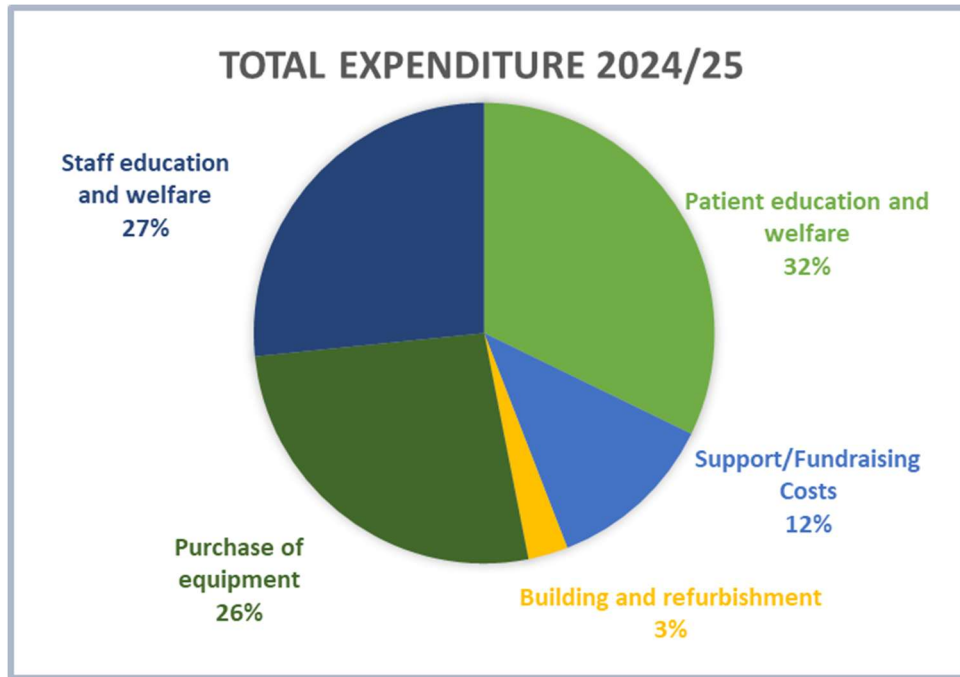
Fees and sponsorship received from in-house conferences and training courses.

**INVESTMENT
INCOME
£189,000**

We received this from our investment portfolio. This was down by £22,000 on last financial year.

This year we spent £1,394,000

EXPENDITURE



The majority of this relates to staffing costs to support various projects such as meaningful activities, local specialist suicide bereavement service, psychological support for patients accessing cancer services, volunteer initiatives and our decarbonisation project. It also consists of various therapies, seasonal activities, support groups, volunteer expenses and other items of expenditure to benefit patients including purchasing Christmas gifts for those patients in hospital during the festive season.

**PATIENT
EDUCATION &
WELFARE
£449,000**

This was spent on a range of varied equipment across the Health Board, additional equipment support by League of Friends and including the purchase of defibrillators and cabinets in the community from our Jack's Appeal Fund.

**PURCHASE OF
EQUIPMENT
£369,000**

The main items consist of conferences and training course fees, both in-house and external and related travelling expenses, subsistence and accommodation, support for staff well-being, Counselling Service, Staff Recognition Awards and medical student bursaries.

**STAFF
EDUCATION &
WELFARE
£371,000**

We spent this mainly on various small projects including garden projects, improving the environment, making it better for our patients, staff and visitors.

**BUILDING &
REFURBISHMENT
£39,000**

This covers the cost of the Charitable Funds Team, Corporate support and auditor fee in administering the funds.

**SUPPORT COSTS
£166,000**

Charitable Funds are spent in line with the Charity's objects and are intended to provide those additional amenities that will improve the conditions under which patients are cared for and treated or staff work

**KEY
PURCHASE**

2 x Bladder scanners for Acute Medical Unit, Nevill Hall Hospital



Bladder scanners are portable, handheld ultrasound devices which can perform quick, easy and non-invasive scans of the bladder and is painless for the patient. It can be used to help identify bladder distension, causes of urinary frequency and bladder irritability and is useful in assisting with accurate assessments of hydration status. The purchase of additional bladder scanners enables the nursing staff to use them at the patient's bedside which is beneficial to both patients and staff.

Both these machines were purchased by Nevill Hall Hospital League of Friends.

**KEY
PURCHASE**

2 x ECG Machines for Acute Medical Unit (AMU) and Haematology Day Unit, Nevill Hall Hospital

An ECG machine records and monitors cardiac rhythms and can identify if a patient is having a heart attack and the necessary treatment can be applied.

The AMU machine was purchased by Nevill Hall League of Friends.

**KEY
PURCHASE**

Ocular Response Analyser for Ophthalmology, Llanwenarth Suite, Nevill Hall Hospital



Now we have two!

We purchased an Ocular Response Analyser last year for the Eye Clinic in Royal Gwent Hospital and this year the League of Friends kindly purchased one for Nevill Hall Hospital.



This equipment is used in assessing the eye condition, Glaucoma. More common in adults in their 70s and 80s, where the optic nerve that connects the eye to the brain becomes damaged. It is caused by a fluid build-up at the front of the eye which increases the pressure inside the eye.

**Key
Purchase**

28 x Televisions, Brackets & Installation in Bedwas Ward, Ysbyty Ystrad Fawr

Bedwas ward was a short stay ward with patients expected to stay no longer than 72 hours. Since the pandemic the ward has been redefined and now looks after medical patients who have similar length of stays to other in-patient medical wards at the hospital, so the ward needed Televisions for the patients in the 28 individual rooms.

**KEY
PURCHASE**

**Thera Trainer for Ward C5 East, Royal
Gwent Hospital**



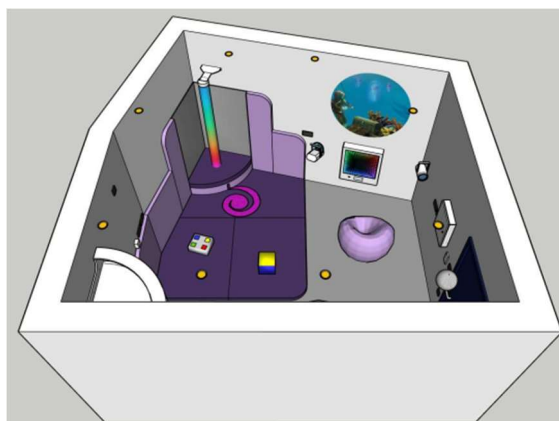
The Thera Trainer is used as part of the treatment for patients to enhance their overall rehabilitation in a cohort of patients where achieving aerobic activity can be challenging.

**KEY
PURCHASE**

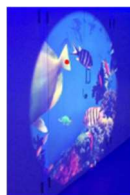
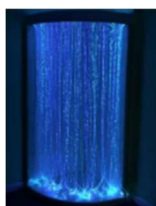
**Sensory Room, Paediatrics, Grange
University Hospital**

The sensory room offers a safe and calming environment, significantly enhancing the well-being of individuals with sensory processing issues, such as autism and ADHD.

A 3D layout of the room is shown here with a list of items it features.



Interactive Borealis Tube Fibre Optic Corner Solar LED Projector Beanbags



Interactive UV Activity Panel Mirror Ball System Floor & Wall Padding Fibre Optic Harness



Anne Beard, Senior Nurse Manager, Paediatrics said:

"It's been truly wonderful to see this initiative come to life, making a meaningful difference for our children and young people. The use of charitable funds has highlighted the generosity and support of the public, creating a positive impact. This funding has made the sensory room accessible to those who might not otherwise have access to such spaces. Overall, the sensory room has greatly improved the quality of care we can provide for our children and young people."

KEY PURCHASE

Numerous Defibrillators and Cabinets across the Community



To prevent such heart-related tragedies, working together with community groups via Jack's Appeal, we are continuing to purchase 24/7 public access defibrillators, externally housed in secure cabinets and consumables such as defibrillator pads and batteries.

KEY PURCHASE

Other Equipment

Other equipment includes

- 2 x Ultrasound Enhancing Rheumatology equipment, for Royal Gwent & Nevill Hall Hospital.
- Therapy Chair for Outpatients, Royal Gwent Hospital.
- Wide Format Plotter printer for Facilities department, Grange University Hospital.
- Laparoscopic Insufflation System, Urology, Royal Gwent Hospital.

Charitable Funds have supported various volunteer projects such as:

“Ffrind I Me”

An initiative to support lonely and socially isolated people through befriender volunteers.

“Volunteer to Career”

An employability scheme of current volunteers through a defined pathway.

“End of Life Companion Support”

Trained volunteers offer comfort in the last days and hours of life to patients who are at risk of dying alone.

And so much more.....

We want to say a big THANK YOU to all our volunteers. Your commitment and contribution as a volunteer really makes a difference.

The Value and Impact of Volunteering

Volunteering has helped me feel part of something bigger—like I’m giving back but also gaining so much myself – RGH Volunteer



Currently, **294 directly engaged Ffrind i Mi volunteers** support the Health Board, with many more contributing through valued partnerships with third sector organisations.

Over the past year, we have supported **414 Ffrind i Mi volunteers**.

In addition, those who are engaged by **our partners** for example Age Cymru Gwent Robins, League of Friends, British Red Cross, Sparkle etc have made an **invaluable contribution** across our sites, providing both practical support and emotional care within busy healthcare environments.

Volunteer Voices



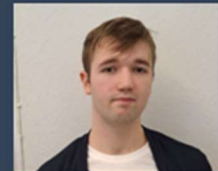
Thank you very much for our last meeting, it was indeed a wonderful meeting with you. The work experience applications are filled up, but I have submitted my interest form anytime it's open, particularly in the Administrative Department so I can have organizational working experience in the Management area - Atinuke



I just wanted to let you know that I have started my 5-day clinical skills training today to join the Bank. Thank you for all of your help in the volunteer to career process, I am really grateful to be on the course - Diana

I have completed the work experience, and I really enjoyed it. Dan

It was lovely to meet you, and I am much grateful for your kind concern on volunteers like me and the assistance giving us to ensure our career goals. Thank you very much, Inoka



I was able to secure employment with one of the agencies you helped with the reference, however, I am seriously searching for a permanent role in the healthcare sector. Thank you for your concerns and constant encouragement towards my career pursuit.
- Agatha

2024/25

Our volunteers have provided **over 20,239** unpaid volunteer hours

We have **40** spoken languages, including different dialects

We have supported over **450** volunteer inductions between January 2024 to March 2025

We have provided **62** training sessions for volunteers

We have created **5 new** volunteer role profiles during 2024.

Over **80** Volunteer Hours certificates were issued

We have attended **48** volunteer promotion events across the geographical area

20 volunteers have gained paid employment through our **volunteer to career** programme

We recruited new **250** volunteers in **2024/2025**

In **2024**, the Volunteer Service has **won 3 Volunteer Awards** and have been **finalists in 2** other awards

Received over **270** referrals for **Home** visits or **Telephone**

Extended our volunteer support across different **10+** areas

Yasmine's Story

This is Yasmine's story about her experience with a volunteer befriender.

My Mum, Barbara, was widowed at 46, lived alone and had always loved going out dancing and going to bingo until quite late in her life and then as her physical health deteriorated and I was unable to take her out, her life then centred around her home and solitude.

Then, about 8 years ago, I was asked if I would like a befriender to visit mum to offer support and friendship. That was when Susan started visiting; mum was 87.



Mum would chat about the old days, my dad, me and my brothers (probably the same on every visit) but Susan became a good friend that my mum liked and trusted as this was difficult for her to normally do. This is what makes your visits so important and treasured by the person you visit. It's familiarisation and companionship that as a person gets older, they rely on.

Unfortunately, mum had a fall a week after her 90th birthday which resulted in her leg being amputated and her going into a care home; the same week we were put into Lockdown in March 2020. Even with mum in the home, Susan still visited despite the fact she had now moved away.



Your visits to the elderly who are lonely and housebound are so treasured by them and their families.

I know that when I visited mum she would often chat about Susan and would always look forward to her next visit. Personally, it also gave me comfort to know that mum had a new FRIEND because that is what you will ultimately be, a person who can chat, laugh, cry, listen and be that extra bit of happiness in someone's life.

It sounds awful but when you visit your parent on a regular basis, it's difficult to think of things to say for both parties, but with a befriender visiting it opens up other routes for conversation which helps enormously and something that I will always be grateful for.

I just want to say thank you to you all. You give up your personal time to actually go and make someone smile and make their day and that must be so rewarding to know that you are making a difference to someone's life.

Unfortunately, I lost my mum last December. For me, it gave me comfort knowing that mum had a new friend who she loved to see and who added a little bit extra to her life.

THANK YOU



Staff

Celebrating our Staff

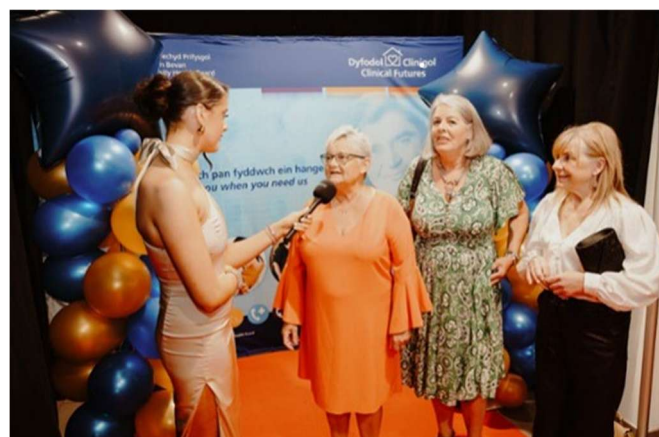
Staff Recognition Awards 2024!

On Friday 5th July 2024 - on the 76th birthday of the NHS - the Health Board held our annual Staff Recognition Awards funded from charitable funds. It is always a pleasure to welcome everyone to this special event, where colleagues from across the Health Board gather to celebrate each other's achievements and the hard work, dedication and outstanding care given by teams across Aneurin Bevan University Health Board.



The event was hosted by Chief Executive, Nicola Prygodzicz. In her opening address, Nicola acknowledged the overwhelming number and

standard of nominations received this year. She said: "It is testament to the expertise, dedication and compassion of our staff that despite the many challenges we face, we continue to step up and keep our focus where it should be - on the patient and the community we serve. "We recognise that even with this many nominations, this is just a snapshot of the excellent work undertaken by our staff every day. So, our celebration this evening is about recognising the contribution of all our staff but those of you here today, in particular, have been recognised for your dedication and efforts."



A huge CONGRATULATIONS to all our nominees, winners and runners up!

More Celebrations

The Breast Unit at Ysbyty Ystrad Fawr Turns 1!



The Breast Unit at Ysbyty Ystrad Fawr has now been open for a full year! This state-of-the-art facility has significantly improved access to breast care services for patients across Gwent, and its impact has been remarkable. A huge thank you to all the staff who have made this service such a success.

As we mark the first anniversary of the Breast Unit at Ysbyty Ystrad Fawr, we reflect on a year of remarkable achievements and unwavering dedication to patient care.

Over the past year, the Breast Unit has brought together clinical teams offering outpatient care, diagnostic investigations and surgery. It is a multidisciplinary unit with Consultants, Radiologists, Breast Care Nurses, Mammographers, Outpatient Nurses, HCSWs, Medical Secretaries and Bookings staff.

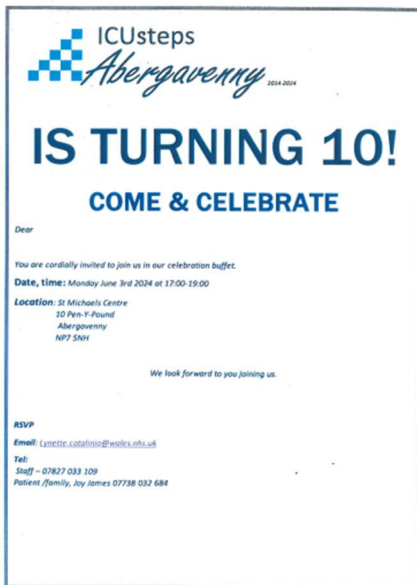


The introduction of a gold-standard one stop diagnostic service has allowed patients to undergo investigative procedures in a single visit, significantly improving efficiency and patient satisfaction.

Natalie North, Breast Unit Support Manager said: "The success of the Unit is a testament to the hard work and collaboration of the clinical teams, the support of the local community and the vision of leaders like Mr Gateley, whose legacy continues to inspire the team. As we look to the future, we remain committed to providing the highest quality care and support to those affected by breast cancer."

More Celebrations

Intensive Care UNIT (ICU) Steps celebrating 10 years



ICU Steps started in Abergavenny (Nevill Hall Hospital) and has been supporting ex ICU patients and their family and will be celebrating its 10-year anniversary.



The group meets monthly to share experiences of patients/ICU stay. The after-effects of critical illness and its recovery period have many common themes and problems for everyone concerned.

Many patients present unconscious for long lengths of time and have no recollection of long periods of time.

The group is made up of ex ICU patients and their families supported by ICU nurses from the Grange Hospital. Members have found it helpful to know they are not alone on their journey and that others have similar issues.

Donations made to the now called Critical Care Unit which is based at the Grange University Hospital support the group with payments for venues, and refreshments.

More Support Groups

Monthly Lung Cancer & Mesothelioma Support Group



Monthly Lung Cancer & Mesothelioma Support Group

We invite you to join us once a month at our drop in lung cancer support group with our specialist nurses...

Date & Time: 1st Wednesday of each month 11am-1pm.
Venue: Congress Theatre, Cwmbran Town Centre

The patients who attend find:

- less formal contact with their nurse reassuring
- enjoy meeting other patients

We also arrange annual trips and take part in fundraising for the group.

Tea & Coffee Provided!!!

WE HOPE TO SEE YOU THERE!

We invite you to join us once a month at our drop in lung cancer & mesothelioma support group with members of the team. This is held 1st Wednesday of every month 11:00am-1:00pm at the Congress Theatre in Cwmbran Town Centre.

The patients who attend find the less formal contact with the members of team reassuring and enjoy meeting other patients. We also arrange annual trips and take part in fundraising for the group.

The group is open to Lung Cancer & Mesothelioma patients, relatives, carers etc.

Care Fund Bursary Project

Supporting students in medical careers

In partnership with the Shaw Foundation, we continue to gift bursaries from our Care Fund Project which is used to identify individuals from less privileged backgrounds, with a potential to become qualified doctors by supporting them with a programme of mentoring and financial support.

Two of our students have qualified and have stayed in South Wales and we have a third student who will hopefully qualify this year and stay in Wales to complete their foundation training.

The following comments have been received from recipients of our Care Fund Bursary Project.

I'm sincerely grateful for the ongoing support that's made a significant difference, both practically and emotionally, while pursuing my medical education. The bursary lifted the financial burden and eased the pressure during a particularly challenging year.

Receiving the bursary last year allowed me to start the degree, as I otherwise wouldn't have been able to afford the upfront tuition fee. The support from the bursary meant that I did not need to sacrifice revision time to work due to financial worries; I instead had the time to revise and focus on exams.

Being awarded the bursary was more than practical support; it had felt like a genuine vote of confidence in my potential as a medical student and future Doctor.

Thank you again.

Since September 2024, I've completed another year of my Medical Sciences degree and have been re-selected as one of the Presidents of the Med Prep Society. This has been a rewarding role, giving me the chance to work with my co-president to plan and deliver teaching sessions for the first years.

Looking ahead, my main goals are to apply to medical schools in October 25, and focus on completing my degree, including my dissertation, to the best standard I can. I'm looking forward to another year of learning, building on my experiences, and making the most of every opportunity.

Thank you so much - I am so happy!

Oh my goodness, thank you all so much! I'm actually lost for words, and that's not like me at all!

Thank you so much, it always means a lot and I'm always incredibly grateful for the generosity. It helps significantly.

More Donations

Donation to Ward 3/4 and Day Hospital, Nevill Hall Hospital



A huge thank you to the amazing Crickhowell and District Fundraising group who have donated £3000 to Ward 3/4 and the Transient Ischemic Attacks (TIA) Clinic at Nevill Hall Hospital (£1500 each) to help buy equipment to improve patients' experience.

The teams are very grateful for the donation, which they hope to use to buy specialist seating for Ward 3/4 and an ECG machine for the day hospital.

Pictured:
Sian Langdon - Ward Sister, 3/4
Rachael Way - Senior Nurse
Jennifer Richards - Day Hospital

And

Staff Fundraising



C4 EAST'S
North Pole Marathon
FRIDAY 13TH DECEMBER

On C4East, all our staff are attempting to walk/run
26 MILES in 24 HOURS.

We are doing this for funding towards our day room for patient's wellbeing, all donations are welcome.

We will be using a treadmill within the ward; we invite you all to get in on the fun. We will have the mince pies and refreshments!

The poster features a circular logo on the left, a 'WELCOME TO THE NORTH POLE' sign on a candy cane on the right, and a decorative border of colorful confetti and snowflakes.



NHS Charities Together (NHS CT), the national charity for the NHS, allocated money for supporting Covid-19 projects across the NHS in the UK to be accessed through individual bodies' charitable funds. We were successful in applying for a grant of £290,000 to implement a Meaningful Engagement Activity Programme.

COVID-19 significantly impacted on the wellbeing of our population. A patient experience survey of people on in-patient wards across our hospitals identified that a lack of meaningful activity led to increased boredom, loneliness, frustration, escalation in behaviours that challenge and impacts negatively on their confidence, self-worth and overall wellbeing. Staying in hospital for both general and mental health care can be a difficult and worrying experience for some people.

We set about developing and rolling out a meaningful activity strategy:



- To promote and improve peoples **lived experience**, experience of care, increase cognitive stimuli for people, support carers and **reduce loneliness**.
- To provide hospital wards, care homes and prison services within the Aneurin Bevan University Health Board area with Meaningful Engagement Skills and Resources.
- To develop a cross- sector toolkit of **meaningful activities**.



To commence our scoping exercise, we contacted **partners** to identify the areas who would be interested in participating in this programme. To support **engagement**, we proposed:

- We would provide a **visit** to the participating areas to engage with staff patients and relatives/carers.

- Provide awareness and understanding of Meaningful Engagement.
- We would provide a series of training opportunities to support the Meaningful Engagement programme and **quality outcomes**.
- We would be providing each participating area with a starter Meaningful Engagement **starter pack** containing activity resources.
- We would provide a **list of items** and how you can reorder and get the best from these items.
- **We would provide signposting** to partners who can support with the Meaningful Engagement agenda, to include volunteers, intergenerational partnerships, assistive technology support and community partnerships.

What did we Learn?

- The scoping surveys took a lot longer than anticipated to complete. Resource vs outcome for this method was not effective. Feedback from steering group and care homes was survey use isn't always successful in this setting.
 - For **Phase 2** we suggested spending time in the home with staff residents and visitors to collate information rather than chasing survey responses over many weeks.
 - **Phase 1 response rate wasn't inclusive of Nursing homes and was primarily Residential settings. Feedback told us these homes generally have more complex issues and aren't always the first areas to reach out for this support.**
 - For **Phase 2** we have suggested targeting some of these areas with the support of complex care colleagues in steering group.
- In addition to this through the work being carried out for the Meaningful Engagement Programme in all settings inclusive of Care Homes, Hospitals and Prisons, and from listening to partners inclusive of carers, volunteers' staff and people living with Dementia it was identified that access to Information relating to the Meaningful Engagement Programme and resources to support were limited.
 - It was also identified through the Enhanced Care review that staff needed information to be easily accessible and in one place to address this the link for the Meaningful Engagement Padlet has also been embedded into the Enhanced Care Padlet to allow a single point of access for staff.
 - To further support addressing this feedback a new poster that is displayed in areas working in partnership with the Patient Experience Team on this Programme has been produced this includes a QR Link to resources. An Information Leaflet has been produced that is available in ward areas, care homes and the Dementia Hubs.



In response to this feedback we developed a new Dementia and Meaningful Engagement Padlet which is available on the Internal and External webpages and is accessible to all.



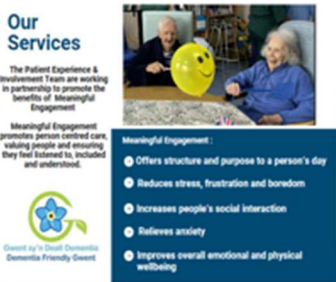
In addition to the Padlet as part of the communication work for the programme we have designed and produced several new documents to support communication and access to the programme benefits for all.



Leaflet: Available in English and Welsh
These are available in all 5 Hubs, throughout our hospital and care home venues. These have also been shared via the communication team and through the steering group with our partners for distribution through all networks.



Poster: This has been made available to all partners that are involved in the programme for display in their areas.



We also designed some promotional resources to support the delivery and advertisement of the programme.



What our staff said:



The project is nice for the patients and it is nice to see the patients enjoying the activities and engaging with other patients from other bays on the ward. The activities are suitable for all patients. The gardening and baking sessions have gone down well.

The dayroom has made such a difference to patients' experience during their stay on ward C7E. It breaks the day up from sitting in the bay all day.

Lottie – Assistant Practitioner

I'm really proud of how far we have come and what the ward team have achieved over the last 12 months.

There were some initial barriers and reluctance from staff to engage and get involved. But 12 months on with the support of the Patient Experience and Involvement team the benefits are clear to see.

The ward really does have a new atmosphere to it, I'm proud to watch the whole MDT embrace the Meaningful Engagement agenda and feel it is now embedded into our everyday practice.

Its putting patients at the centre of all we do, but also impacting on the overall moral and well-being of my staff in a positive way.

I'm proud but also excited to continue this work and look forward to all that we can achieve moving forward.



Claire – Ward Manager

What our visitors said:

The activities are good for the patients: better than some care homes I have been to

Very encouraging and inclusive. Reassuring to know individuals have stimulating activities during a difficult time

Very enjoyable, encouraged to take part in lots of activities

- Patients were happy to meet and pet Dew, Lifted Dew up for one of the patients to be able to stroke her.
- Florence interacted well with all patient on C7E, One Patient who hadn't spoken all day spoke to Florence, staff also enjoyed her visit.
- Spoke to a patient who was a bit agitated, took some coloring books and pencils but she was not interested, talked a lot about going home.
- "Yes, it has been very interesting, and I felt that it has been helpful to myself and patients", Spoke to a patient who was distressed as she thought she had upset people, played a game and did some coloring and just chatted and reassured her.
- Such a lovely lady, she was looking a bit happier, and we discussed about a book which she was reading, told me about cooking and food stuff.
- Patient was looking much better but seemed fed up, she told me about her recent book that she was reading we discussed her physio sessions.
- Patient was looking a bit tired I cheered her up, we talked about birds and animals she told me about her neighbours.
- Had a lovely chat with a patient about her hobbies and she wishes to go back home soon for her gardening activities, she talked about her family and mentioned about her son passing away recently , spoke about her husband's death. Would love to see us again to so some coloring.
- Talked about how patient is doing such as going to the day room, likes puzzles , coloring, -mentioned going home soon.

Comments from the ward volunteers



And most importantly this is what our patients said:

We asked our patients what they like most about the Day room?

- Would like more time in dayroom
- Lightheartedness – good company
- Enjoyed planting seeds and gardening the most
- Dayroom has been set up really well and a lot of work has been put into it
- Enjoyed socializing and meeting people
- Spacious bright welcoming room
- Plenty of chairs and table space for everyone to join in
- Coffee, tea drinks and snacks provided
- Friendly homely feeling, great to have some activies so important for mental well-being and stimulation



So much more to come.....

In-house

Staff Conference

The Fracture Liaison Service Conference was held, where Consultant Geriatrician, Dr Inder Singh, delivered a presentation on the work that's underway in the Health Board to improve bone health.



Dr Inder Singh led several initiatives since 2020 to widely integrate and strengthen partnership with Rheumatology, Radiology Directorate and Orthogeriatric teams to streamline processes and identify fragility fractures in above 50 years. This conference was free to delegates, funded through charitable funds.

Contact Us

Charitable Funds Team

Alison Griffiths – Charitable Funds Manager



Wendy Keyte– Charitable Funds Higher Officer

Sue Turley– Charitable Funds Higher Officer



Jess Turley–Charitable Funds Officer

By E-mail

Charitable.funds.ABB@wales.nhs.uk

By Phone

01495 765431

Charity Governance, Audit and Finance

1. Reference and Administrative Details

Charity Name: Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities

Charity Working Name: Aneurin Bevan Health Charity

Registered Charity No: 1098728

Address of Charity: Headquarters
St Cadoc's Hospital
Lodge Road
Caerleon
Newport
NP18 3XQ

Administration of the Charitable Funds:

The accounting records and the day-to-day administration of the funds are undertaken by:

Charitable Funds Section
Corporate Finance Department
Aneurin Bevan University Local Health Board
Upper Ground Floor
Ty Gwent
Lake View
Llantarnam Park
Cwmbran
Torfaen NP44 3HR

Tel No: 01495 765431

E-mail: Charitable.funds.ABB@wales.nhs.uk

Professional Advisors:

Bankers: National Westminster Bank PLC
Government Banking Parklands
De Havilland Way
Horwich
Boulton
BL6 4YU

Santander
Customer Services Centre
Bootle

Merseyside
L30 4GB

Investment Managers: CCLA Investment Management Limited
1 Angel Lane
London
EC4R 3AB

External Auditors: The Auditor General for Wales
Audit Wales
1 Capital Quarter
Tyndall Street
Cardiff
CF10 4BZ

Internal Auditors: NHS Wales Shared Services Partnership
Audit & Assurance Services
4-5 Charnwood Court
Heol Billingsley
Parc Nantgarw
Cardiff
CF15 7QZ

VAT Advisor: Ernst & Young LLP
The Paragon
Counterslip
Bristol
BS1 6BX

Legal advice NHS Wales Shared Services Partnership
Legal and Risk Services
Companies House
Crown Way
Cardiff
CF14 3UB

**Estate Management
For TP Price Estate:** NHS Wales Shared Services Partnership
Specialist Estate Services
3rd Floor, Companies House
Crown Way
Cardiff
CF14 3UB

Savills
2 Kingsway
Cardiff
CF10 3FD

**Valuations for
13 Clytha Square:**

NP Linnells Property Consultants
Gold Tops House
Pentonville
Newport
NP20 5HB

Valuations for Painting:

Bonhams
Queen Square House
Queen Square Place
Bath
BA1 2LL

2. Structure, Governance and Management of Charitable Funds

Objects of the Charity

The objects of the charity are as follows:

The main purpose of the charity is to apply income for any charitable purpose relating to the National Health Service delivered by Aneurin Bevan University Local Health Board.

The corporate trustee is Aneurin Bevan University Local Health Board. The executive directors and independent members of the Board share the responsibility for ensuring that the health board fulfils its duties as a corporate trustee in managing charitable funds.

The chair and independent members of the Board are appointed by the Welsh Government and the executive directors are appointed by the Health Board.

Trustee Arrangements

Aneurin Bevan University Local Health Board is the corporate trustee of the Charity. The directors who served the Aneurin Bevan University Local Health Board during the year to 31st March 2025 were as follows:

Name	Designation	Dates (if less than full year)
Executive Directors		
Nicola Prygodzicz *	Chief Executive	Full Year
Hannah Evans	Director of Strategy, Planning and Partnerships	Full Year
Rob Holcombe *	Director of Finance and Procurement	Full Year

Dr James Calvert	Medical Director / Deputy Chief Executive	Full Year
Sarah Simmonds	Director of Workforce and OD	Full Year
Jennifer Winslade	Director of Nursing	Full Year
Peter Carr	Director of Therapies and Health Sciences	Full Year
Tracy Daszkiewicz	Director of Public Health	Full Year
Leanne Watkins	Chief Operating Officer	Full Year
Independent Members		
Ann Lloyd	Chair	Full Year
Pippa Britton	Vice Chair	Until 30/11/2024
Louise Wright	Independent Member (Trade Union)	Full Year
Richard G Clarke *	Independent Member (Local Authority)	Full Year
Professor Helen Sweetland	Independent Member (University)	Full Year
Paul Deneen *	Independent Member (Community)	Full Year
Iwan Jones	Independent Member (Finance)	Full Year
Dafydd Vaughan	Independent Member (Digital)	Full Year
Neil Patrick *	Independent Member (Community)	From 01/04/2024
Penny Jones	Independent Member (Community)	Full Year
Martin Blakebrough **	Independent Member (Third Sector)	Until 08/06/2024
Directors in Attendance		
Paul Solloway	Director of Digital	Full Year
Special Advisors to the Board		
Phil Robson	Special Advisor to the Board	Full Year
Associate Members		
Vacant	Chair, Stakeholder Reference Group	Full Year
Vacant	Chair, Health Professionals Forum	Full Year
Vacant	Director of Social Services	Full Year
Director of Corporate Governance		
Rani Dash	Director of Corporate Governance	Full Year

* Members of the Charitable Funds Committee.

** Absent in agreement with Chair and Welsh Government (effective 01/09/2023 to 08/06/2024).

Charitable Funds Committee

The Board of Aneurin Bevan University Local Health Board, as the corporate trustee, delegates its governance work to the Charitable Funds Committee which is a subcommittee of the Board. The Committee is required to:

- Control, manage and monitor the use of the fund's resources for the public benefit having regard for the guidance issued by the Charity Commission.
- Provide support, guidance and encouragement for all its activities whilst managing and monitoring the receipt of all income.
- Ensure that 'best practice' is followed in the conduct of all its affairs fulfilling all its legal responsibilities.
- Ensure that the Investment Policy approved by the Health Board is adhered to and that performance is continually reviewed whilst being aware of ethical considerations.
- Keep the Health Board fully informed on the activity, performance and risks of the charity.

Membership of the Charitable Funds Committee is as follows:

Name	Designation	Dates (if less than full year)
Charitable Funds Committee Members		
Paul Deneen	Independent Member (Community)	Full Year
Richard G Clarke	Independent Member (Local Authority)	Full Year
Neil Patrick	Independent Member (Community)	Full Year
Nicola Prygodzicz	Chief Executive	Full Year
Rob Holcombe	Director of Finance and Procurement	Full Year

The following also attended the committee with other staff as appropriate for specific agenda items:

Name	Designation	Dates (if less than full year)
In Attendance		
Mark Ross	Assistant Director of Finance, Financial Systems & Services	Full Year
Estelle Evans	Head of Financial Services and Accounting	Until 30/09/2024
Gareth Lewis	Head of Financial Services and Accounting	From 01/09/2024
Rani Dash	Director of Corporate Governance	Full Year

Independent Members are appointed to hold office for a period of up to four years in any one term. During this time, a member may resign or be removed by the Board. The Chair of the Health Board keeps under review the membership of Board Committees to ensure changes are made regularly to refresh the membership of each committee and respond to circumstances when new members join the Board.

Trustee Induction and Training

As part of their induction programme, new Executive and Independent Members of Aneurin Bevan University Local Health Board are made aware of their responsibilities as Board members and as a Corporate Trustee of Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities.

At each Charitable Funds Committee meeting, members are advised of any changes in legislation or other requirements relating to charities.

Public Benefit

The objects of the charity are such that all expenditure from the charity is for the benefit of the National Health Service and as such is therefore for 'public benefit'. The Charitable Funds Committee is aware of its duties in relation to public benefit and ensures that all expenditure fulfils public benefit criteria. This is demonstrated further in this report in the Expended Resources Section of Item 7.

Management of Funds

The Director of Finance is responsible for the day-to-day management and control of the administration of charitable funds and reports to the Charitable Funds Committee. The Director of Finance has responsibility for ensuring that:

- The spending is in accordance with the objects and priorities agreed by the Charitable Funds Committee.
- The criteria for spending charitable monies are fully met.
- All accounting records are maintained.
- Devolved decision making or delegated procedures are in accordance with the policies and procedures set out by the Board on behalf of the corporate trustee.

Within the charity there are 389 internal funds which are delegated to authorised fund holders to approve expenditure within predefined limits. All expenditure requests exceeding £25k are subject to Committee approval. A further 6 funds are controlled by the Charitable Funds Committee. The Health Board has a formal procedure that sets out

guidance to delegated fund managers to aid them in the process of approving appropriate expenditure from funds.

3. Strategic Objectives & Activities

Charitable Funds received by the charity are accepted, held and administered as funds held on trust in accordance with the National Health Service (Wales) Act 2006.

The principal areas in which the funds are applied for the benefit of the public are:

- The purchase of medical equipment for use by Aneurin Bevan University Local Health Board.
- The provision of patient welfare activities and amenities.
- The education and welfare of staff.

The corporate trustee fulfils its legal duty by ensuring that funds are spent in accordance with the objectives of each fund. The trustee respects the wishes of our generous donors to benefit patient care and advance good health and welfare of patients and staff.

The charity is constituted of 335 unrestricted and designated funds and 60 restricted funds as at 31st March 2025. Material fund details are shown in Note 23 to the accounts. The current structure of the individual funds reflects the fact that most of the income and expenditure is focused where patients receive services. Fund managers exercise control over the funds donated to their management area.

4. Risk Management

The main risks associated with the charity relate to:

- Financial controls risk.
- Investment risk.

Financial Control Risk

A financial control procedure has been developed for Charitable Funds and agreed with the Charitable Funds Committee and approved by the Audit Risk & Assurance Committee to ensure that there are sufficient management controls in place to ensure regulatory compliance and minimise risk of fraud and error. Specifically, to:

- Ensure the spending is in accordance with the objects of the charity and the priorities agreed by the Charitable Funds Committee.

- Ensure the criteria for spending charitable funds are fully met.
- Ensure all accounting records are maintained.
- Ensure devolved decision-making is within specified parameters.

All other Financial Control Procedures covering core financial systems within Aneurin Bevan University Local Health Board are also applied to the financial administration of the charity.

An internal audit is undertaken periodically, based on the assessment of risk, to evaluate the adequacy of procedures and controls in place and to test compliance against those procedures. Audit Reports are presented to both the Charitable Funds and Audit Risk & Assurance Committee of the Health Board and this is a key measure in mitigating control risk. The latest Internal Audit report carried out in November 2021 provided substantial assurance on controls covering charitable funds. This definition of assurance generally means there is substantial assurance that arrangements to secure governance, risk management and internal control are suitably designed and applied effectively and that few matters require attention and are compliance or advisory in nature. Financial reports showing the income statement and balance sheet together with analysis of significant financial changes are reported to each Charitable Funds Committee meeting. In addition, the Charitable Funds Committee reviews the draft annual accounts while the Board approves the final annual accounts of the charity.

The external audit of the accounts is undertaken by the Auditor General for Wales. The accounts have historically received an unqualified audit opinion.

Investment Risk

This risk is mitigated by investing in a diversified portfolio of investments through the professional advice of investment managers. Our investment managers, CCLA, attend the Charitable Funds Committee annually to present and discuss investment performance and strategy.

5. Reserves Policy

The Charitable Funds Committee reviews the Charity's reserve policy, on a regular basis, observing both Charity Commission guidance on reserves and the current level of funds held.

If reserves are too high, the charity is retaining funds without justification, and this could constitute a breach of trust. If reserves are

too low, the fund's ability to meet future commitments or needs may be at risk.

The Charity operates on the basis that it only spends what it has received and does not rely on future donations to meet its commitments. Therefore, the reserves should be set at a level sufficient to cover the liabilities that face the charity, namely the cost of administering the funds and any unrealised losses and to hold some money in reserve to act as a buffer against stock market fluctuations.

The corporate trustee fully understands the need to regularly review the level of reserves and the charity's activities and operations so that future reserves can be maintained at a level which will mitigate the risk of significant fluctuations in the levels of donations and investments, and provide financial stability for the charity, to ensure that its aim of being able to apply charitable funds within a reasonable time is achieved.

In 2022/23 the Charity had to use its reserves to mitigate the unrealised loss incurred on its investments. The Charitable Funds Committee recalculated the reserve required based on performance over the past ten years and created a new reserve by agreeing to retain the interest and dividends for 2023/24 and 2024/25 together with unrealised gain received in 2023/24 (there was an unrealised loss in 2024/25). The money now held in reserve was more than the calculated reserve of £345k required and on further review it was agreed to allocate the 2024/25 interest and dividends to the Committee's general-purpose fund to support funding applications from across the Health Board. This leaves a small excess in reserves of £69k.

The charitable funds reserve value is reviewed at least annually.

6. Grant Making Policy

The use of our funds is restricted by the governing document which established the charity for purposes connected with the NHS. Grants consist of:

General Funds

This consists of donations received by the charity where no preference as to its expenditure has been expressed by donors. The Charitable Funds Committee decides on how these funds should be spent by receiving requests from across the Health Board. The value of general funds held is £32k. There are also fixed asset valuations totalling £267k which includes 2 investment properties (£242k) and 1 painting (£25k).

Designated Unrestricted Funds

These consist of donations where a particular part of the hospital or activity was nominated by the donor at the time their donation was made. Whilst their nomination is not binding on the trustee, the designated funds reflect these nominations. The value of the designated unrestricted funds is £3,679k.

Restricted Funds

These consist of legacies and grants where a legal document and signed agreement restrict the use to the terms of the bequest/agreement. The value of restricted funds held is £966k.

During the year the charity made grants of £1,228k representing 89% of the total charitable expenditure. In making grants the trustee requires that the activity falls within the objectives of the charity and relate to the specific purpose of the individual funds from which it is being met.

7. Review of our Finances, Achievements and Performance

The financial statements for 2024/25 are presented at the end of this report.

The net assets of the Charity as at 31st March 2025 were £4,944k (31st March 2024 £5,764k). Overall net assets decreased by £820k.

Incoming Resources

Incoming resources when comparing against the 2023/24 position were £81k lower than the previous year. Donations decreased by £69k, legacies decreased by £34k, investment income decreased by £22k, grant income increased by £9k and income from charitable activities increased by £35K.

The charity received two legacies during the year, total value £10k (2023/24 four legacies, value £44k).

The charity received no new grants in 2024/25 (2023/24 five new grants, value £198k). Additional income of £37k has been received in respect of two existing grants and £65k has been carried forward to 2025-2026. Income of £228k brought forward from prior years has been released to meet expenditure in the current year.

Expended Resources

Charity expenditure for the year totalled £1,394k, an increase of £137k from the previous year. Expenditure for the year was across several categories as follows:

I. Purchase of Equipment

Total expenditure on equipment was £369k. This was on a range of varied equipment across the Health Board as described in our key purchases at the beginning of this report.

II. Building and Refurbishment

Total expenditure on building and refurbishment was £39k.

III. Patients Education and Welfare

Total expenditure on patients' welfare and amenities was £449k. The bulk of this relates to staffing costs for numerous projects such as meaningful activities, local specialist suicide bereavement service, psychological support for patients accessing cancer services, volunteer initiatives and our decarbonisation project. It also consists of various therapies, seasonal activities, support groups, volunteer expenses and other items of expenditure to benefit patients.

IV. Staff Education and Welfare

Total expenditure on staff education and welfare was £371k. The main items consist of running in-house conferences and training, team building events, attending conferences as guest speakers as well as delegates, numerous study days, seminars, training course fees, and related travelling, subsistence and accommodation expenditure, textbooks, professional journals, student bursaries, Staff Recognition Awards and staff wellbeing.

V. Fundraising Costs

There were no specific fundraising costs this financial year.

VI. Support Costs

Total expenditure on support costs was £166k. This includes the audit fee of £20k and costs of the charitable funds office and corporate support.

Investment Properties

Investment properties owned by the charity are the T P Price Estate £55k, consisting of one small parcel of land and 13, Clytha Square, Newport £187k.

13 Clytha Square, Newport is a large Victorian building in the centre of Newport which is rented to Aneurin Bevan University Local Health Board to use as offices. It was sold at auction in April 2025.

Income from the investment properties was £5k (2023/24 - £14k). This is lower because the rental agreement came to an end during the year when the building needed to be vacated to market and sell it.

Investments on the Stock Exchange

The charity's investments are managed by CCLA Investment Management Limited with the aim of managing the funds to achieve a balance of growth and income. They are contracted to provide investment management services to the charity until the end of a 3-year term on 31st March 2026 where we have an option to extend for an additional year.

The charity's investment policy does not allow managers to invest in those companies whose main business is related to the production or sale of tobacco or alcohol, or those companies involved in the arms trade.

We continue to invest in their ethical investment fund.

Details of the investments (including cash held as part of the investment portfolio) and investment performance for 2024/25 are shown in the table below:

Investment Performance 2024/25

	CCLA
	£000
Balance 1 April 2024	5,477
Acquisitions	-
Disposals	(900)
Movement of Cash	-
Realised Gains/(Loss)	-
Unrealised Gains/(Loss)	(158)
Balance 31 March 2025	4,419
Income	163
Gains/(Loss) %	(3.19%)
Returns %	3.29%

Other Investments

"The Domestic Chaplain", a painting donated to the charity many years ago is valued at £25,000 and is currently on loan to the National Museum of Wales, Cardiff.



8. Key Achievements

Funding

Expenditure totalling £77k relating to 4 bids and 8 small grant schemes from across the organisation were supported from the Charitable Funds Committee from its own general fund.

This support significantly enhanced services for the patients and staff in the Aneurin Bevan University Local Health Board as shown throughout this report.

Charitable Funds Strategy

Progress on streamlining funds has continued throughout the year. There has been a significant decrease in the number of funds held since the start of the year as a result of both the merger & closure of funds. The number of static funds has reduced due to the increase in expenditure.

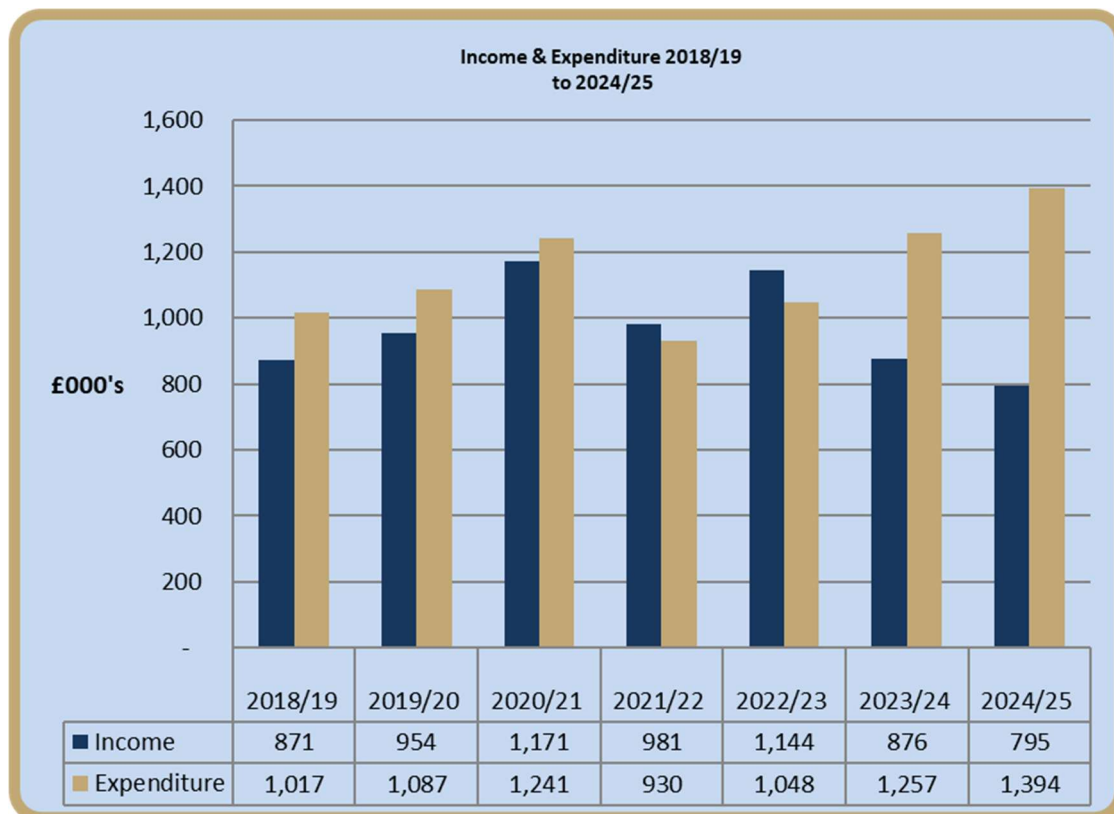
Governance Arrangements

The accounts and trustees annual report have always been produced on time with unqualified audit opinions and filed on time with the Charities Commission.

9. Plans and Objectives for the Future

Income continues to be received by the charity due to the generosity of the public in recognition of the care and treatment received from the Health Board and the charity will continue to use its funds to improve patient experience.

The following chart shows total income and expenditure received either side of the pandemic which is when we experienced our highest level of income. It also reflects that expenditure has significantly exceeded income this year and that donations are at their lowest level.



The Charity must look at ways of increasing income and to better demonstrate the impact of its charitable spending as follows:

- Raise the profile of the Charity.
- Invest in resourcing to grow and fulfil its potential

- Consider the effectiveness of using a Fundraiser.
- Discuss the use of a management consultancy firm that specialises in both raising the Charity's profile and its income.
- Support staff to work with partners to obtain grants from companies, external organisations and charities for identified equipment and projects.

Other objectives for the forthcoming year are to:

- Ensure that all accounting or charity regulatory requirements are fully complied with including reviewing the new Statement of Recommended Practice (SORP) which is expected to be published in Autumn 2025 and effective from January 2026. The SORP is a document that provides guidance on accounting and reporting, offering recommendations on how charities should prepare their financial statements and annual reports. These recommendations help ensure transparency, consistency, and accountability in how charities manage their finances.
- Explore the objectives of the charity to ensure they remain relevant and appropriate for the Health Board and to consider if Trading is something that should be added.

10. Events since the Year End

- CCLA, subject to regulatory approval, is being acquired by Jupiter Investment Management Group Limited (Jupiter), a leading European investment manager. CCLA will become part of Jupiter, retaining the CCLA branding, investment and client service approach, its mission, its stewardship activities, and its drive to build a better world.

CCLA stand to benefit from Jupiter's strength and resources. Its market-leading investment capabilities, including its 100-plus investment professionals, will add support to CCLA's existing investment team and product range. Jupiter's extensive distribution capacity both within the UK and abroad will help to facilitate CCLA's future growth, paving the way to expand into new markets.

As clients we should expect no change in service.

Looking ahead:

- President Trump's tariff negotiations may trigger volatility, but CCLA believe the fundamentals of the assets in which they invest are solid.
 - President Trump's OBBBA (One Big Beautiful Bill Act) is expected to raise companies free cash flows this year and next, so CCLA have increased their exposure to shares.
 - The OBBBA is deemed to be good for corporations but less good for consumers. Hints of a slowdown could force a decline in stock markets so despite a higher allocation to shares, CCLA are keeping a close eye on the broader economy.
-
- The Charitable Funds Committee sold the property 13 Clytha Square, Newport in April 2025.

Approved on behalf of the Corporate Trustee

**Ann Lloyd CBE
Chair
Aneurin Bevan University Local Health Board**

Date:



Aneurin Bevan University Local Health Board Charitable Fund and Other
Related Charities

The accounts for Funds Held on Trust.

FOREWORD

The Charity's accounts and annual report for the year ended 31st March 2025 have been prepared by the Corporate Trustee in accordance with the Charities Act 2011 and the Charities (Accounts and Reports) Regulations 2008.

STATUTORY BACKGROUND

Aneurin Bevan University Local Health Board is the Corporate Trustee of the Funds Held on Trust under the National Health Service (Wales) Act 2006.

The Aneurin Bevan University Local Health Board and Other Related Charities registered with the Charity Commission on 7th January 2011, registration number 1098728.

Statement of Financial Activities for the year ended 31 March 2025

	Note	Unrestricted funds £000	Restricted Income funds £000	Total Funds 2024-25 £000
Incoming resources from generated funds:				
Donations, legacies and grants	4	168	245	413
Charitable activities	5	193	0	193
Investments	7	189	0	189
Total incoming resources		550	245	795
Expenditure on:				
Raising Funds	8	11	0	11
Charitable activities	9	958	425	1,383
Total expenditure		969	425	1,394
Net gains / (losses) on investments	16	(221)	0	(221)
Net income / (expenditure)		(640)	(180)	(820)
Transfers between funds	22	0	0	0
Net Movement in funds		(640)	(180)	(820)
Reconciliation of Funds				
Total Funds brought forward	23	4,618	1,146	5,764
Total Funds carried forward		3,978	966	4,944

Statement of Financial Activities for the year ended 31 March 2024

	Note	Unrestricted funds £000	Restricted Income funds £000	Total Funds 2023-24 £000
Incoming resources from generated funds:				
Donations, legacies and grants	4	237	270	507
Charitable activities	5	158	0	158
Investments	7	211	0	211
Total incoming resources		606	270	876
Expenditure on:				
Raising Funds	8	10	0	10
Charitable activities	9	887	360	1,247
Total expenditure		897	360	1,257
Net gains / (losses) on investments	16	375	0	375
Net income / (expenditure)		84	(90)	(6)
Transfers between funds	22	3	(3)	0
Net Movement in funds		87	(93)	(6)
Reconciliation of Funds				
Total Funds brought forward	23	4,531	1,239	5,770
Total Funds carried forward		4,618	1,146	5,764

Balance Sheet as at 31 March 2025

	Note	Unrestricted funds £000	Restricted Income funds £000	Total 31 March 2025 £000	Total 31 March 2024 £000
Fixed assets:					
Investments	16	3,729	957	4,686	5,807
Total fixed assets		3,729	957	4,686	5,807
Current assets:					
Debtors	17	194	42	236	202
Cash and cash equivalents	18	405	112	517	641
Total current assets		599	154	753	843
Liabilities:					
Creditors: Amounts falling due within one year	19	350	145	495	886
Net current assets / (liabilities)		249	9	258	(43)
Total net assets / (liabilities)		3,978	966	4,944	5,764
The funds of the charity:					
Restricted income funds	23	0	966	966	1,146
Unrestricted income funds	23	3,978	0	3,978	4,618
Total funds		3,978	966	4,944	5,764

The notes on pages 5 to 17 form part of these accounts

Approved by the Trustees on 28 January 2026 and signed on its behalf by:

Signed :

Name : (Chair of Trustees)

Statement of Cash Flows for the year ending 31 March 2025

	Note	Total Funds 2024-25 £000	Total Funds 2023-24 £000
Cash flows from operating activities:			
Net cash provided by (used in) operating activities	21	(1,213)	(122)
Cash flows from investing activities:			
Dividend, interest and rents from investments	7	189	211
Proceeds from the sale of investments	16	900	25
Net cash provided by (used in) investing activities		1,089	236
Change in cash and cash equivalents in the reporting period		(124)	114
Cash and cash equivalents at the beginning of the reporting period	18	641	527
Cash and cash equivalents at the end of the reporting period	18	517	641

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 market 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 in October 2019 and the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) and the Charities Act 2011 and UK Generally Accepted Practice as it applies from 1 January 2019.

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 in October 2019 rather than the Accounting and Reporting by Charities: Statement of Recommended Practice effective from 1 April 2005 which has since been withdrawn.

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 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 as a restricted 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, grants and legacies for specified purposes.

Those funds which are not restricted income funds, are unrestricted income funds which are sub-analysed 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 23.

(c) Incoming resources

Income consists of donations, legacies, grants, 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 but 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.

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) 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 12.

(g) 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 consists of expenses for fundraising activities.

(h) 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 9.

(i) Fixed Asset Investments

Ethical Fund Investments are stated at mid-market value as at the balance sheet date, and Property Fund investments are stated at net asset value. Investment properties are included at their open market valuation. The statement of financial activities includes the net gains and losses arising on revaluation and disposals throughout the year.

Quoted stocks and shares are included in the balance sheet at mid-market price, excluding dividend.

Other assets are valued on an open market basis by a professional valuer.

(j) Debtors

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

(k) 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.

(l) 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.

(m) 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 market value at the year end and opening carrying value (or purchase date if later).

2. Key Judgements and Assumptions

Average fund balances are used to apportion certain balances across restricted and unrestricted funds, which is deemed to be the most appropriate methodology to use.

There are no material assumptions judged to affect the 2024/25 accounts.

As at 31st March 2025, there is no other information to show that assets/liabilities would need to be materially adjusted during 2025/26.

3. Related party transactions

The Aneurin Bevan University Local Health Board is the sole beneficiary of the charity.

The charity had significant material transactions with Aneurin Bevan University Local Health Board as follows:

	2024-25		As at 31st March 2025	
	Expenditure to related party	Income from related party	Amounts owed to related party	Amounts due from related party
	£000	£000	£000	£000
Aneurin Bevan University Local Health Board	1,394	17	263	3

The Corporate Trustee has interests in related parties as follows:

Member	Related Organisation	Relationship with Related Party	2024-25		As at 31st March 2025	
			Expenditure to related party	Income from related party	Amounts owed to related party	Amounts due from related party
			£000	£000	£000	£000
Penny Jones	Monmouthshire County Council	Councillor	0	0	0	0

The Corporate Trustee has interests in a number of related parties. All transactions with those related parties have been reviewed and there are nil transactions except for those listed above.

The value of expenditure paid to Monmouthshire County Council was less than £500 and therefore rounds to £0 in the above table.

3. Related party transactions (continued)

In 2023-24 the charity had significant material transactions with Aneurin Bevan University Local Health Board as follows:

	2023-24		As at 31st March 2024	
	Expenditure to related party	Income from related party	Amounts owed to related party	Amounts due from related party
	£000	£000	£000	£000
Aneurin Bevan University Local Health Board	1,257	39	378	8

The Corporate Trustee has interests in related parties as follows:

Member	Related Organisation	Relationship with Related Party	2023-24		As at 31st March 2024	
			Expenditure to related party	Income from related party	Amounts owed to related party	Amounts due from related party
			£000	£000	£000	£000
Nicola Prygodzicz	Velindre NHS Trust	Sister is a Senior Nurse in the Corporate Nursing Team	4	0	1	0
Penny Jones	Monmouthshire County Council	Councillor	1	0	0	0
Martin Blakebrough	Kaleidoscope Project	Chief Executive	0	0	0	0

The Corporate Trustee has interests in a number of related parties. All transactions with those related parties have been reviewed and there are nil transactions except for those listed above.

The value of income from Kaleidoscope Project was less than £500 and therefore rounds to £0 in the above table.

4. Income from donations, legacies and grants

	Unrestricted funds £000	Restricted Income funds £000	Total 2024-25 £000	Total 2023-24 £000
Donations	168	0	168	237
Legacies	0	10	10	44
Grants	0	235	235	226
	168	245	413	507

5. Income from charitable activities

	Unrestricted funds £000	Restricted Income funds £000	Total 2024-25 £000	Total 2023-24 £000
Course income	193	0	193	149
Other income	0	0	0	9
	193	0	193	158

6. Role of volunteers

Volunteers have the trust and understanding of the community and are invaluable in engaging with our patients and providing support to paid professionals . The services they provide include:

- welcome services at our hospitals, directing patients and visitors
- befriending service for patients in our hospitals and nursing homes
- end of life companion support for patients in our hospitals
- operating buffet /coffee bars through volunteer organisations such as the League of Friends
- raising funds to purchase equipment across our hospitals.

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.

7. Gross investment income

	Unrestricted funds £000	Restricted Income funds £000	Total 2024-25 £000	Total 2023-24 £000
Fixed asset equity and similar investments	168	0	168	189
Short term investments, deposits and cash	21	0	21	22
	189	0	189	211

8. Analysis of expenditure on raising funds

	Unrestricted funds £000	Restricted Income funds £000	Total 2024-25 £000	Total 2023-24 £000
Fundraising office	0	0	0	0
Fundraising events	0	0	0	0
Investment management	0	0	0	0
Support costs	11	0	11	10
	11	0	11	10

The investment management fee is shown as nil as this is deducted from capital held by the investment management company.

Note 12 sets out an analysis of support costs

9. Analysis of charitable activity

Split by activity	Grant funded activity £000	Support costs £000	Total 2024-25 £000	Total 2023-24 £000
Purchase of equipment	369	47	416	299
Building and refurbishment	39	5	44	189
Staff education and welfare	371	47	418	327
Patient education and welfare	449	56	505	432
	1,228	155	1,383	1,247

Note 12 sets out an analysis of support costs

Split by fund type	Grant funded activity £000	Support costs £000	Total 2024-25 £000	Total 2023-24 £000
Restricted Funds	383	41	425	360
Unrestricted Funds	845	114	958	887
	1,228	155	1,383	1,247

10. Analysis of grants

The majority of grants are made to the Health Board to provide for the care of NHS patients in furtherance of our charitable aims. The charity makes grants to individuals from one specific fund which is used to support nominated medical students from deprived areas. 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 9.

The trustees operate a scheme under which Fund Holders control how the Charity's designated funds should be spent. The day to day disbursements are in accordance with the directions set out by the trustees in the Charity's Standing Orders and Financial Instructions.

Where undesignated funds exist, the trustees do make grant awards based on applications from across the Health Board.

11. Movements in funding commitments

	Current liabilities	Non-current liabilities	Total 31 March 2025	Total 31 March 2024
	£000	£000	£000	£000
Opening balance at 1 April	375	0	375	563
Movement in funding commitments	(285)	0	(285)	(188)
Closing balance at 31 March 2025	90	0	90	375

As described in notes 9 and 10, 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 are paid over a longer period.

12. Apportionment of support costs

Support and overhead costs are allocated between fundraising activities and charitable activities. Governance costs are those support costs which relate to the strategic and day to day management of the charity, including Committee members' time spent on Charitable Funds Committee activity.

	Raising funds	Charitable activities	Total 2024-25	Total 2023-24	Basis
	£000	£000	£000	£000	
Governance					
External audit	1	19	20	19	Average fund balance
Finance and administration	4	79	83	82	Average fund balance
Total governance	5	98	103	101	
Finance and administration	6	57	63	59	Average fund balance
Total Finance and Administration	6	57	63	59	
	11	155	166	160	

	Unrestricted funds	Restricted Income funds	Total Funds 2024-25	Total Funds 2023-24
	£000	£000	£000	£000
Raising funds	11	0	11	10
Charitable activities	125	30	155	150
	136	30	166	160

13. Trustees' remuneration, benefits and expenses

The charity does not make payments for remuneration nor to reimburse expenses to the charity trustees for their work undertaken as trustee.

14. Analysis of staff costs

The charity has no employees. Staff services are provided to the charity by Aneurin Bevan University Local Health Board, the Corporate Trustee of the charity, which has received reimbursement of £451,295 (2023-24: £414,818) for these services.

15. Auditors remuneration

The auditors remuneration of £20,099 (2023-24: £19,764) related solely to the audit of the statutory annual report and accounts.

16. Fixed asset investments

Movement in fixed assets investments

	Investment Properties £000	Investments Listed on Stock Exchange £000	Cash Held in Investment Portfolio £000	Other Assets £000	Total 2024-25 £000	Total 2023-24 £000
Market value brought forward	305	5,477	0	25	5,807	5,457
Add: additions to investments at cost	0	0	0	0	0	0
Less disposals at carrying value	0	(900)	0	0	(900)	(25)
Add any gain / (loss) on revaluation	(63)	(158)	0	0	(221)	375
Movement of cash held as part of the investment portfolio	0	0	0	0	0	0
Market value as at 31st March 2025	242	4,419	0	25	4,686	5,807

All investments are carried at their market value.

The investment valuation has been performed by CCLA Investment Management Limited.

The valuation of investment properties, consisting of a property and a small parcel of land, is based on a professional assessment of market value, by independent RICS (Royal Institute of Chartered Surveyors) qualified valuers at least every five years.

The other asset relates to a painting which is valued by an independent auctioneer and valuer of art, pictures and collectables, every 5 years.

The significance of financial instruments to the ongoing financial sustainability of Aneurin Bevan University Health Board Charitable Fund is considered in the risk management section of the trustees' annual report.

The Charity receive the majority of their income in the form of donations. However, significant investments are made and are the source of the main financial risk.

Interest rate risk - the Charity is exposed to fluctuations in interest rates on the monies invested in deposits and the stock market.

Liquidity risk is the risk that the charity does not have sufficient available resources to enable it to meet its obligations as they fall due. The vast majority of expenditure is funded from donations and legacies and therefore the Charity is not exposed to significant liquidity risk. The Charity also holds around 6 months of expenditure in its cash balance to cover any short term fluctuations and holds a reserve to protect against any fluctuations in the value of investments. Investments can be converted into liquid cash easily and with

17. Analysis of current debtors

Debtors under 1 year	Total 31 March 2025 £000	Total 31 March 2024 £000
Accrued income	80	95
Trade Debtors	130	84
Prepayments	26	23
	236	202

18. Analysis of cash and cash equivalents

	Total 31 March 2025 £000	Total 31 March 2024 £000
Current Accounts	516	640
Petty Cash	1	1
	517	641

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

All of the amounts held on interest bearing deposit are available to spend on charitable activities.

19. Analysis of liabilities

Creditors under 1 year	Total 31 March 2025 £000	Total 31 March 2024 £000
Trade creditors	380	560
Deferred Income	90	305
Accruals	20	12
Other Creditors	5	9
Total creditors	495	886

20. Analysis of Deferred Income

	Total 1 April 2024 £000	Deferred £000	Released £000	Total 31 March 2025 £000
Grant Income	292	0	(228)	64
Other Income	13	26	(13)	26
	305	26	(241)	90

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

	Total 2024-25 £000	Total 2023-24 £000
Net income / (expenditure) (per Statement of Financial Activities)	(808)	(6)
Adjustment for:		
(Gains) / losses on investments	221	(375)
Dividends, interest and rents from investments	(189)	(211)
(Increase) / decrease in debtors	(34)	26
Increase / (decrease) in creditors	(403)	444
Net cash provided by (used in) operating activities	<u>(1,213)</u>	<u>(122)</u>

22. Transfer between funds

Transfers have been actioned between Unrestricted funds during 2024/25 to streamline the number of funds in line with the Charitable Funds Committee plans to merge and reduce the number of Charitable Funds.

23. Analysis of funds

a. Analysis of restricted fund movements

	Balance 1 April 2024 £000	Income £000	Expenditure £000	Transfers £000	Gains and losses £000	Balance 31 March 2025 £000
Gastroenterology Fellowship Legacy	106	0	(4)	0	0	102
Royal Gwent Childrens Ward Legacy	97	0	(28)	0	0	69
Renal Unit Legacy	70	0	(2)	0	0	68
Nevill Hall Coronary Care Legacy	67	0	(4)	0	0	63
Royal Gwent Haematology Legacy	59	0	(3)	0	0	56
Royal Gwent Breast Care Legacy	59	0	(3)	0	0	56
Nevill Hall Rheumatology Legacy	83	0	(32)	0	0	51
Other - 53 restricted designated funds	605	245	(349)	0	0	501
	<u>1,146</u>	<u>245</u>	<u>(425)</u>	<u>0</u>	<u>0</u>	<u>966</u>

The material funds specified in the above note will vary from year to year dependent on the closing year end balance.

We consider that a closing fund balance of £50,000 or greater are material for disclosure in these accounts.

23. Analysis of funds (continued)

The objects of each of the restricted funds are as follows:

The Gastroenterology Legacy fund was bequeathed to the charity to assist in colonoscopy practices within the Health Board.

The Royal Gwent Hospital Children's Ward Legacy Fund was bequeathed to the charity for the benefit of the Children's Ward. A proposal for the purchase of various equipment to improve patient care and access was approved by the Charitable Funds Committee.

The Renal Unit Legacy Fund was bequeathed to the charity for the purpose connected with the research and treatment of patients under haemodialysis treatment (kidney unit).

The Nevill Hall Coronary Care Legacy Fund was bequeathed to the charity for the use of the heart unit at the hospital.

The Royal Gwent Haematology Fund was bequeathed to the charity for the Haematology Unit at the Royal Gwent Hospital.

The Royal Gwent Breast Care Legacy Fund was bequeathed to the charity for the Breast Care Unit at the Royal Gwent Hospital.

The Nevill Hall Rheumatology Legacy Fund was bequeathed to the charity for the use of the Rheumatology department at the hospital.

The other 53 restricted funds also related to monies bequeathed to the charity for various wards and departments.

23. Analysis of funds (continued)**b. Analysis of unrestricted and material designated fund movements**

	Balance 1 April 2024	Income	Expenditure	Transfers	Gains and losses	Balance 31 March 2025
	£000	£000	£000	£000	£000	£000
ABUHB Charitable Funds Reserves	597	184	0	(25)	(158)	598
ABUHB Breast Centre	260	15	(31)	106	0	350
Royal Gwent Property, 13 Clytha Square	250	0	0	0	(63)	187
Royal Gwent Casting Techniques Course	110	17	(25)	0	0	102
St Woolos Springfield Community Ward Project	108	0	(12)	0	0	96
ABUHB Patient Experience & Involvement Team	22	0	(26)	85	0	81
The Care Project	105	45	(84)	0	0	66
ABUHB Outpatients	81	0	(24)	0	0	57
Monmouth Chippenham Community Nurses	60	0	(3)	0	0	57
Royal Gwent Property, TP Price	55	0	0	0	0	55
ABUHB Post Graduate Fund	56	2	(4)	0	0	54
ABUHB Rheumatology	55	0	(2)	0	0	53
Royal Gwent Post Graduate Fund	50	5	(5)	0	0	50
Other - 321 unrestricted designated funds	2,809	282	(753)	(166)	0	2,172
	4,618	550	(969)	0	(221)	3,978

The trustees have delegated all unrestricted funds as designated funds to the ward or department the donations were intended for.

The material funds specified in the above note will vary from year to year dependent on the closing year end balance.

We consider that a closing fund balance of £50,000 or greater are material for disclosure in these accounts.

24. Events after the reporting period

In April 2025 the Charity sold 13 Clytha Square, one of its investment properties. The sale value of this investment property is reflected as the carrying value held at year end in Note 16. The actual sale will be shown in the 2025/26 Annual Accounts.

World and political events are likely to continue to cause fluctuation in the markets and impact on our investments in 2025/26.

Statement of Trustee's Responsibilities

The law applicable to charities in England and Wales requires the Trustee to prepare financial statements for each financial year which give a true and fair view of the charity's financial activities during the year and its financial position at the end of the year. In preparing financial statements giving a true and fair view, the Trustee should follow best practice and :

- select suitable accounting policies and apply them consistently;
- observe the methods and principles of the Charities SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable accounting standards and statements of recommended practice have been followed, subject to any departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

The Trustee is responsible for keeping accounting records which disclose with reasonable accuracy the financial position of the charity and which enable them to ascertain the financial position of the charity and which enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the trust deed. The Trustee is responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Trustee confirms that they have complied with the above requirements.

By order of the trustee

Ann Lloyd
Trustee

Rob Holcombe
Financial Trustee

Dated: XX January 2026

The independent auditor's report of the Auditor General for Wales to the trustee of Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities

Opinion on financial statements

I have audited the financial statements of Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities for the year ended 31 March 2025 under the Charities Act 2011.

The financial statements comprise the Statement of Financial activities, Balance Sheet, Statement of Cash Flows and related notes, including the material 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 2025 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)) and Practice Note 10 'Audit of Financial Statements of Public Sector Entities in the United Kingdom'. My responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of my report.

My staff and I are 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

In auditing the financial statements, I have concluded that the use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work I have performed, I have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the body's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from when the financial statements are authorised for issue.

My responsibilities and the responsibilities of the trustee with respect to going concern are described in the relevant sections of this report.

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 trustee is responsible for the other information contained within the annual report. 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. My responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If I identify such material inconsistencies or apparent material misstatements, I am required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact.

I have nothing to report in this regard.

Matters on which I report by exception

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

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

Responsibilities of the trustee for the financial statements

As explained more fully in the statement of trustee's responsibilities, the trustee is responsible for:

- maintaining sufficient accounting records;
- the preparation of the financial statements in accordance with the applicable financial reporting framework and for being satisfied that they give a true and fair view;
- internal controls as the trustee determine is necessary to enable the preparation of financial statements to be free from material misstatement, whether due to fraud or error;
- assessing the charity's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless the trustee anticipate that the services provided by the charity will not continue to be provided in the future.

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.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. I design procedures in line with my responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud.

My procedures included the following:

- Enquiring of management and those charged with governance, including obtaining and reviewing supporting documentation relating to Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities' policies and procedures concerned with:
 - identifying, evaluating and complying with laws and regulations and whether they were aware of any instances on non-compliance;
 - detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected or alleged fraud; and
 - the internal controls established to mitigate risks related to fraud or non-compliance with laws and regulations.

- Considering as an audit team how and where fraud might occur in the financial statements and any potential indicators of fraud. As part of this discussion, I identified potential for fraud in the following areas: revenue recognition, expenditure recognition, posting of unusual journals.
- Obtaining an understanding of Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities' framework of authority as well as other legal and regulatory frameworks that the Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities operated in, focusing on those laws and regulations that had a direct effect on the financial statements or that had a fundamental effect on the operations of the charity.
- Obtaining an understanding of related party relationships.

In addition to the above, my procedures to respond to identified risks included the following:

- reviewing the financial statement disclosures and testing to supporting documentation to assess compliance with relevant laws and regulations discussed above;
- enquiring of management, those charged with governance and legal advisors about actual and potential litigation and claims;
- reading minutes of meetings of those charged with governance and the trustee;
- in addressing the risk of fraud through management override of controls, testing the appropriateness of journal entries and other adjustments; assessing whether the judgements made in making accounting estimates are indicative of a potential bias; and evaluating the business rationale of any significant transactions that are unusual or outside the normal course of business; and
- I also communicated relevant identified laws and regulations and potential fraud risks to all audit team and remained alert to any indications of fraud or non-compliance with laws and regulations throughout the audit.

The extent to which my procedures are capable of detecting irregularities, including fraud, is affected by the inherent difficulty in detecting irregularities, the effectiveness of the Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities' controls, and the nature, timing and extent of audit procedures performed.

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.

Other auditor's responsibilities

I communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

Adrian Crompton
Auditor General for Wales
13 January 2026

24 Cathedral Road
Cardiff
CF11 9LJ



**CYFARFOD BWRDD IECHYD PRIFYSGOLN
ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD
MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 January 2026
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Annual Accounts Letter of Representation 2024/25
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Rob Holcombe, Director of Finance, Procurement and Value Based Healthcare
SWYDDOG ADRODD: REPORTING OFFICER:	Gareth Lewis, Head of Financial Services & Accounting

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

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

As part of their annual audit process, Audit Wales have requested the Health Board submit a Letter of Representation, as evidence that trustees of the charity acknowledge and accept responsibility for the financial statements.

The letter will give the auditors' and stakeholders assurance of the accuracy of the financial information, and that management accepts its' responsibility for the accuracy and completeness of the financial statements.

Cefndir / Background

As above

Asesiad / Assessment

The letter, which is attached, details the responsibilities of the trustees of the charity and confirms that all information shared with the auditors relevant to the financial statements has been presented faithfully and represents a true and fair view of the financial statements.

The letter will be presented to the Board on the 28th January, alongside the Final Accounts and Annual Report for final approval, before being submitted to Audit Wales.

Argymhelliad / Recommendation

The Committee is asked to recommend the Letter of representation is approved by the Board.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	3.5 Record Keeping Choose an item. Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Not Applicable Choose an item.
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Choose an item. Finance
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Not Applicable Choose an item. Choose an item. Choose an item.

Gwybodaeth Ychwanegol:

Further Information:

Ar sail tystiolaeth: Evidence Base:	
--	--

Rhestr Termau: Glossary of Terms:	
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive Committee, including: policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
• Workforce	Not Applicable
• Service Activity & Performance	Not Applicable
• Financial	Yes, outlined within the paper
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	No does not meet requirements An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk
Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working https://futuregenerations.wales/about-us/future-generations-act/	Choose an item. Long Term - The importance of balancing short-term needs with the needs to safeguard the ability to also meet long-term needs



Our ref: **RJ/GL 01-26**

Auditor General for Wales

Audit Wales
1 Capital Quarter
Tyndall Street
Cardiff
CF10 4BZ

28 January 2026

Representations regarding the 2024-25 financial statements

This letter is provided in connection with your audit of the financial statements of Aneurin Bevan University Health Board Charitable Fund and Other Related Charities for the year ended 31 March 2025 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 Charities Act 2011; in particular the financial statements give a true and fair view in accordance therewith;
- 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 Aneurin Bevan University Health Board Charitable Fund and Other Related Charities 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.

The methods, the data and the significant assumptions used in making accounting estimates, and their related disclosures are appropriate to achieve recognition, measurement or disclosure that is reasonable in the context of the applicable financial reporting framework.

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. The effects of uncorrected misstatements identified during the audit are immaterial, both individually and in the aggregate, to the financial statements taken as a whole.

Representations by the Board

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

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 Aneurin Bevan University Health Board on 28 January 2026.

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:
Nicola Prygodzicz

Signed by:
Ann Lloyd

Chief Executive and Accountable Officer

Board Chair

Date:

Date:

Audit of Accounts Report – Aneurin Bevan UHB Charitable Funds and Other Related Charities

Audit year: 2024-25

Date issued: December 2025

Document reference: 5168A2025



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

The Auditor General, Wales Audit Office and staff of the Wales Audit Office accept no liability in respect of any reliance or other use of this document by any member, director, officer or other employee in their individual capacity, or any use by any third party.

For further information, or if you require any of our publications in an alternative format and/or language, please contact us by telephone on 029 2032 0500, or email info@audit.wales.

We welcome correspondence and telephone calls in Welsh and English. Corresponding in Welsh will not lead to delay. Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg a Saesneg. Ni fydd gohebu yn Gymraeg yn arwain at oedi.

Introduction



Adrian Crompton

Auditor General for
Wales

I am pleased to share my Audit of Accounts Report. The Report summarises the main findings from my audit of your 2024-25 annual report and accounts. My team have already discussed these findings with the Finance Team.

My team have substantially completed the audit work as set out in my Audit Plan dated September 2025. The remaining tasks involve: the finalisation of cut off testing related to one course income sample.

Since my Audit Plan, I have updated materiality to reflect the 2024-25 accounts. I have not identified any new audit risks. My

response to previously identified risks is set out in **Appendix 1**.

I am required to provide an opinion on whether the accounts have been properly prepared and give a true and fair view, in all material aspects. My proposed audit opinion and basis for it is outlined on page 15.

It is the responsibility of the those charged with governance, i.e. the Charitable Funds Committee to address any matters raised in my report and provide me with a Letter of Representation.

I would like to extend my gratitude to the officers and staff of the Health Board Charity for their cooperation throughout the audit process which has been invaluable in completing this audit effectively.

Your audit at a glance



We intend to issue an **unqualified opinion** on the accounts

See [Appendix 4](#)



There are no **other significant matters** to report

See [Audit findings](#)



There are no **uncorrected misstatements** in the accounts

See [Audit findings](#)



We have raised **recommendations** as a result of our work

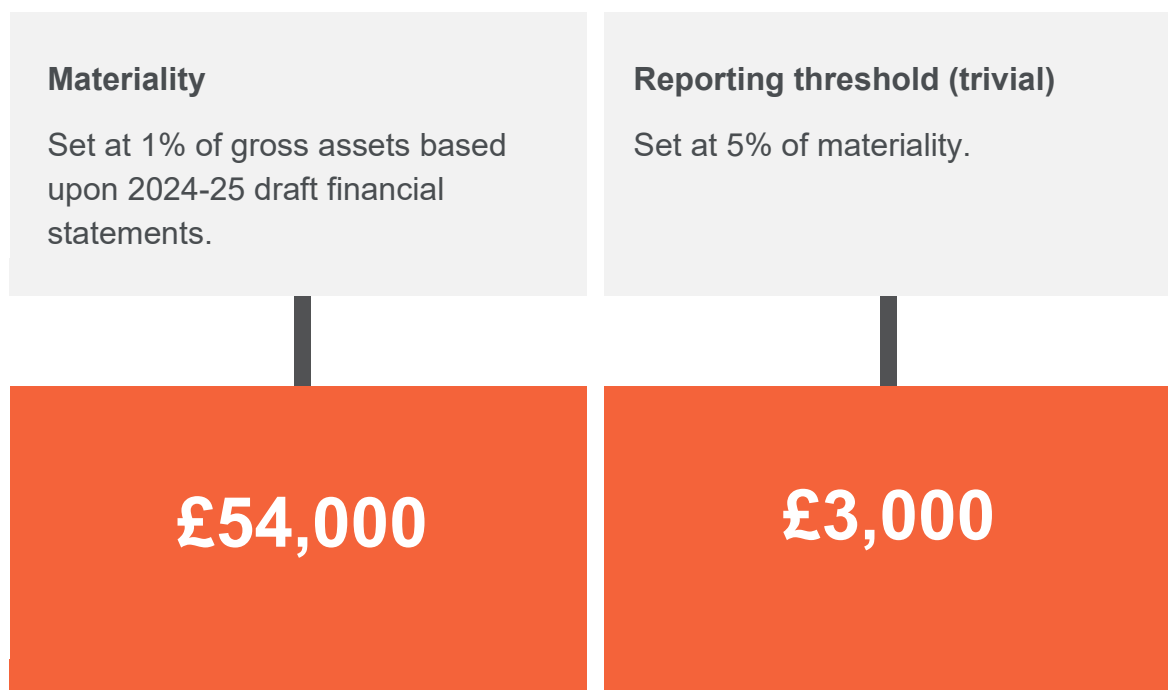
See [Appendix 5](#)



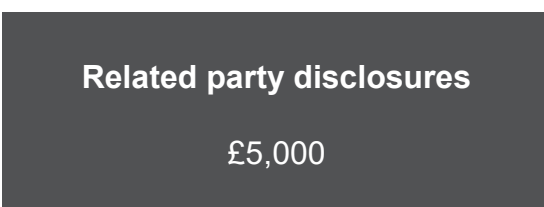
We are aiming to certify your accounts on 13 January 2026, which is ahead of the Charity Commission deadline of 31 January 2026.

Materiality

I use professional judgement to set a materiality threshold to identify and correct misstatements that could affect users' decisions, considering both financial errors and disclosure requirements according to the applicable accounting framework and laws. My team updates materiality throughout the audit and I include in this report matters that exceed my reporting threshold, as set out below:



There are some areas of the accounts that may be of more importance to the user of the accounts. We confirm lower materiality levels for these:



Audit Findings

Misstatements

A misstatement arises where information in the accounts is not in accordance with accounting standards.

Uncorrected misstatements

There were no uncorrected misstatements identified in the accounts.

Corrected misstatements

During our audit, we identified misstatements that have been corrected by management, but which we consider should be drawn to your attention.

These are set out in **Appendix 2**.

Other significant issues

International Standard on Auditing 260 requires us to communicate with those charged with governance. We must tell you significant findings from the audit and other matters if they are significant to your oversight of the Charity's financial reporting process. We have not identified any significant issues that we need to report to you.

Proposed audit opinion

Audit opinion

We intend to issue an unqualified audit opinion on this year's accounts once you have provided us with a Letter of Representation (see below).

Our proposed audit report is set out in **Appendix 3**.

Letter of representation

A Letter of Representation is a formal letter in which you confirm to us the accuracy and completeness of information provided to us during the audit. Some of this information is required by auditing standards; other information may relate specifically to your audit.

The letter we are requesting you to sign is included in **Appendix 4**, the contents of which are in line with our standard request for representations.

Recommendations

We have made recommendations during the audit, which are set out in **Appendix 5** along with management's responses to the recommendations.

We will monitor progress against the recommendations during next year's audit.

Audit team and ethical compliance

The main members of my team who carried out the audit work, together with their contact details, are summarised in **Exhibit 1**.

Exhibit 1: my local audit team

Engagement Lead Richard Harries
richard.harries@audit.wales

Audit Manager Julie Rees
julie.rees@audit.wales

Audit Lead Matthew Argyle
matthew.argyle@audit.wales

Compliance with ethical standards

We confirm that:

- we have complied with the ethical standards we are required to follow in carrying out our work;
- we have remained independent of yourselves;
- our objectivity has not been comprised; and
- we have no relationships that could undermine our independence or objectivity.

Appendix 1 – Audit risks and outcomes

My Audit Plan set out the risks of material misstatement for the audit.

Exhibit 2 lists these audit risks and sets out how they were addressed as part of the audit. No additional audit risks have been identified since that need to be brought to your attention.

Exhibit 2: audit risks reported previously, work done and outcome

Audit risk	Work done	Outcome
<p>Risk of management override</p> <p>The risk of management override of controls is present in all entities. Due to the unpredictable way in which such override could occur, it is viewed as a significant risk [ISA 240.32-33].</p>	<p>The audit team:</p> <ul style="list-style-type: none">• tested the appropriateness of journal entries and other adjustments made in preparing the financial statements;• reviewed accounting estimates for bias; and• evaluated the rationale for any significant transactions outside the normal course of business.	<p>My audit work did not identify any instances of management override of controls.</p>

Valuation of Investment Assets

The value of investment assets reflected in the balance sheet and notes to the accounts are material estimates. These estimates are subject to a high degree of subjectivity, depending on specialist and management assumptions.

In April 2025 the Charity also sold one of its material investment properties.

There is a risk that the carrying value of investment assets recognised in the accounts could be materially different to the current value of assets as at 31 March 2025.

The audit team:

- reviewed the information provided to the valuers to assess for completeness;
- evaluated the competence, capabilities and objectivity of the professional valuers;
- tested a sample of assets revalued in the year to ensure the valuation basis, key data and assumptions used in the valuation process are reasonable, and the revaluations have been correctly reflected in the financial statements;
- reviewed the accounting treatment of assets held for sale; and
- tested the reconciliation between the financial ledger and the asset register.

My audit work did not identify any issues with the valuation of investment assets.

Related Party Disclosures

The financial statements must disclose any related party relationships along with the transactions and balances between the body and the other body/party.

The body has many relationships that could be considered a related party. Many are well known for example with the Health Board.

However, where related party relationships arise via individual officer or member relationships, there is likely to be less transparency regarding these relationships. These transactions are of high interest and are considered to be material by their nature

There is a risk of material misstatement due to incomplete or inaccurate disclosures, even where these are of relatively low value.

The audit team:

- reviewed management’s process for identifying related party relationships and associated transactions and balances;
- undertook procedures to confirm the completeness of related party relationships; and
- ensured disclosures were complete, accurate, consistent with evidence and are in accordance with accounting requirements.

My audit work did not identify any issues with related party disclosures.

Accounting for Grant Income

Grant income is a material balance in the Charity's financial statements. In 23-24, a material amount of grant income was incorrectly deferred because the grants did not have the sufficient conditions to allow deferment per the SORP.

There is a risk that grant income is incomplete.

The audit team:

- reviewed the work the Charity has completed in response to our 23-24 recommendation on the matter; and
- tested a sample of grant income and deferred income to ensure completeness and compliance with the SORP.

My audit work did not identify issues accounting for grant income in 24-25.

Appendix 2 – Summary of corrections made

During our audit, we identified the following misstatements that have been corrected by management, but which we consider should be drawn to your attention.

Value of correction	Accounts area	Explanation
£6,000	Note 5 - Income from charitable activities	The prepaid element of course income relating to 2025-26 had been incorrectly accounted for as income in 2024-25.
£0	Annual Report	<p>A section of the annual report stated that staff had raised funds for the charity during 2024-25. However, these funds were not received until 2025-26 meaning the Annual Report was inconsistent with the financial statements.</p> <p>This is a narrative adjustment only and has not requirement amendment of the financial statements.</p>

Appendix 3 – Proposed audit report

The independent auditor's report of the Auditor General for Wales to the trustee of Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities

Opinion on financial statements

I have audited the financial statements of Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities for the year ended 31 March 2025 under the Charities Act 2011.

The financial statements comprise the Statement of Financial Activities, Balance Sheet, Statement of Cash Flows and related notes, including the material 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 2025 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)) and Practice Note 10 'Audit of financial statements and regularity of public sector bodies in the United Kingdom'. My responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of my report.

My staff and I are 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

In auditing the financial statements, I have concluded that the use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work I have performed, I have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the body's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from when the financial statements are authorised for issue.

My responsibilities and the responsibilities of the trustee with respect to going concern are described in the relevant sections of this report.

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 trustee is responsible for the other information contained within the annual report. 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. My responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If I identify such material inconsistencies or apparent material misstatements, I am required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact.

I have nothing to report in this regard.

Matters on which I report by exception

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

- I have not received all of the information and explanations I require for my audit;
- sufficient accounting records have not been kept, or returns adequate for my audit have not been received from branches not visited by my team;
- the financial statements are not in agreement with the accounting records and returns; or

- the information given in the financial statements is inconsistent in any material respect with the trustee's report.

Responsibilities of the trustee for the financial statements

As explained more fully in the statement of trustee's responsibilities, the trustee is responsible for:

- maintaining sufficient accounting records;
- the preparation of the financial statements in accordance with the applicable financial reporting framework and for being satisfied that they give a true and fair view;
- internal controls as the trustee determine is necessary to enable the preparation of financial statements to be free from material misstatement, whether due to fraud or error;
- 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 the trustee anticipate that the services provided by the charity will not continue to be provided in the future.

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.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. I design procedures in line with my responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud.

My procedures included the following:

- Enquiring of management, the Head of internal audit and those charged with governance, including obtaining and reviewing supporting documentation relating to the charity's policies and procedures concerned with:

- identifying, evaluating and complying with laws and regulations and whether they were aware of any instances of non-compliance;
 - detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected or alleged fraud; and
 - the internal controls established to mitigate risks related to fraud or non-compliance with laws and regulations.
- Considering as an audit team how and where fraud might occur in the financial statements and any potential indicators of fraud. As part of this discussion, I identified potential for fraud in the following areas: revenue recognition, expenditure recognition, posting of unusual journals;
 - Obtaining an understanding of the Charity’s framework of authority as well as other legal and regulatory frameworks that the [name of charity] operates in, focusing on those laws and regulations that had a direct effect on the financial statements or that had a fundamental effect on the operations of the Charity.
 - Obtaining an understanding of related party relationships.

In addition to the above, my procedures to respond to identified risks included the following:

- reviewing the financial statement disclosures and testing to supporting documentation to assess compliance with relevant laws and regulations discussed above;
- enquiring of management, those charged with governance and legal advisors about actual and potential litigation and claims;
- reading minutes of meetings of those charged with governance and the trustee;
- in addressing the risk of fraud through management override of controls, testing the appropriateness of journal entries and other adjustments; assessing whether the judgements made in making accounting estimates are indicative of a potential bias; and evaluating the business rationale of any significant transactions that are unusual or outside the normal course of business; and
- I also communicated relevant identified laws and regulations and potential fraud risks to all audit team members and remained alert to any indications of fraud or non-compliance with laws and regulations throughout the audit.

The extent to which my procedures are capable of detecting irregularities, including fraud, is affected by the inherent difficulty in detecting irregularities, the effectiveness of the Charity’s controls, and the nature, timing and extent of the audit procedures performed.

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.

Other auditor's responsibilities

I communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

Adrian Crompton
Auditor General for Wales
13 January 2026

1 Capital Quarter
Tyndall Street
Cardiff
CF10 4BZ

Appendix 4 – Letter of representation

[Audited body's letterhead]

Auditor General for Wales
Audit Wales
1 Capital Quarter
Tyndall Street
Cardiff
CF10 4BZ

[Date]

Representations regarding the 2024-25 financial statements

This letter is provided in connection with your audit of the financial statements of Aneurin Bevan University Health Board Charitable Fund and Other Related Charities for the year ended 31 March 2025 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 Charities Act 2011; in particular the financial statements give a true and fair view in accordance therewith;
- 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 Aneurin Bevan University Health Board Charitable Fund and Other Related Charities 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.

The methods, the data and the significant assumptions used in making accounting estimates, and their related disclosures are appropriate to

achieve recognition, measurement or disclosure that is reasonable in the context of the applicable financial reporting framework.

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. The effects of uncorrected misstatements identified during the audit are immaterial, both individually and in the aggregate, to the financial statements taken as a whole.

Representations by the Board

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

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 Aneurin Bevan University Health Board on 7 January 2026.

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:

Nicola Prygodzicz

Chief Executive and Accountable
Officer

Date:

Signed by:

Ann Lloyd

Board Chair

Date:

Appendix 5 – Recommendation(s)

We set out below recommendations from our audit along with your management's response to them.

Course Income Accounting

Our testing identified errors relating to the accounting for course income, specifically cut off:

- 1 item of course income which wholly related to 2025-26 had been incorrectly recognised in full in 2024-25;

Recommendation:

Year-end closing procedures are reviewed to ensure income is recognised in the correct period.

Accepted in full by management:

Yes

Management response:

Guidance will be circulated earlier than March to increase the likelihood that such transactions are identified in future years. Guidance will also be updated giving some specific examples of course income where we perceive cut off risk to be higher given the nature of our charity.

Implementation date:

Prior to 2025-26 year end.

Expenditure Accounting

Our testing identified errors relating the accounting for expenditure, specifically cut off:

- 1 item of expenditure partly related to 2025-26 and had been incorrectly recognised in full in 2024-25; and
- 2 items of expenditure partly related to 2023-24 and had been incorrectly recognised in full in 2024-25.

Recommendation:

Year-end closing procedures are reviewed to ensure expenditure is recognised in the correct period.

Accepted in full by management:

No

Management response:

We acknowledge the audit finding on expenditure cut-off; however, the items identified were isolated and immaterial, with no indication of a systemic issue. Existing year-end processes already include cut-off checks, and these errors do not warrant a full procedural review.

Instead, we will reinforce guidance to relevant staff as part of routine year-end communications to prevent recurrence. We also note that this recommendation is similar in nature to the earlier income cut-off recommendation, as both relate to ensuring transactions are recorded in the correct accounting period.

Implementation date:

Prior to 2025-26 year end.

Income and Expenditure Accounting – Supporting Evidence

Source documentation for one of our income samples was not sufficient to evidence the income being accounted for.

Recommendation:

Fund holders should retain evidence of all income being generated on behalf of the charity.

The charity should review its expected and actual annual income streams, to ensure it is satisfied their income is complete and adequately evidenced.

Accepted in full by management:

Yes

Management response:

Fund holders will be reminded of the requirement to retain appropriate evidence, where possible, for all income generated on behalf of the charity. The team will review the expected and actual income streams for funds annually, to confirm income is complete and adequately evidenced.

Implementation date:

Prior to 2025-26 year end.

Audit quality

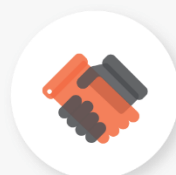
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Our People

- Selection of right team
- Use of specialists
- Supervisions and review



Arrangements for achieving audit quality

Selection of right team

- Audit platform
- Ethics
- Guidance
- Culture
- Learning and development
- Leadership
- Technical support



Independent assurance

- EQRs
- Themed reviews
- Cold reviews
- Root cause analysis
- Peer review
- Audit Quality Committee
- External monitoring

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Website: www.audit.wales

We welcome correspondence and telephone calls in Welsh and English.

Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg a Saesneg.



**CYFARFOD BWRDD IECHYD PRIFYSGOLN
ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD
MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 January 2026
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Funds available to the Committee
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Robert Holcombe, Director of Finance, Procurement and Value Based Healthcare
SWYDDOG ADRODD: REPORTING OFFICER:	Gareth Lewis, Head of Financial Services & Accounting

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

Ar Gyfer Penderfyniad/For Decision

This report provides the Charitable Funds Committee with details of funds that are available to them as at 30.11.2025.

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The Charitable Funds Committee approved a scheme allowing individuals to engage with Charitable Fund Holders to potentially access some of their charitable funds if the request meets the purpose/criteria of that fund. Once these avenues of funding have been explored the individual will be able to apply to the committee for a small grant (£5k or under) either in whole or as a top-up to funding they have been able to secure.

There are however areas where there are no suitable funds available and requests, which can be for exceptional amounts, are submitted to the Charitable Funds Committee for their support from general funds that are available to them.

This paper provides details of the funds available to the committee to support such grants and bids which are listed in agenda item 2.6.

All grant requests must be supported by the Executive Team.



The Committee is asked to note the remaining funds available to them.

Cefndir / Background

The Charitable Funds Committee can apply general funds for the benefits of patients and staff across the Health Board.

The table below shows the transactions on the general-purpose fund together with commitments agreed by the committee.



Charitable Funds Committee - General Funds	ABUHB - F002 £000's
Fund Balances as at 31.03.2025	31.8
25/26	
Dividends & Interest 24/25	183.9
Proceeds from sale of 13 Clytha Square	186.1
Contribution to CFC-277 from F029	5.6
Unknown General Donations	2.1
CFC-268 Staff Recognition Awards 25/26	-28.3
CFC-274 Staff Resource for Decarbonisation Programme 25/26	-28.5
SGS 012 Well Being Pop up Events across ABUHB	-0.4
SGS 013 Mental Health & Learning Disabilities Wellbeing Space	0.0
SCS 014 Decarbonisation Promotional Materials	0.0
SGS 017 Women's Health Conference	-0.4
SGS-019 MHLN Nurse Conference	-4.0
SGS-020 MHLN Wellbeing & Connection Growth for the Integration of International Nurses	-0.5
SGS-021 Furniture for Therapy Room, Beechwood Ward, St Cadocs	-0.8
CFC-275 Patient & Family Inclusion Officer	-70.9
CFC-276 Volunteer Co-ordinator	-108.2
CFC-278 Language & Interpretation Services	-72.3
SGS-025 MH/LD Conference 2025	-4.5
SGS-028 Decarbonisation Promotion	-1.8
SGS-029 Saturation Monitors, Maternity	-6.1
Total 25/26	51.03
Balance as at 30.11.25	82.81
Less Commitments	
CFC-234 Radio YYF	-1.0
CFC-274 Decarbonisation Project - 1 year	11.5
CFC-277 Suicide Bereavement Service - 1 year	-24.0
SGS 012 Well Being Pop up Events across ABUHB	0.0
SGS 013 Mental Health & Learning Disabilities Wellbeing Space	-2.4
SCS 014 Decarbonisation Promotional Materials	0.4
SGS 017 Women's Health Conference	-0.5
SGS-020 MHLN Wellbeing & Connection Growth for the Integration of International Nurses	-0.2
SGS-023 Contribution to Medicinema, Serennu Children's Centre	-5.0
SGS-024 Finance Conference 2025	-7.5
SGS-026 Community of Practice for People's Experience across ABUHB	-5.6
SGS-027 Equality, Diversity & Inclusion Staff Equality Networks	-7.0
SGS-030 Perntal Metal Health Dancing the Parenting	-5.0
SGS-032 Future Care Planning Facilitators	-6.0
Total Commitments	-52.36
Remaining available funds after commitments	30.44



Asesiad / Assessment

Key points

- The Committee currently has **£30.4k** available to them as at 30th November 2025.
- The Committee has a further £8k available to them from a recent legacy received for ABUHB.
- There is also a legacy of £12k which is specifically for Royal Gwent Hospital but is available to the Committee to determine its distribution.

Argymhelliad / Recommendation

The Charitable Funds Committee is asked to note the funds available.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability Choose an item. Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Choose an item.
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Finance
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Improve the Wellbeing and engagement of our staff Choose an item. Choose an item. Choose an item.



Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	
Rhestr Termau: Glossary of Terms:	SGS – Small Grants Scheme CFC – Charitable Funds Committee
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive Committee, including: policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
• Workforce	Not Applicable
• Service Activity & Performance	Yes, outlined within the paper
• Financial	Yes, outlined within the paper
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	No does not meet requirements An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk
Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working https://futuregenerations.wales/about-us/future-generations-act/	Integration - Considering how the public body's well-being objectives may impact upon each of the well-being goals, on their objectives, or on the objectives of other public bodies Choose an item.





**CYFARFOD BWRDD IECHYD PRIFYSGOLN
ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD
MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 January 2026
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Consideration of Bids / Small Grants Scheme
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Robert Holcombe, Director of Finance, Procurement and Value Based Healthcare
SWYDDOG ADRODD: REPORTING OFFICER:	Gareth Lewis, Head of Financial Services & Accounting

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

Ar Gyfer Penderfyniad/For Decision

This report provides the Charitable Funds Committee with details of the requests that have been received for funding by the Charitable Funds Committee for:

- Small Grants Scheme (up to £5k)
- Charitable Fund Bid applications (over £5k)

The Committee is asked to consider the requests submitted.

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The Charitable Funds Committee approved a scheme allowing individuals to engage with Charitable Fund Holders to potentially access some of their charitable funds if the request meets the purpose/criteria of that fund. Once these avenues of funding have been explored the individual will be able to apply to the Committee for a small grant (£5k or under) either in whole or as a top-up to funding they have been able to secure.

There are however areas where there are no suitable funds available and requests, which can be for exceptional amounts, are submitted to the Charitable Funds Committee for their support from general funds that are available to them.



All requests were presented to the Executive Committee on the 4th December and approved for submission to the Charitable Funds Committee.

The Committee is asked to consider each request in line with the Charities' objectives.

Cefndir / Background

Throughout the last year there have been many successful engagements between individuals seeking funding and Charitable Fund Holders who have approved their requests. This is a key part of the strategy to ensure funds are spent and shows increasing awareness of funds available throughout the Health Board and willingness of fundholders to ensure this happens.

Asesiad / Assessment

There are several requests as summarised below:

- 3 Small Grant Scheme applications
- 1 Bid requesting approval from their own local charitable fund as it relates to staffing
- 2 Bids requesting Charitable Funds Committee funding from the General Fund (including one deferred from the last meeting).

Full details of each bid can be found in the attached appendices (1-6)

Small Grant Scheme Applications

These are bids applying for funding from the Charitable Funds Committee's General Fund, as there are no suitable delegated Charitable Funds to support the applications.

Small Grant Requests	Total Cost £000's	Area of Benefit
SGS-033 Integrated Autism Service	5	Patients, Staff & Visitors
SGS-034 Deaf, Blind & BSL Training	5	Patients, Staff & Visitors
SGS-035 4 Recliner Chairs, Maternity	6	Patients, Staff & Visitors
Total Bids	16	

SGS-033 Integrated Autism Service (Appendix 1)

This proposal requests £5k to provide improvements to their clinical rooms due to negative feedback from patients that the current environment is not conducive to their treatment. Providing a safe comfortable space for patients to share very negative sometimes traumatic experiences is paramount thus requiring some upgrades to the assessment room in the way of decoration and comfortable seating.



The department was directed to using their own charitable fund, which has a remaining a balance of £2k, by the Charitable Funds Team. As detailed within the paper the department are already using all of this to pay for redecorating the area.

SGS-034 Deaf, Blind & BSL Training (Appendix 2)

Money is requested for Deaf, Blind and BSL training for staff to improve communication, increase accessibility and inclusivity to ensure patients receive equitable, person-centred care.

There are funds within the Patient Experience & Involvement Team, but these have all been allocated against other projects such as a Sepsis book.

SGS-035 Recliner Chairs for Maternity Services (Appendix 3)

Recliner chairs are required to enable partners to stay overnight to provide essential support to mothers during their recovery following childbirth due to revised visiting policy.

The maternity department have utilised all of their charitable funds supporting similar requests previously.

Bids Requesting Approval from Charitable Funds Committee

This relates to requests where they have their own funds available but require approval from the Charitable Funds Committee as they relate to employment of staff.

Bids for Approval from Designated Charitable Funds	Total Cost £000's	Area of Benefit
CFC-281 Tissue Viability - Targeted Scoping	5	Patients & Staff
Total Bids	5	

CFC-281 Tissue Viability Targeted Scoping (Appendix 4)

The Tissue Viability Service seeks approval of £5k to fund the three-month employment of a Band 6 working two days a week to focus on a scoping project to benchmark best practice providing insights to inform the strategic redesign of the current service model.

Bids Requesting Funding from Charitable Funds Committee

These relate to funding requests for larger amounts, of which no delegated Charitable Fund has been identified.

Bids requesting funding from Charitable Funds Committee	Total Cost 25/26 £000's	Total Cost 26/27 £000's	Total Cost 27/28 £000's	Total	Area of Benefit
CFC-279 Speaking Up Safely (SUS), ABUHB - 2 years (deferred from previous meeting)	0	71	71	142	Staff
CFC-280 Staff Recognition Awards 2026	0	30		30	Staff
Total Bids	0	101	71	172	



CFC-279 Speaking Up Safely (Appendix 5)

The Wellbeing team seeks £142k to fund a two-year Band 7 programme manager to deliver the Welsh Government's Speaking Up Safely (SUS) framework at ABUHB. The framework enables confidential reporting of staff and patient safety concerns, aiming to improve culture, compliance, and outcomes. Without this funding, the programme risks unsustainability, operational gaps, and reputational harm.

There is a Wellbeing charitable fund that has a balance of £60k but the Charitable Funds team have been notified that these funds have been allocated to a future new initiative requiring £80k to initiate.

CFC-280 Staff Recognition Awards (Appendix 6)

The staff recognition event has been funded by the Charitable Funds Committee for many years and is a significant event in the Health Board's calendar which recognises the contribution staff make to patient care and Health Board objectives. It is an opportunity to thank staff for their hard work and dedication.

There are currently no charitable funds dedicated to staff, which would be able to support this bid.

Key considerations for the Committee

- Any requests relating to the employment of staff must be approved by the Charitable Funds Committee to ensure that contracts are fixed term and under a period of two years. It must be clear what plans are in place to cover unexpected costs such as maternity leave and sickness. This particularly applies to grant funding as they will not normally support these items.
- All requests must have the full support of the Executive Committee. The bids were considered and fully supported on 4th December 2025.
- At 30th November 2025 the Committee has a balance of £30.4k available to them to apply to general funding requests.
- The Committee has sufficient funds to support the three small grant scheme applications totalling £16k that were supported by the Executive Committee.
- Both bid requests relate to future financial year funding.
- Ensuring that decisions are made fairly and equitably it is important to highlight that the committee currently have five previous bids which have been "supported in principle" in previous meetings.

Any decision to approve in full those presented to the Committee results in a variation in treatment. Of the requests for the following year all relate to supporting direct staff costs, except for the request to fund the staff recognition awards.



- The future funding implications of the bids previously “supported in principle” is shown in the table below:

Bids requesting funding from Charitable Funds Committee	Total Cost 26/27	Total Cost 27/28
	£000's	£000's
	Year 2	Year 3
CFC-274 Decarbonisation Project - 3 years	17	18
CFC-275 Patient & Family Inclusion Officer - 2 years	68	0
CFC-276 Volunteer Co-ordinators - 2 years	105	0
CFC-277 Suicide Bereavement Service - 2 years	52	28
CFC-278 Language & Interpretation Services - 2 years	78	0
Total Bids	320	47

- There is potential funding available for the Staff Recognition Awards bid (CFC-280). The remaining amount available, if all SGS bids are supported by the Committee would be £14k, by:
 - Using the £8k available to them from a recent legacy received for ABUHB
 - Using a legacy of £12k available to them which is specifically for Royal Gwent Hospital but could be used to cover the RGH element of staff that would benefit from this
 - The Committee could support the £30k bid.
- The Committee currently has insufficient unallocated general funds to support the remaining bid request including the five previously “supported” but could consider the following options:
 - Increase the volume of income that is not ring-fenced or restricted, see agenda item paper 3.2.
 - Using the 2025/26 dividends and interest currently estimated at £170k
 - Recharge against other funds that have no dedicated spending plans.
 - A review of reserves later in the year which could release the reserve surplus of £69k

Argymhelliad / Recommendation

The Charitable Funds Committee is asked to consider all requests.

Amcanion: (rhaid cwblhau)



Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability Choose an item. Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Choose an item.
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Finance
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Improve the Wellbeing and engagement of our staff Choose an item. Choose an item. Choose an item.

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	
Rhestr Termau: Glossary of Terms:	SGS – Small Grants Scheme
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive Committee, including: policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
• Workforce	Not Applicable



<ul style="list-style-type: none"> • Service Activity & Performance 	<p>Yes, outlined within the paper</p>
<ul style="list-style-type: none"> • Financial 	<p>Yes, outlined within the paper</p>
<p>Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed</p>	<p>No does not meet requirements</p> <p>An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk</p>
<p>Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working</p> <p>https://futuregenerations.wales/about-us/future-generations-act/</p>	<p>Integration - Considering how the public body's well-being objectives may impact upon each of the well-being goals, on their objectives, or on the objectives of other public bodies</p> <p>Choose an item.</p>



Charitable Funds

Small Grants Scheme Application – Max £5k

CFC/SGS - 033

1. Name of ward or department and hospital:
Integrated Autism Service, Torfaen Business Centre, Unit 10, Panteg Way, New Inn, Pontypool, NP4 0LS
2. Description of item/service required:
<p>IAS due to complaints around the clinical assessment rooms has sought charitable funds to create a safe and inclusive assessment environment. The Autism fund has allocated the remaining £2000 to IAS for clinic room upgrades.</p> <p>This request is for additional monies for 8 x vinyl tub chairs and carpeting of 2 rooms.</p>
3. Cost of item/service plus supplier information:
<p><i>Please provide a quote if available and ensure that any costs for delivery and installation are included.</i></p> <p><i>Please state if your costs include VAT.</i></p> <p><i>If there is any ongoing maintenance or consumable costs, please explain how you intend paying for this.</i></p>
<p>£2000 currently allocated from Autism fund will pay for the painting of rooms 3B and 8, as well as décor other items.</p> <p>We are requesting £5000 to top up this to purchase the carpet and furniture (tub chairs). This would be then a total of £7000 for the upgrades to the 2 rooms.</p> <p>8 x vinyl tub chairs (4 for each room) @ £350 each = £2800 Carpet for 2 rooms, Room 3B 26sqm = £990 + Room 8 27sqm = £1028 Cost=£4818</p>
4. How will this item/service benefit patients and staff:
<p>The IAS is located within the Torfaen Business Centre – New Inn. We are aware due to the feedback from patients that the IAS rooms do consistently provide a psychologically / sensory safe and comfortable environment conducive for patients to access for their diagnostic assessments. The current environment impacts upon patients as they do not feel comfortable and safe, this has been reported directly by patients and complaints have been received the most recent being last week.</p> <p>Neurodevelopmental assessments are in depth and last around 4 hours in a single sitting. Patients and staff require furniture that is comfortable and calming. Patients are asked about their childhood, adverse experiences and traumatic</p>

experiences, all of this can be very distressing for the patient. This is where patients disclose significant events such as sexual, physical, emotional abuse and so on. This information is of significant importance to the diagnostic assessments and formulation. If individuals are not comfortable in their surroundings, then they may be on guard and not disclose information which can impact outcomes. In addition, it is important for patients to feel comfortable and have a safe space to be able to recover following these disclosures. We need to promote the physical and mental wellbeing of all of our patients and staff.

It is felt that the assessment rooms are not entirely appropriate for these therapeutic discussions of which some patients have reported. Therefore, having the assessment rooms all freshly painted in calming colours, with solid carpet and décor to create conducive surroundings to get the most out of each patient. We will often need to book back in patients for further appointments to gather further information which may have been disclosed if they were in a conducive environment to start with. Therefore, the funding allocation would likely benefit out waiting times slightly by needing less follow up appointment (current wait time for diagnostic assessment is 4+ years).

Currently the rooms are dated have old paint with patches which bothers the population of people we assess as they typically have a great attention to detail. They also notice the nature of the carpet as it is old and worn and again has patches. There is no suitable décor and the chairs are not comfortable. It is embarrassing for staff to have to explain to patients why the rooms are the way they are which impacts on staff wellbeing.

Within these rooms we disclose a diagnosis of ASC or a non-diagnosis, these disclosures can be highly contentious and emotional experiences, where difficult conversations are had. Having the rooms laid out in a safe and comfortable manner would promote wellbeing of the patient. The diagnosis of a lifelong disability that has been overlooked for many years is a significant event.

5. Have you applied for funding for this item/service elsewhere, including your own charitable fund:

Please give details of who you approached, and the response received.

As mentioned above £2000 has been allocated from the Autism fund but this would not cover the cost as highlighted above.

F593 ABUHB LGH AUTISM

(2083.10)

6. Other supporting information:

Due to the nature of our service, patients can present with challenging behaviour, significant sensory challenges and high anxiety states. Providing a safe comfortable space for patients to share very negative sometimes traumatic experiences is paramount thus requiring some upgrades to the assessment room in the way of decoration and comfortable seating. This is something consistently



commented and complained about by patients.

We will engage with our Procurement department who can negotiate costs and advise on suppliers and we will consult with Works and Estates to ensure we comply with Health Board policies. We also plan to do before and after communications to promote the use of charitable funds and its impact on the IAS diagnostic assessment service.

7. Submitted by:

Name: Gavin Birch

Job title: ASD Specialist Practitioner /
Highly Specialist Occupational Therapist

Telephone: 01633 644143

Email: gavin.birch@wales.nhs.uk

8. Supported by:

This must be signed by the Directorate Manager/Head of Service

Name: Louise Mellen

Date: 17/10/2025

Job title: IAS Service Manager

Signature: Louise Mellen

9. Sponsored by:

This must be signed by the Executive Director

Name:

Date:

Job title:

Signature:

Please note you will be asked to complete an evaluation form to demonstrate how your small grant has made a difference.

Please e-mail completed application to: Charitable.Funds.ABB@wales.nhs.uk

For Executive Committee Use

Approved	Not Approved
Next Action:	Reason:



GIG
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WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

For Charitable Funds Committee Use

Approved	Not Approved
Next Action:	Reason:

Charitable Funds
Small Grants Scheme Application – Max £5k
CFC/SGS 034

1. Name of ward or department and hospital:

Patient Experience and Involvement Team
(This initiative will cover the whole Health Board)

2. Description of item/service required:

Project Title

Deaf/Blind and BSL Training for Healthcare Staff to Improve Accessibility and Patient Experience

There is a significant communication barrier for patients who use British Sign Language (BSL) when accessing healthcare services. Currently, many staff members lack the skills to communicate effectively with Deaf patients, leading to:

- **Reduced patient safety** due to misunderstandings in clinical settings.
- **Lower patient satisfaction** and feelings of exclusion.
- **Delays in care** when waiting for interpreters, impacting timely treatment.
- **Delays in safeguarding** considerations and escalation
- **Compliance gaps** with equality and accessibility legislation.

Deaf patients often face significant challenges accessing healthcare services due to communication barriers. This can lead to misunderstandings, reduced quality of care, and poorer health outcomes. Providing BSL training addresses these inequalities and aligns with our commitment to person-centred care and the Welsh Government's accessibility standards.

This service aims to equip healthcare staff with Level 1 BSL skills (conversational level), ensuring that Deaf patients receive equitable, person-centred care. By improving direct communication, we will enhance patient experience, reduce complaints, and foster inclusivity across the Health Board.

DeafBlind Awareness; £195 plus travel, 15 people maximum per course. 4 sessions = **60 people. Total cost of £780.**

6 PALS / 1 GRACE / 7 volunteering / 9 CHAPLAINS / PE&IT 5/ 11 MCA-DOLS / 4 switchboard / 4 CAD / 2 EDI / 3 dementia / ED staff x 9

BSL Level 1 training : 15 weeks x 3 hours per session. £395 per person (10 people) = £3,950

First Cohort: 1 x PALS Officers, 1 x PSO, 1 x Chaplain

Second Cohort: 1 x PALS, 1 PSO, 1 x Grace

Third Cohort: 1 x PALS, 1 PSO, 1 x Chaplain, 1 X PE&IT Team



Total Cost £4730

5. Project Objectives

- Train healthcare staff in basic BSL to improve communication with Deaf patients.
- Increase accessibility and inclusivity across patient-facing services.
- Strengthen staff confidence and competence in delivering equitable care.

6. Impact Statement (with Measurable Outcomes)

The project will:

- Train **10** healthcare staff in BSL within 12 months. **6** of these would be the PALS Team and PALS would act as single point of contact for all Deaf accessibility concerns.
- Achieve a 30% reduction in communication-related complaints from Deaf patients within 12 months.
- Increase patient satisfaction scores among BSL users by 20% in annual surveys.
- Ensure BSL interpretation availability in 90% of patient-facing departments by year-end.
- 80% of trained staff demonstrate BSL competency in follow-up assessments after 6 months.
- Host 3 engagement sessions with the Deaf community to evaluate service improvements.

These outcomes will be monitored through staff training records, patient feedback surveys, and service audits.

7. Project Activities

- Develop and deliver BSL training sessions for staff.
- Provide learning resources and ongoing support.
- Engage with the Deaf community for feedback and co-design.
- Monitor and evaluate progress against measurable outcomes.

8. Budget

- Training provider costs: £4730
- Learning materials: £170
- Communication, Evaluation and reporting: £100

Total: £5000

9. Timeline

- Month 1–2: Recruit staff and confirm training provider.
- Month 3–8: Deliver BSL training sessions.
- Month 9–12: Conduct evaluations and community engagement sessions.

10. Sustainability

The project will create a foundation for ongoing BSL training and embed accessibility into staff development plans. Lessons learned will inform future initiatives across the Health Board. The WCDP will support ongoing practice sessions for the staff.

Note: We would like to extend the number of sessions we offer to other front line staff including volunteers, ED reception for the BSL, more Chaplains, palliative care staff and the Care After Death Team. However, this would require replicate funding as above. Please advise whether separate small grant applications need to

be submitted.

Cost for 3 x the training outline above would be £15,000

3. Cost of item/service plus supplier information:

Please provide a quote if available and ensure that any costs for delivery and installation are included.

Please state if your costs include VAT.

If there is any ongoing maintenance or consumable costs, please explain how you intend paying for this.

Wales Council for the Deaf

Level 1 BSL 15 weeks- 3 hours per week £395 per person

DeafBlind Awareness; £195 plus travel

4. How will this item/service benefit patients and staff:

Benefits for Patients

1. Improved Communication

Patients who are deaf or hard of hearing will experience fewer barriers when accessing care, will be confident that trained interpreters will be sourced as required, leading to clearer understanding of diagnoses, treatments, and care plans.

2. Access

The PALS Team would act as single point of contact for all Deaf people and staff related concerns improving access to timely resolution.

3. Enhanced Patient Experience

Feeling understood and respected improves trust and satisfaction, which aligns with person-centred care principles.

4. Safety and Quality of Care

Accurate communication reduces the risk of misunderstandings that could lead to medication errors or inappropriate interventions.

Benefits for Staff

1. Greater Confidence and Competence

Frontline staff trained in BSL can communicate directly (at Level 1 conversational stage) without relying solely on interpreters, making interactions smoother and more efficient. Trained staff would navigate interpreter presence when needed.

2. Inclusive Workplace Culture

Training promotes equality and diversity, helping staff feel proud of



contributing to accessible healthcare.

3. Professional Development

Learning BSL adds a valuable skill, supporting career growth and meeting NHS accessibility standards.

4. Improved Support Mechanism (through single point of contact)

5. Have you applied for funding for this item/service elsewhere, including your own charitable fund:

Please give details of who you approached, and the response received.

No- this will support the new Accessibility Standards

6. Other supporting information:

This initiative directly supports the Welsh Government’s Putting Things Right (PTR) regulations by enabling more effective Listening Meetings, ensuring that communication barriers do not prevent meaningful engagement with patients and families. It aligns with the People’s Experience Framework and promotes co-production, as we will work collaboratively with the Deaf and DeafBlind community to design and evaluate improvements. By training staff in BSL and Deaf/DeafBlind awareness, we will significantly improve the experience for people who are Deaf, DeafBlind, or hard of hearing, ensuring their voices are heard and respected in all aspects of care. This approach strengthens equality, accessibility, and person-centred care across the Health Board.

7. Submitted by:

Name: Tanya Strange

Job title: Head of Nursing

Telephone: 07837 022488

Email: tanya.strange@wales.nhs.uk

8. Supported by:

This must be signed by the Directorate Manager/Head of Service

Name: Jennifer Winslade

Date: 25.11.25

Job title: Executive Director of Nursing

Signature:



9. Sponsored by:

This must be signed by the Executive Director

Name:	Date:
Job title:	
Signature:	

Please note you will be asked to complete an evaluation form to demonstrate how your small grant has made a difference.

Please e-mail completed application to: Charitable.Funds.ABB@wales.nhs.uk

For Executive Committee Use

Approved	Not Approved
Next Action:	Reason:

For Charitable Funds Committee Use

Approved	Not Approved
Next Action:	Reason:



**Charitable Funds
Small Grants Scheme Application – Max £5k
CFC/SGS 035**

1. Name of ward or department and hospital:

Maternity Services

2. Description of item/service required:

We would like the group to consider the purchase of four manual waterfall back reclining hospital patient armchairs. Our current revised visiting policy allows partners to stay overnight to provide essential support to mothers during their recovery following childbirth.

The comfort of these partners is crucial, and we believe that investing in high-quality reclining armchairs will greatly enhance their experience during this important time. The manual waterfall back design of these chairs offers optimal comfort and support, allowing partners to rest more easily while remaining close to their loved ones.

3. Cost of item/service plus supplier information:

Please provide a quote if available and ensure that any costs for delivery and installation are included.

Please state if your costs include VAT.

If there is any ongoing maintenance or consumable costs, please explain how you intend paying for this.

Costing

£1850.00 per chair

Vat £991.60

Total Price without VAT = £5949.60



A1075278 - Boston
Recliners.pdf

4. How will this item/service benefit patients and staff:

By providing these chairs, we can ensure that overnight visitors have a comfortable place to sit or recline, promoting better rest and a more supportive environment for new parents. The addition of these armchairs

aligns with our commitment to enhancing patient and family-centred care.

5. Have you applied for funding for this item/service elsewhere, including your own charitable fund:

Please give details of who you approached, and the response received.

We have utilised our own charitable funds to support previously. Having support from the small grants scheme to purchase additional armchairs will provide a safe and comfortable space for partners following the birth of their baby.

6. Other supporting information:

Case Study: Partners staying overnight project – Nottingham University Hospitals.

“The [Boston](#) is very comfy to sit in for long periods with my newborn, it’s the next best alternative to sleeping in a bed.”

The Brief

The driver for this project started back in 2018, when [NUH](#) received results from the annual CQC Picker Survey that indicated they could do more to support women who were staying in maternity overnight. [NUH](#) decided to introduce ‘partners staying overnight’ and began a pilot project. The trust conducted pre and post-implementation surveys as part of the project with service users and staff and did a lot of work with health and safety, governance, safeguarding, infection control, patient dignity champions, and trade unions. The project was designed to make it easier for fathers and non-birthing parents to be involved in the pregnancy and birth journey while in hospital.





One new dad described the Boston recliner as a 'godsend', another had a 6-night stay on the ward and said "The [Boston](#) is very comfy to sit in for long periods with my newborn, its the next best alternative to sleeping in a bed." One dad whose partner and baby had been transferred to Nottingham for admission to the neonatal unit said that he was so glad to have somewhere comfortable to rest as a 5 hour's drive home every night would not have been safe.



Aneurin Bevan University Health Board (ABUHB), we recognize the profound significance of the moments surrounding childbirth and the essential role that fathers play during this special time. In light of this, we would like to propose the introduction of comfortable overnight facilities specifically designed for fathers, ensuring they have a supportive space to be present for their partners and to bond with their new addition to the family.

The transition into parenthood is an extraordinary experience, filled with emotion and a multitude of changes. It is crucial that we create an environment where family members can share in these precious moments, fostering connection and allowing both parents to feel supported during the early days of their child's life. By providing comfortable, dedicated spaces for fathers to rest, we can help to ease the strain of overnight visits and promote a greater sense of well-being for both parents.

We believe that enhancing the facilities available to fathers will not only benefit the immediate family but also contribute to the overall positive atmosphere within our maternity unit. Creating a nurturing and inviting environment facilitates better communication between partners and strengthens family bonds during those vital first days together.

In line with our commitment to patient-centred care, we envision that this initiative will elevate the experience for fathers, giving them the opportunity to actively participate in the joy of welcoming their newborn



while ensuring they have a comfortable place to rest.

Thank you for considering this enhancement to our maternity services, which prioritizes the well-being of families during this monumental time in their lives.

7. Submitted by:

Name: Kerry Jeffries

Job title: Assistant Service Manager

Telephone: 07989141007

Email: kerry.jeffries@wales.nhs.uk

8. Supported by:


This must be signed by the Directorate Manager/Head of Service

Name: Jayne Beasley

Date:

25.11.2025

Job title: Head of Midwifery

Signature: 

9. Sponsored by:

This must be signed by the Executive Director

Name:

Date:

Job title:

Signature:

Please note you will be asked to complete an evaluation form to demonstrate how your small grant has made a difference.

Please e-mail completed application to: Charitable.Funds.ABB@wales.nhs.uk

For Executive Committee Use

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Aneurin Bevan
University Health Board

For Charitable Funds Committee Use

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YOUR QUOTATION

Customer Name:	Kerry Jeffries	Quotation Number:	A1075278
Job Title:	Assistant Service Manager, Maternity Services	Quotation Date:	25/11/2025
Department:	Family and Therapies Division, Block 9	Quotation Valid Until:	31/12/2025
Hospital/Company:	Royal Gwent Hospital	Account Manager:	Cai Griffiths
		Telephone:	01732 367777
		Email:	sales@ocura.co.uk

Thank you for your valued enquiry. We are pleased to provide the following quotation:

Delivery Lead Time: 8 week(s)

from the date of the order

Image	Code	Description	Unit Price	Discounted Unit Price	Quantity	Total Price
	CA1903	Boston manual waterfall back reclining hospital patient armchair Discount: 33%	£ 1,850.00	£ 1,239.50	4	£ 4,958.00

Net Amount	£ 4,958.00
Vat @ 20%	£ 0.00
Gross Total	£ 4,958.00

There is a delivery charge of £50 for all orders under £500 delivered to mainland UK.

Where applicable, please specify colour choice when ordering.

images are for representation purposes only (and may not reflect the colour selected).

Other information

Delivery is to stores unless otherwise stated.

Terms and conditions apply - copy available on request.

Ocura Healthcare Furniture is an approved supplier under the NHS Supply Chain National Contract No. 2024/S 000-025534 and NHS Shared Business Services Contract SBS/19/MA/TYX/9363/5 Ward, Bedside and Non-medical Theatre Equipment

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E: sales@ocura.co.uk

www.ocura.co.uk

Ocura Healthcare Furniture
Unit A13 LOC8 Business Park
Ashford Road, Maidstone
Kent, ME17 1WR

Ocura Healthcare Furniture Ltd registered no. 08824057

Registered Office: Unit A13, LOC8 Business Park, Ashford Road
Maidstone, Kent, ME17 1WR



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Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Charitable Funds Committee **Bid Ref: CFC – 281**

Bid for a Targeted Scoping Project
For Tissue Viability
At Llanfrechfa Grange Hospital

1. Introduction

The Charitable Funds Committee is invited to approve funding for a 0.4 WTE Band 6 Tissue Viability Clinical Nurse Specialist on a 12-week secondment at a cost of £4,909.09. This role will lead a focused scoping project to benchmark best practices across Tissue Viability Services (TVS) in the UK, providing critical insights to inform the strategic redesign of ABUHB's service model.

This initiative, supported through charitable funds, offers a timely and cost-effective opportunity to address escalating referral pressures and service delivery challenges. Without this intervention, the Health Board faces increasing inefficiencies, rising referral volumes, and reduced capacity to provide safe, responsive, and equitable wound care across the region.

2. Background

In November 2024, a comprehensive review of the Tissue Viability Service (TVS) was conducted to evaluate referral demand in relation to existing service capacity. The analysis revealed a significant increase in patient referrals—rising by 110% since 2021—with 30.8% originating from inpatient settings. This surge in demand was further exacerbated by the retirement of the vascular consultant, which placed additional pressure on the TVS.

The escalating workload has compromised the service's ability to fulfil its core functions, including timely response to referrals and the delivery of specialist training across the Health Board (HB). The review concluded that the current service model is no longer sustainable and recommended structural changes to address the imbalance between capacity and demand, thereby ensuring the continued provision of safe and effective patient care.

In response, a proposal was submitted to the Primary Care Senior Leadership Team advocating for an additional 1.0 whole-time equivalent (WTE) post within the Division. This role was intended to expand the team's capacity to implement a Health Board-wide

Tissue Viability educational rotation programme. The additional staffing would enable TVS members to dedicate time to mentoring referring Registered General Nurses (RGNs), thereby promoting skill development, reducing reliance on specialist intervention, and embedding tissue viability competencies throughout ABUHB. Despite the strategic importance of this initiative, the proposal was declined due to prevailing financial constraints within the Health Board.

3. Key Issues

- In ability to meet service referral demand
- In ability to provide HB wide specialist wound care training

3.1 Category of Bid

This bid relates to: *(please delete as appropriate)*

Patient's welfare and amenities.

Staff education and welfare.

3.2 Description of the Bid

According to the Lymphoedema Strategy (2009), an optimal caseload for each healthcare professional is between 150 and 220 patients, assuming appropriate support from administrative and healthcare support staff. In contrast, Tissue Viability Service (TVS) Clinical Nurse Specialists (CNSs) currently manage caseloads of approximately 795 patients each. This significantly exceeds recommended levels and imposes an unsustainable burden on the service, compromising both the delivery of training and the maintenance of service capacity across the health board.

Ongoing financial constraints across NHS services have further hindered the TVS's ability to meet rising demand and to provide essential specialist wound management training. In response to these challenges, approval is sought to utilise charitable funds to appoint a Band 6 Tissue Viability Nurse Specialist at 0.4 WTE 12-week secondment. This role would be dedicated to conducting a research and scoping project aimed at identifying how other specialist TVS teams across the UK manage referrals, deliver wound management training, and structure their workforce to support these functions.

Findings from this project would inform evidence-based recommendations for service redesign, enabling the Aneurin Bevan

University Health Board (ABUHB) TVS to adapt its current model. The goal is to enhance service delivery and training provision within the existing establishment of 4.6 WTE.

3.3 Outcome Measures & Benefits

3.3.1 Activity Analysis

A pilot initiative involving specialist wound management training, facilitated by the existing Tissue Viability Service (TVS) workforce through the development of tissue viability champion nurses, was implemented in the Caerphilly and Monmouthshire localities. This programme yielded positive outcomes, notably enhancing clinical knowledge, confidence, and competence in wound care among district nursing teams within these areas. Furthermore, a measurable decline in referrals to the TVS was observed. However, despite these demonstrable benefits, the ongoing delivery of the champion nurse programme has proven challenging within the current capacity of the TVS workforce. It is envisaged, without continuation of the champion nurse programme, referral rates to the service are likely to increase.

3.3.2 Benefits

This project seeks to establish a comprehensive dataset of best practice benchmarks for Tissue Viability Services (TVS) across Wales and England. By systematically analysing how these services manage referral demand and deliver specialist wound management education within their organisational frameworks, the study will generate actionable insights into current service models and training approaches.

The findings will inform the strategic redesign of TVS across the health board, enabling more efficient and equitable referral pathways and the consistent delivery of specialist wound care training across both primary and secondary care settings. For patients, this translates into improved access to timely, evidence-based wound care interventions, reduced variation in service quality, and better clinical outcomes. For staff, the project will support professional development through enhanced training opportunities, promote consistency in clinical practice, and foster a more integrated and responsive service environment.

3.4 If the Bid is not Supported

The health board may miss a critical opportunity to redesign the tissue viability service in line with best practices and evolving patient needs.

Inefficient Resource Use: Without streamlined pathways and training, resources may be used ineffectively, increasing costs and reducing overall system efficiency.

Reduced Capacity for Innovation: A lack of support for the project could stifle innovation in wound care delivery and limit the health board's ability to adapt to future challenges.

3.5 Bids relating to Additional Staff Resources

This bid is specifically to seek the committee's permission to access funds from our existing Charitable Bids account and is not asking for additional funds at this point in time.

- *What period is the committee being asked to fund staff?*
5th January 2026 – 6th April 2026
- *What is the tenure of appointment proposed for the new staff?*
3-month fixed term.
- *Who has accountability for the staff?*
Mark Ledville-Smith Senior Nurse

4. Financial Analysis

4.1 Funding Requested

The cost of a Band 6, 0.4wte £4,909.09

4.2 Availability of Local Charitable Funds

Fund Ref:
F783 ABUHB TISSUE VIABILITY

Current balance
(18133.51)

4.3 Revenue Costs

N/A

4.4 Revenue Costs – Affordability

This bid is to secure access to funds from our existing charitable bids account.

5.0 Conclusions and Recommendations

The Tissue Viability Service (TVS) within Aneurin Bevan University Health Board is facing an unsustainable surge in referral demand, compounded by workforce limitations and the loss of key clinical leadership. With caseloads exceeding safe thresholds and the inability to deliver essential wound care training across the Health Board, the current service model is no longer viable. Despite previous efforts to expand capacity and embed specialist knowledge through initiatives like the champion nurse programme, financial constraints have hindered long-term implementation.

The proposed 0.4 WTE Band 6 secondment, funded via charitable funds, represents a strategic and cost-effective opportunity to conduct a targeted scoping project. This initiative will benchmark best practices across UK TVS teams, enabling ABUHB to redesign its service model based on evidence and innovation. Without this intervention, the Health Board risks further inefficiencies, increased referral volumes, and diminished capacity to deliver safe, timely, and equitable wound care.

Recommendations

- Approve the Charitable Bid to fund a 12-week secondment for a Band 6 Tissue Viability Nurse Specialist from 5th January to 6th April 2026. This will enable the delivery of a focused research and scoping project without drawing on core funds.
- Support Strategic Redesign of the TVS based on findings from the project, with the aim of aligning service capacity with referral demand and embedding sustainable training models across the Health Board.
- Expand the Champion Nurse Programme using insights from the scoping project to reduce specialist referrals and empower district nursing teams with enhanced wound care competencies.
- Explore Long-Term Workforce Planning to ensure TVS caseloads align with national standards, thereby safeguarding staff wellbeing and patient outcomes.

- Monitor and Evaluate Outcomes from the secondment project to inform future funding decisions and service development strategies.

This approach balances fiscal responsibility with clinical innovation, ensuring ABUHB continues to deliver high-quality, patient-centred wound care while fostering professional development and system-wide resilience.

Bid Prepared by:

Name:	Mark Ledville-Smith
Title:	Senior Nurse
Date:	17/10/25

Supported by Division

General Manager:	
Signature:	
Date:	

Executive Sponsor

Signature:	
Date:	



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Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Charitable Funds Committee **Bid Ref: CFC –279**

Bid for Software and staffing **For Welsh Government required Speaking Up Safely Program** **At ABUHB wide**

1. Introduction

ABUHB launched the Welsh Government mandated Speaking Up Safely (SUS) framework in December 2024, creating new confidential pathways to raise concerns to protect staff and patient safety.

However, the framework was launched without critical implementation or sustainability funding from Government, creating urgent operational risks highlighted in a recent NWSSP limited assurance internal audit of our approach.

Speaking up Safely is an Organisational wide culture change programme, however, we currently have no dedicated staff to drive this framework. Without dedicated staff resource, we cannot effectively embed or sustain the essential elements of this framework and the appropriate culture change required.

We require essential financial support for:

- 24 months Dedicated AfC band 7 programme manager for framework delivery. £142,750 (incl on costs)
 - Annual cost: £71,375

2. Background

In August 2024 Welsh Government launched the National Speaking up Safely Framework, transforming how NHS organisations address critical workplace concerns from patient safety incidents to bullying and harassment. This strategic shift from traditional whistleblowing recognises that early intervention on workplace concerns directly protects staff wellbeing and patient outcomes. However, NHS Wales

organisations were expected to self-fund implementation despite the framework's comprehensive scope and complexity.

ABUHB launched the framework in December 2024 under Co-Guardians Dr Peter Brown and Dr Adrian Neal, establishing robust governance through a cross-organisational steering group with Executive accountability. This was supported by an initial investment of £10,000 from Employee Wellbeing Charitable Funds, which secured an external reporting platform to enabled rapid implementation. The programme of work is hosted by the Workforce and Organisational Development Division but is an Organisational priority.

The first 9 months of the project has been invaluable in allowing us to better understand the range, subject matter, and complexity of concerns. 44 concerns were raised by staff and processed, revealing the critical need for this service and the substantial resources required for meaningful, timely responses and two-way conversation with staff who raise their concerns. What's more it has highlighted limitations in the current model that if not addressed will be detrimental to the Health Board's SUS cultural ambitions, as well as our ability to comply with standards as set out by the National Framework.

The National Framework does not specify what a local SUS program should look like and to what extent it should be resourced. As such there is already minimal national consistency in approach. ABUHB have convened a national learning group for SUS leads and our recent benchmarking exercise demonstrated important disparities:

- Of the 8 NHS Wales organisations surveyed, 4 have dedicated, recurrent funding for staff.

Most critically, In December 2024 the Health Board's approach to the Government Framework was subject to and NWSSP internal audit which identified three areas of Limited assurance:

- 1) Appropriate resourcing levels for technology and staffing.
- 2) Consistency, appropriateness and timeliness of addressing concerns.
- 3) Appropriate data management and records management.

Without immediate investment, ABUHB risks falling behind in delivering this essential patient and staff protection framework. We previously submitted a request to Charitable Funds for the procurement of a technology platform and dedicated staffing resources to create a safe, confidential environment where all staff can raise concerns about

patient safety, quality of care, and workplace issues without fear of reprisal in a confidential and anonymous way. In order to reduce costs we have secured a collaboration with NWSSP and Datix as our data storage system. Therefore, this bid has been revised to just request funding for staffing.

3. Key Issues

Funding for staffing costs to embed and sustain the project.

There is no funding for staff to drive this project, rather it is an additional work pressure for Dr Peter Brown and Dr Adrian Neal; the Health Board's co-lead guardians. Without a funding source for additional staffing, we cannot effectively embed or sustain the essential elements of this framework and the appropriate culture change required from the framework such as supporting staff to feel safe to raise concerns, ensuring staff do not suffer detriment and to understand the barriers for staff to raise concerns, especially those from international or minority communities.

Requirement: we require funding for a dedicated member of staff to embed the requirements of the framework and sustain the work moving forwards. This includes liaising with staff who raise concerns in a timely manner, signposting and working with managers to address concerns, data management, training of staff, engaging with staff networks and staff groups from minority demographics.

3.1 Category of Bid

This bid relates to:

- **Patient's welfare and amenities** - Creating safer care environments through early identification of risks
- **Staff education and welfare** - Supporting staff safety, wellbeing and development

3.2 Description of the Bid

Following the recent internal audit of the Health Boards implementation of the Framework, Limited assurance was provided in 3 areas:

- 1) Appropriate resourcing levels for technology and staffing.
- 2) Consistency, appropriateness and timeliness of addressing concerns.

3) Appropriate data management and records management.

This bid describes key funding required to address these issues and will focus on staffing costs.

Dedicated Staffing:

Context: The work of implementation and embedding the framework is currently lead by Peter Brown and Adrian Neal in addition to normal workloads. This creates a delay in replying to staff. The co-leads have implemented the basics of the framework, however, recognising this is a long-term culture change initiative and requires extensive stakeholder engagement, we are currently satisfying the bare minimum of the Framework requirements.

New staffing:

- Speaking Up Safely manager (band 7)
- Lead the implementation of the new technology platform
- Lead investigations into staff concerns
- Engage with staff networks and minority groups who are poorly represented
- Track, monitor and present data at governance committees
- Develop and deliver training for managers and staff
- Create and disseminate regular comms including staff stories and case studies
- Drive culture change across the Health Board

Please explain why this request is not being met through core funds.

The Welsh Government Speak Up Safely (SUS) Framework was launched rapidly following the Lucy Letby verdict, the former neonatal nurse at the Countess of Chester Hospital NHS Foundation Trust. The resulting Thirlwall enquiry initial findings stated:

- Staff were fearful of speaking up for fear of victimisation and retaliation rather than being supported.
- The scale of staff who wish to raise concerns is in the hundreds, yet they don't.
- Enabling staff to speak up is directly linked to patient safety.
- The framework aims to address the cultural and systematic failures experienced in Chester.

As such the ABUHB SUS program needed to be set up at pace and rapidly launched resulting a lack of suitable and necessary funding from already stretched recurrent financial plans. There is no current budget associated with our SUS program, and although currently led by WOD it is an ABUHB wide program, which requires organisation wide ownership and support.

In addition, WOD have a savings target like all divisions and do not have the funds within its current financial envelope to support the programme.

What alternatives have been considered?

It is difficult to consider alternatives. The Health Board is required to establish, embed and sustain the Speaking up Safely programme of work aligned to the Welsh Government Framework.

Importantly, Welsh Government has tasked ABUHB with developing the national reporting maturity matrix that will annually assess all NHS Wales organisations' SUS performance. This positions the Health Board under national scrutiny – consequently any resource gaps or service limitations will be immediately visible across the entire NHS Wales system, potentially damaging our reputation as a Health Board and as SUS leaders.

Table 1. Annual costs breakdown for the bid.

	Total Cost 26/27#	Total Cost 27/28#	Total Funds Requested	Area of Benefit
2 years staffing	71,375	71,375	£142,750	Patients & Staff
Total Bids			£142,750	

costs do not include annual inflationary rises.

3.3 Outcome Measures & Benefits

3.3.1 Activity Analysis

Since the launch of the process in the Health Board, 44 concerns

have been raised using this process.

Within each concern raised, there are specific time frames which must be adhered to according to the framework:

- Acknowledge within 7 days
- Follow up the concern within 14 days
- Communicate the outcome to the individual with 28 days
- Follow up monthly with the manager addressing the concern
- Gather feedback from manager and individual who raised concern

The Guardian role has become unsustainable due to escalating demands that fall well beyond its intended scope. Case complexity and severity continue to intensify, with individual concerns now requiring extensive multi-stage conversations to extract adequate context, evidence, and clarity. Each case also demands lengthy coordination with HR teams to determine alignment with formal Health Board policies and processes, creating additional administrative burden. The Guardian role was designed for strategic oversight and framework implementation, yet guardians are increasingly pulled into granular case management and repetitive individual follow-ups that drain capacity from their core responsibilities.

The current model places unrealistic expectations on guardians, forcing them to operate as both strategic leaders and frontline case workers - a dual function that is neither efficient nor viable long-term. Without structural changes to redistribute these operational demands, the Guardian role risks becoming entirely consumed by case management at the expense of its essential oversight and strategic functions.

The consequence of this is that only the bare minimum of the framework implementation is possible and there has been no capacity to engage with wider staff networks, training and ultimately culture change for the Health Board.

3.3.2 Benefits

Patient Safety Benefits:

- Early identification and resolution of safety risks before harm occurs.
- Improved incident reporting culture leading to better learning.

- Reduced serious incidents through proactive risk management.
- Enhanced patient experience through staff empowerment

Staff Welfare Benefits:

- Reduced workplace stress and anxiety related to raising concerns.
- Improved staff confidence in the Health Board
- Improved job satisfaction and retention.
- Enhanced professional development through reflective practice.
- Stronger team relationships and communication.

Organisational Benefits:

- Compliance with national speaking up standards.
- Regarded as a leader in the field.
- Reduced reputational risks.
- Enhanced learning culture and continuous improvement.

Public Benefit Demonstration:

This program directly serves the public by creating safer healthcare environments, preventing patient harm, and ensuring taxpayer resources are used effectively. Improved staff wellbeing translates directly to better patient care as well as improved workforce metrics such as sickness absence, retention and wellbeing.

3.4 If the Bid is not Supported

Based on the evidence from the SUS program to date and our comments above, without support this program will not be sustainable resulting in increased corporate risks at local and national level.

In addition, without this funding:

- ABUHB will continue to rely on inadequate informal processes for speaking up or formal process which staff are either reluctant to engage with due to their rapid escalation or an increase in employee relations activity.
- Potential patient safety risks may go unidentified and unaddressed.
- Staff may continue to feel unsupported when raising legitimate concerns.

- The organisation will fall behind national best practice standards.
- Legal and regulatory compliance risks will persist.
- Staff wellbeing and retention issues may worsen.

Alternative approaches would include:

- Acknowledging as a Health Board we are satisfied with a minimal approach to speaking up safely.
- Continuing with current informal processes (maintaining status quo risks)
- Relying solely on formal high-risk processes.

3.5 Bids relating to Additional Staff Resources

- *What period is the committee being asked to fund staff?*

Staffing: 24 months (annual option available)

- *What is the tenure of appointment proposed for the new staff?*

Fixed term for 24 months (annual option available)

- *Who has accountability for the staff?*

Dr Peter Brown

- *What happens when funding comes to an end to the staff and the new service that they have provided?*

An alternative funding model needs to be developed during the next 12-24 months (December 2027+) which is co-funded across the Health Board as this is an Organisational commitment.

- *It must be clear what plans are in place to cover unexpected costs such as maternity leave and sickness. This particularly applies to grant funding as they will not normally support these items.*

N/a

4. Financial Analysis

4.1 Funding Requested

What is the proposed procurement route?

- Staffing – we are planning on seconding an existing member of the Workforce and OD team who has a fixed term contract ending at the time we require the new starter.

4.2 Availability of Local Charitable Funds

Fund Ref: Wellbeing Service (Current balance approx. £60K). These funds are allocated to a future new initiative requiring approximately £80K to initiate.

4.3 Revenue Costs

Not applicable – the costs of purchasing the tool also includes the cost of ongoing support.

4.4 Revenue Costs - Affordability

Financial benefits and cost avoidance:

- Reduced serious incident investigation costs.
- Decreased staff turnover and recruitment costs.
- Avoided legal and compensation costs.
- Improved efficiency through early problem resolution.
- Reduced sickness absence costs.

5.0 Conclusions and Recommendations

The Committee is asked to support this investment in the Speaking Up Safely Framework to:

1. Fund **dedicated specialist staff** to support and coordinate the program.
2. Create a comprehensive training and support system.
3. Deliver measurable improvements in patient safety and staff wellbeing.
4. Establish ABUHB as a leader in speaking up culture.

Bid Prepared by:

Name:	Dr Pete Brown
Title:	Assistant Director of OD
Date:	21/11/25


Bid prepared by:

Name:	Dr Adrian Neal
Title:	Head of Wellbeing
Date:	21/11/25

Supported by Division

General Manager:	Na
Signature:	na
Date:	

Executive Sponsor

Sarah Simmonds	Executive Director of WOD
Signature:	
Date:	21/11/25

Charitable Funds Committee

Bid Ref: CFC – 280

Bid for Staff Recognition Awards
For all staff
At ABUHB

1. Introduction

The purpose of this paper is to make a request to the Charitable Funds Committee for funding of up to £30,000 to support the 2026 Aneurin Bevan University Health Board Staff Recognition Awards.

The Staff Recognition Awards has been an annual event that has run since 2011. It is a significant event in the Health Board's calendar which recognises the contribution staff make to patient care and Health Board objectives. The event has a high profile and is an opportunity to thank staff for their hard work and dedication.

2. Background

The Annual Staff Recognition Awards has been running successfully for several years, expanding in size since its inception. Year on year it has been extremely positively evaluated; 2025's event saw a 500 staff attend at a new venue in Ebbw Vale.

It is well documented that feeling valued, receiving recognition and feedback play an important part in staff wellbeing and engagement levels and that this has a positive impact on patient care. A Staff Recognition Award scheme is one way in which the contribution of our staff can be publicly acknowledged, and the reputation of the Health Board and its staff further enhanced.

Support for the awards in previous years has been extremely positive. Any member of staff or team who works for the Health Board, at any level, can be nominated. Nominations are also welcome for our colleagues who work in Primary Care, whether as independent contractors (GPs, Dentists, Pharmacists & Optometrists) or people who work with them, such as practice nurses, managers and receptionists.

Anyone can nominate a fellow colleague or team, however, the Head of Department or in the case of Primary Care, the Practice Manager or Senior Partner, should endorse the nomination to ensure that the recognition is based on sound evidence.

The nomination categories are:

- Patient's Choice Award
- Leadership
- Improving Patient Care/Experience
- Quality, Sustainability and Efficiency
- Employee Health and Well-being
- Partnership Working

- Team of the Year
- Education, Research and Innovation
- Population Health and Well-being
- Welsh Language Champion
- Going the Extra Mile
- Green Healthcare
- Apprentice of the Year

Patients and the public can nominate our staff in the Patient's Choice Award category.

3. Key Issues

3.1 Category of Bid

This bid relates to:

- Staff education and welfare

3.2 Description of the Bid

Valuing staff is a key objective of the Health Board. The Staff Awards Scheme to recognise staff is one way of showing appreciation for a job well done and to publicly recognise the dedication of our staff.

The Staff Recognition Awards are an opportunity for colleagues and managers to nominate those people who are making an outstanding contribution to the delivery of the Health Board's aims and objectives. The awards scheme will support the sharing of best practice in patient care and service delivery across a range of identified categories.

The Charitable Funds Committee has funded the Staff Recognition Awards for the last 6 events. The 2026 event will be held on 3 July 2025 (ahead of the NHS' birthday the following Sunday) at Ebbw Vale Leisure Centre.

Given the financial situation we find ourselves in, where budgets are extremely tight or over committed, it does not feel appropriate to be funding this event through core budgets. However, we recognise that the Charitable Fund is not able to fully cover the cost of the event at this point in time, and the Chief Executive therefore agrees to underwrite any residual costs of the project.

We therefore ask that the Charitable Funds Committee consider supporting the event once again.

3.3 Outcome Measures & Benefits

3.3.1 Activity Analysis

Up to 500 people are invited to the event. This includes all nominees, Board members, members of Llais and our partners. In addition, the event is celebrated on Pulse, the ABUHB staff intranet.

3.3.2 Benefits

The outcome measures associated with the Staff Recognition Awards includes:

- Increased sharing of best practice to improve and enhance patient care/experience

- Increased staff engagement
- Increased staff satisfaction
- Enhanced reputation of the Health Board through positive publicity in the media resulting in increased public confidence
- Increased patient and public engagement due to the involvement of Llais on the judging panel
- Showcasing of the excellent work going on in the Health Board
- Celebration of our staff
- Raising morale

3.4 If the Bid is not Supported

If the bid is not supported, we will either not be able to proceed this year which will be the first time in 14 years, or the Chief Executive will need to consider an alternative funding model.

3.5 Bids relating to Additional Staff Resources

N/A

4. Financial Analysis

4.1 Funding Requested

The £30,000 (including VAT where items are eligible) reflects an attendance of approximately 550 people and includes the production, provision of food and the hire of the venue.

Consideration is currently being given to host the Annual Nursing Conference and Allied Health Professional Conference the days before with the same set up. If this proposal is determined to be deliverable, costs can be shared between the two events and thus cheaper for each event. However, this will be confirmed in the coming months.

If additional sponsorship funding comes in or we confirm another event to share costs, we will reduce the amount of charitable funds we require.

4.2 Availability of Local Charitable Funds

There are no other charitable funds to draw on.

4.3 Revenue Costs

There are no ongoing revenue costs associated with this request.

4.4 Revenue Costs - Affordability

N/A

5.0 Conclusions and Recommendations

The aim of the Staff Recognition Awards is to recognise excellent practice and outstanding performance of the employees of Aneurin Bevan University Local Health Board.

Aneurin Bevan University Health Board
Committee meeting date
Agenda Item

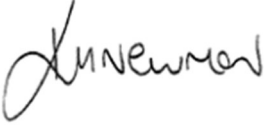
Every day staff demonstrate their dedication in ensuring the delivery of excellent health care services to the people we serve. An annual staff recognition event will go some way towards publicly recognising their valuable contribution. It will support the improvement of patient care by the internal sharing of best practice and enhance public confidence and the reputation of the Health Board through positive external publicity.

The Charitable Funds Committee is asked to support the Staff Recognition Event with funding of up to £30,000. Please note we will continue to look for sponsorship so are confident that this will reduce.


Bid Prepared by:

Name:	Dan Davies
Title	Chief Business Officer
Date:	17 November 2025

Supported by Division

General Manager:	Karen Newman
Signature:	
Date:	17 November 2025

Executive Sponsor

Name:	Nicola Prygodzicz
Job Title:	Chief Executive
Signature:	
Date:	17 November 2025



**CYFARFOD BWRDD IECHYD PRIFYSGOLN ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 January 2026
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Administration Costs 25-26
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Robert Holcombe, Director of Finance, Procurement and Value Based Healthcare
SWYDDOG ADRODD: REPORTING OFFICER:	Gareth Lewis, Head of Financial Services & Accounting

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

Ar Gyfer Penderfyniad/For Decision

The cost of administering charitable funds is charged to Charitable Funds in order that Health Board revenue budgets are not used to subsidise the charity. This report outlines the administration costs for approval by the Committee.

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

In line with charitable funds authorisation procedures (items over £25k) the Charitable Funds Committee is requested to approve the forecast administration costs for 2025/2026 of £180k which is based on current information and to give approval for this to increase, should there be additional costs, to a revised maximum of £185k.

Additional costs may be incurred due to the figures being estimated at 30th November 2025 and actual figures will be used at year end so by putting in a range for the approval we will not need to come back to the Committee for further approval.

Cefndir / Background

Administration costs are charged to charitable funds annually. This fee covers the cost of administering the funds on a day-to-day basis and includes finance and general administrative costs, the Committee’s time, Procurement’s time and audit

fees together with accommodation and utility costs. The cost has been reviewed and updated for 25/26.

Asesiad / Assessment

Administration costs of £180,112 are being sought, an increase of 9% on the prior year:

Administration Costs	Actual 2024/25 £	Estimated 2025/26 £	Difference
Charitable Funds Office Staff	95,952	108,936	12,984
Senior Finance Staff	29,382	27,531	-1,851
Audit Fees	19,763	20,099	336
Cost of Committee Meetings	11,872	11,615	-257
Accommodation and Utility Costs	6,687	4,234	-2,453
Procurement	2,455	2,997	542
Other Charges	113	337	224
Fundraising Charges	562	1,114	552
NHS CT Membership	3,250	3,250	0
NHS CT Operational Support Grant	-4,485	0	4,485
Total Administration Cost	165,551	180,112	14,561

The following section provides context to what each element of how the administration charge benefits the charity:

Item	Actual 2024/25 £	Estimated 2025/26 £	Change	Change %
Charitable Funds Office Staff	95,952	108,936	12,984	14%
What this gets us	<p>The Charitable Funds staff charge relates to the day to day running of the charity. An assessment of time allocated to the charity is made and assumes:</p> <ul style="list-style-type: none"> • 81.8% of a Band 3 • 93.0% of a Band 4 • 60.1% of a Band 4 • 77.5% of a Band 6 			
Movement explanation (>1k)	<p>An increase in staff costs due to the 3.6% pay award with effect from 1st April 2025. A vacant band 3 post in 24/25 within the CF Office staff for 4 months saving £8k in 24/25.</p>			

Item	Actual 2024/25 £	Estimated 2025/26 £	Change	Change %
Senior Finance Staff	29,382	27,531	-1,851	-6%
What this gets us	The Senior Finance Staff charge is based on the amount of time spent in relation to the governance of the funds and time for preparation and attendance at Charitable Fund Committee meetings, Audit meetings etc. and in the production of the annual accounts and report. This equates to an assumed: <ul style="list-style-type: none"> • 5.4% of a Band 8d • 7.5% of a Band 8c • 22.0% of a Band 8a 			
Movement explanation (>1k)	A reduction in the senior finance staff costs due to the retirement of a 0.90 WTE, top of pay band 8a post on 31 st July 2025. The post was vacant for 2 months and was replaced full time (1.00 WTE) at the bottom of pay band 8a.			

Item	Actual 2024/25 £	Estimated 2025/26 £	Change	Change %
Audit Fees	19,763	20,099	336	2%
What this gets us	The external audit undertaken by Wales Audit.			
Movement explanation (>1k)	N/A – less than £1k variance			

Item	Actual 2024/25 £	Estimated 2025/26 £	Change	Change %
Cost of Committee Meetings	11,872	11,615	-257	-2%
What this gets us	The time of the Charitable Fund Committee members (£9k) and the Secretariat staff (£2k) in preparing for and attending meetings is included in the Cost of the Committee meetings. Our understanding from the 2024/25 External Audit is that other NHS charities in Wales do not include this within their costs.			
Movement explanation (>1k)	N/A – less than £1k variance			

Item	Actual 2024/25 £	Estimated 2025/26 £	Change	Change %
Accommodation and Utility Costs	6,687	4,234	-2,453	-37%
What this gets us	The space to operate the charitable funds administration within Ty Gwent, Cwmbran, for those staff supporting the Charity.			
Movement explanation (>1k)	A reduction in the accommodation and utility costs reflecting the move of the Corporate Finance department from Mamhilad, Pontypool to Ty Gwent, Cwmbran.			

Item	Actual 2024/25 £	Estimated 2025/26 £	Change	Change %
Procurement	2,455	2,997	542	22%
What this gets us	Access to 3.5hours per week of a band 3-4 Procurement support officer, in raising purchase orders and dealing with any competitive tenders etc.			
Movement explanation (>1k)	N/A – less than £1k variance			

Item	Actual 2024/25 £	Estimated 2025/26 £	Change	Change %
Other Charges	113	337	224	198%
What this gets us	Other charges include bank charges and other ad hoc charges incurred by the Charitable Funds Team.			
Movement explanation (>1k)	N/A – less than £1k variance			

Item	Actual 2024/25 £	Estimated 2025/26 £	Change	Change %
Fundraising Charges	562	1,114	552	98%
What this gets us	Access to the Just Giving Platform allowing Gift Aid to be received and electronic payments to made through the Just Giving Website, plus the purchase of raffle paper.			

Movement explanation (>1k)	N/A – less than £1k variance

Item	Actual 2024/25 £	Estimated 2025/26 £	Change	Change %
NHS CT Membership	3,250	3,250	0	0%
NHS CT Operational Support Grant	-4,485	0	4,485	-100%
What this gets us	<p>There is an annual membership fee of £3,250 for NHS Charities Together based on the amount of income the charity receives.</p> <p>The membership provides a networking platform with other NHS charities in the UK, sharing best practice, collaborating on similar projects, providing regular webinars on hot topics, giving access to a national NHS charity benchmarking tool to allow evaluation of financial performance.</p> <p>Prior to this year its strategy was about grant giving but now NHS CT is shifting focus to growing the NHS charity's income, influence and impact.</p>			
Movement explanation (>1k)	<p>Funding of £4,485 received in 24/25 from NHS Charities Together for an operational support grant in relation to the Person-Centred Meaningful Activities and Engagement grant. No further grants are being made available.</p>			

The administrative charge benchmark comparison

The table below compares our administration costs against other NHS charities in Wales for the three years 2021/22 to 2023/24 taken from the latest published accounts (i.e. assesses reasonableness of the prior year charge).

	2021/22			2022/23			2023/24		
	Admin Costs £000's	Total Funds Held £000's	Admin Costs as % of Total Funds Held	Admin Costs £000's	Total Funds Held £000's	Admin Costs as % of Total Funds Held	Admin Costs £000's	Total Funds Held £000's	Admin Costs as % of Total Funds Held
Charity									
Aneurin Bevan	139	6,044	2.30%	147	5,770	2.55%	160	5,764	2.78%
Betsi Cadwalder	125	12,327	1.01%	129	11,801	1.09%	131	13,542	0.97%
Cardiff & Vale	144	8,988	1.60%	183	10,259	1.78%	148	9,354	1.58%
Cwm Taf	98	4,222	2.32%	108	3,761	2.87%	112	4,338	2.58%
Hywel Dda	106	9,773	1.08%	112	11,946	0.94%	255	11,994	2.13%
Powys	102	4,597	2.22%	125	4,258	2.94%	130	4,404	2.95%
Swansea Bay	133	6,070	2.19%	127	5,191	2.45%	129	5,142	2.51%
Velindre	155	7,395	2.10%	199	9,741	2.04%	189	21,121	0.89%
WAST	22	531	4.14%	32	399	8.02%	11	947	1.16%
Average			2.11%			2.74%			1.95%

The table highlights that Aneurin Bevan has the third highest charge at £160k, with Hywel Dda the highest at £255k. This is above the average against all Health Boards charities. When compared to % of total funds, the charges have an average of 1.95% with Aneurin Bevan above this average at 2.78%, but below Powys at 2.95%.

As detailed above, Aneurin Bevan incorporates a recharge for the Committee meetings, whilst others do not.

Administration charge as % of non-investment income.

The table above highlighted that the Administrative Charge as a % of Charitable Funds Held is marginally higher than the other NHS Charities, bar Powys.

The increase in general fund expenditure has resulted in a decrease of funds held during the year, which is predicted (and desired) to continue.

Therefore, a more appropriate measure of "affordability" which should be considered is comparing the ratio of income.

The following table represents the administration charge as a percentage of the donations, legacies and other income (course fees):

	Full Year 31-Mar-24 £000's	Full Year 31-Mar-25 £000's	Estimated 31-Mar-26 £000's
Income			
Donations	237	168	428
Legacies	44	10	22
Other Income	149	205	120
Total Income	430	383	570
Admin Charge			
	160	165	180
Admin Charge as % of Income	37%	43%	32%

This shows that the administrative charge remains affordable with current revenue, however, highlights the materiality that for each £100 received, £37 would be spent on administration in the absence of any investment income, all things being equal.

Argymhelliad / Recommendation

Approval for the estimated administration costs is requested before the end of the financial year which allows some certainty about the costs that are to be recharged from the Health Board revenue budget.

The Committee is asked to approve the estimated administration charge at a cost of £180,112 and to give approval for this to increase, should there be additional costs, to a revised maximum of £185,000.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability Choose an item. Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Choose an item. Choose an item.
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Finance

Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Improve the Wellbeing and engagement of our staff Choose an item. Choose an item. Choose an item.
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Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	
Rhestr Termau: Glossary of Terms:	
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
	Is EIA Required and included with this paper
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	No does not meet requirements An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk
Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working https://futuregenerations.wales/about-us/future-generations-act/	Integration - Considering how the public body's well-being objectives may impact upon each of the well-being goals, on their objectives, or on the objectives of other public bodies Choose an item.



**CYFARFOD BWRDD IECHYD PRIFYSGOLN
ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD
MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 January 2026
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Priority plan for growing the charity and promoting the benefits
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Robert Holcombe, Director of Finance, Procurement and Value Based Healthcare
SWYDDOG ADRODD: REPORTING OFFICER:	Rob Jones, Assistant Director of Finance

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate)
Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The Charitable Funds finance team have been asked to revisit the options appraisal that was submitted at the September 2025 meeting and bring back a prioritised plan. **CFC/3009/10**

Cefndir / Background

The committee understand the importance that growing income has to support more good causes, especially income that is unrestricted. A number of reports have been presented developing growth plans further, including:

June 2025 – Reported to the committee that income in 2024/25 had decreased and this was reflected on a national basis.

Charitable Funds Committee suggested that it may be beneficial to consider appointing someone with an indirect benefit of increasing our donations and

legacies. In addition, the Committee requested some benchmarking data from other Welsh NHS charities to compare income and review their arrangements for charity management regarding fundraising.

September 2025 – A review of fundraising was presented to the Committee.

The Charity Team proposed looking into the following and for the Committee to discuss and consider:

- Charity Magazine
- NHS Charities Together
- All Wales Fundraising Partnership
- Fundraising Regulator
- Logo
- Posters
- Thank you Cards
- Promotional Material
- Staff Lottery.

Together with high level benchmarking between the other Welsh Charities and our own.

The Charitable Funds Committee requested a prioritised plan to be considered and agreed, with a view to providing greater detail on the options presented.

January 2026 – This paper presented is to review, expand and prioritise the options presented in September 2025 and present a strategy for the next 12 months.

Asesiad / Assessment

In November 2025, the Charitable Funds team attended the HealthCare Support Worker Conference. The team did a small survey of staff who attended the Charitable Funds stand, it became apparent that many staff were not even aware that we have a Charity.

This highlighted to the team that awareness should be at the forefront of any strategy that is developed in addition to the prioritisation of the ideas presented at the last meeting.

In summary, there are three key themes and areas which should be considered interlinked and prioritised as part of the strategy:

- Branding
- Awareness
- Fundraising



Appendix 1 expands on each of the three areas

1. Brand

- A new logo and mission statement are proposed to strengthen the charity’s identity and ensure consistent, recognizable branding across all materials.

2. Awareness

- An annual magazine, posters, leaflets, and promotional merchandise will be used to raise awareness of the charity’s work and encourage community engagement.

3. Fundraising

- Plans include registering with the Fundraising Regulator, introducing contactless donation systems, and exploring future fundraising options to increase and modernize donation methods.

Argymhelliad / Recommendation

The Board is asked to:

- Agree the Growing the Charity Strategy;
- Approve the continued work on Logo and Branding of the Charity, developed alongside the Health Board communications team;
- Approve the concept for the Uniting for Health magazine partnership;
- Approve the registration with the Fundraising Regulator;
- Approve the purchase of 1 GoodBox with a view to purchasing more in 2026/27 if evaluated favourably.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	3.5 Record Keeping Choose an item. Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Not Applicable Choose an item.
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Finance
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Not Applicable Choose an item. Choose an item. Choose an item.

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	
Rhestr Termau: Glossary of Terms:	
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive Committee, including: policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
• Workforce	Not Applicable

<ul style="list-style-type: none"> • Service Activity & Performance 	Not Applicable
<ul style="list-style-type: none"> • Financial 	Yes, outlined within the paper
<p>Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed</p>	<p>No does not meet requirements</p> <p>An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk</p>
<p>Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working</p> <p>https://futuregenerations.wales/about-us/future-generations-act/</p>	<p>Long Term - The importance of balancing short-term needs with the needs to safeguard the ability to also meet long-term needs</p> <p>Choose an item.</p>



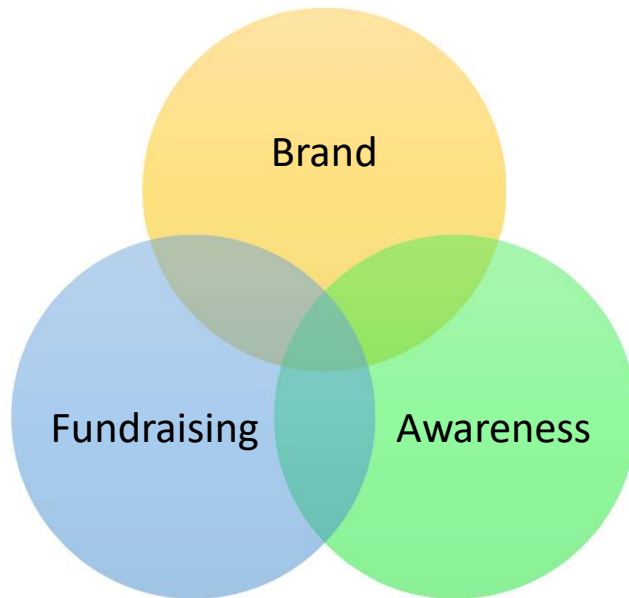
Growing the Charity Strategy



Brand & Awareness Strategy



Build a stronger, clearer brand with increased awareness that translates into sustainable income growth from donations, legacies, grants, and corporate support.



Income has trended downward in recent years; the Charitable Funds Committee requested options to grow the charity and promote benefits, including benchmarking against other Welsh NHS charities and considering dedicated fundraising/communications capacity.

The benchmarking exercise, and team workshops further highlighted the opportunity to organically grow donations.

In order to maximise opportunities it is important that the options presented are considered in a structured way as opposed delivering a number of isolated tasks. This Strategy focusses on the iteration between:

Brand ↔ Awareness ↔ Fundraising





Brand



Importance of Brand



A strong brand emphasizes recognition, credibility, and emotional connection to drive donations

The foundation of the strategy is to have a strong brand, to help build awareness. This includes:

Phase 1: Foundation (Weeks 1–4)

Goal: Establish the core of our brand.

- Review the Mission, Vision, and Values: Align with NHS principles and local community impact.
- Identify Brand Personality: Professional, trustworthy, innovative, and patient-focused.
- Develop Unique Value Proposition (UVP): Emphasize financial transparency, efficiency, and support for better patient care.
- Ensure credibility through the Fundraising Regulator

Phase 2: Visual & Verbal Identity (Weeks 5–8)

Goal: Create consistent branding elements.

- Logo & Colour Palette: Reflect healthcare trust (blues, greens) (see next slide).
- Typography & Imagery: Clean, accessible fonts; imagery showing collaboration and care.
- Brand Guidelines Document: Rules for internal and external use.



Adopt a Mission Statement



Mission Statement: A simple and concise summary explaining what we do

Mission Statement

"We exist to enhance patient care and wellbeing across Aneurin Bevan University Health Board by funding compassionate, innovative, and life-changing projects; powered by the generosity of our communities and inspired by the legacy of the NHS."

Mission Statement Summary

We fund projects that bring comfort, care, and hope to patients; powered by your generosity and inspired by the NHS.

We are in a unique situation being named after the founder of the NHS who was born in Tredegar in the borough of Blaenau Gwent and referencing Aneurin Bevan in our strapline further enhances our brand identity.



Branding – Our Visual Identity



Logo: A strong brand helps build awareness and recognition

- The Charitable Funds Team worked with the Communications Team on a design concept using:
 - The Official Trading Name of the Charity
 - Having synergy with Aneurin Bevan Health Boards own branding, to show both linkage, but also self identity.
- The draft logo is presented. The team are awaiting a newer version which ensures longevity with ABUHBS new “35” roll out:



Fundraiser Regulator

Register at annual cost of £60



The Fundraising Badge

Are you thinking of donating to or raising funds for a charity? Look out for the Fundraising Badge. When you see it, you can have confidence in a charity's fundraising.



- Registering with the Fundraising Regulator (annual charge of £60) allows organisations to demonstrate their commitment to legal, open, honest and respectful fundraising practices by displaying the Fundraising Badge and being listed in a public directory.
- All NHS Charities in Wales apart from ourselves and Swansea Bay are members

The Charitable Funds Committee is asked to approve registering with the Fundraising Regulator





Awareness



Building Awareness



A strong brand emphasizes recognition, credibility, and emotional connection to drive donations



1. Build Trust and Credibility

- When people know about the charity's mission, impact, and transparency, they feel confident their money will be used effectively.
- Awareness campaigns highlight success stories and financial accountability, reducing donor hesitation.

2. Creates Emotional Connection

- Awareness efforts (stories, videos, social media posts) help potential donors connect emotionally with the cause.
- Emotional engagement often leads to higher donation amounts and repeat giving.

3. Expands Audience Reach

- The more people who know about the charity, the larger the pool of potential donors (and fundraisers when considering our staff).
- Awareness through media, events, and partnerships increases visibility beyond the immediate community.

4. Encourages Advocacy and Word-of-Mouth

- Supporters who are aware of the charity's work become ambassadors, sharing the message with friends and family.
- Peer recommendations are powerful in influencing donations.

5. Demonstrates Impact

- Awareness campaigns show tangible results (e.g., number of lives improved, projects completed).
- Donors want to see the difference their contributions make—impact stories drive continued support.

6. Attracts Corporate and Grant Funding

- High visibility makes charities more appealing to businesses and grant-making bodies looking for reputable partners.
- Awareness signals stability and professionalism, which funders value.



Building Awareness

Being Consistent, and Visible is the priority



This includes:

Phase 3: Professionalism in our brand (Weeks 8-16)

Goal: Ensure consistent branding is embedded

- Using the new visual brand ensure that the charity visibility is improved including New Magazine launch (see next slide)
- Improve clarity in how the charity maximises publicity and awareness from the awards it makes to good causes

Phase 4: Check and build (weeks 17+)

Goal: Check brand awareness and build

- Set metrics to monitor success of brand including awareness/ interactions / donations



Charity Magazine Partnership

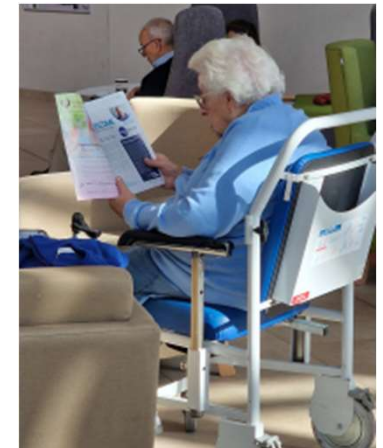
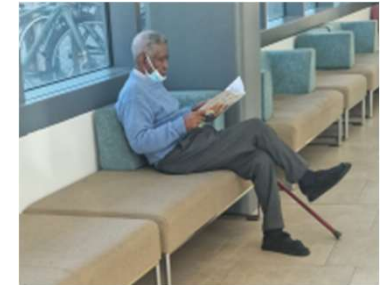


Produced annually over 4 years to raise awareness, showcase how we use the money we receive from donations, fundraising and gifts in wills



Magazine Content

- Who we are, what we do, introduction
- Our Mission/Objectives
- Logo to be featured throughout
- 24/25 Annual Report will be out of date
- Information collected for 25/26 Annual Report
- Focusing on stories, less financial information.
- Hospital Details
- QR codes allowing people to donate
- Health Board messaging too – Sepsis/Flu jab etc.
- Patient Experience & Involvement Team agreed to support with content
- Awaiting legal team to review T&C's
- Date of launch to be agreed – July/August 26



The Charitable Funds Committee is asked to approve the Magazine Concept



Posters, Leaflets & Postcards



Display posters & leaflets & introduce “Thank you” postcards

- Using the agreed branding, posters and leaflets will be produced from templates designed by the CF Team explaining how to donate. They will be unique to the relevant ward/department as they will include a QR code which links through to the ward/departments own Just Giving page.
- A second poster will run alongside showcasing how the funds are used.
- Posters in generic areas will be directed to the Committee’s Just Giving page.
- Formal thank you letters will continue to be sent and “Thank You” postcards will be introduced and sent as deemed suitable by the CF Team.
- There will be a small charge for card and laminates which will be put against the admin charge. No cost for printing.
- A disclaimer/warning will be added to all literature containing a QR code to advise the reader to check the QR code has not been tampered with.



Recognition



Ensuring the Charity is acknowledged

It is important that requests funded by the Charitable Funds Committee are acknowledged in a way that shows that Aneurin Bevan Health Charity supported the purchase of an item or supported a project/event. This can be done in several ways:

- For events, such as the Staff Awards, the Charity's logo together with appropriate wording such as "your charity supported this event" should appear on the screens at the event, on the advertisements for the event and on any literature supporting the event.
- Where staff posts for projects are funded by the Charity, it should be noted in the job advertisement and staff should have reference in footers / lanyards or similar.
- The purchase of equipment can be acknowledged by posters – see slide on posters.

Further recognition can be made by;

- Linking in regularly with the Communication & Engagement Team to promote the items the charity has supported, patient and staff story telling of how the items have made a difference.
- The Charitable Funds Team promoting the charity at various internal conferences.





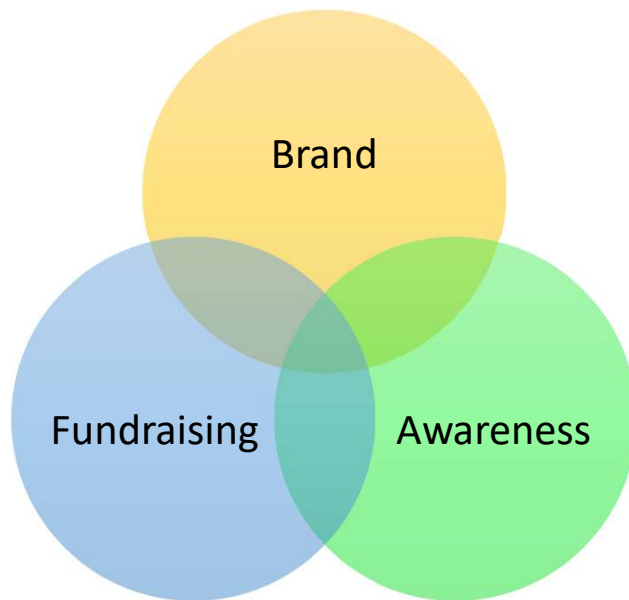
Fundraising



Fundraising



Our branding and awareness campaign should support growth. We must also evolve to make fundraising simple



Our Fundraising strategy is founded on two distinct phases:

1. Ease of donation giving
 - Utilising online, collection and cashless options for donation. This includes procuring cashless donation devices (GoodBox)
2. Utilising the 15,000+ fundraisers we have the potential to access (the staff of ABUHB)
 - Ensuring that front line staff are champions for the charity so as to maximise stakeholder awareness
 - Ensuring all staff consider our own charity when doing things for good causes



Cashless Donations 1 of 2



Introducing a Contactless Donation System

We currently offer several methods of payment to make a donation:

- Cash and cheques – these can be taken at any of our sites or posted to the CF Team
- Payment by bank transfer – where individuals can pay directly into our bank account
- Payment through our Just Giving platform.
- We do not have a facility for individuals to pay us directly by debit/credit card.

In these current times, people do not carry cash which makes it more difficult for individuals to donate to us and for staff to raise funds through raffles, honesty bookshelves and cake sales etc.

We are therefore proposing the purchase of a contactless card donation machine.

There is a charge of £438 per device for the initial purchase plus ongoing charges of £10 each month. The type we have selected is called GoodBox. This is a mobile fundraising and contactless donation solution dedicated to Charities and not for profit organisations.

The Charitable Funds Committee is asked to approve the purchase of 1 Goodbox, with a view to purchasing further in future if evaluated favourably.



Cashless Donations 2 of 2

Introducing a Contactless Donation System

There are many uses for the GoodBox

- It can be used as a stand-alone station which could be placed in a reception area or by an honestly bookshelf or Tea/Coffee station
- It can be taken out of the station and used handheld for events just like the recent Christmas Fayre held at St Cadocs as described on this poster.
- The donation amounts can be set as we wish with initial suggestion to use £3, £5 & £10 and Other.
- An electronic receipt is issued and we could use Thank You postcards to thank people if needed.
- When the money arrives in our bank account it will list the date the donations were taken so we can move the box to different locations monitoring best place to be located.
- This link provides some additional information [Fundraising Stories](#) | [Charity Success Stories](#) | [GoodBox](#)





Diolch





Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

**CYFARFOD BWRDD IECHYD PRIFYSGOLN
ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD
MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 January 2026
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Benchmarking with other NHS Wales Charites
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Robert Holcombe, Director of Finance, Procurement and Value Based Healthcare
SWYDDOG ADRODD: REPORTING OFFICER:	Robert Jones, Assistant Finance Director, Financial Systems & Services

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

Ar Gyfer Trafodaeth/For Discussion

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

Benchmarking our financial position against other NHS Wales organisations is essential for ensuring transparency, accountability, and strategic alignment. By comparing income, expenditure, and balance sheet metrics, we gain valuable insights into how effectively we utilise resources relative to our peers.

This analysis highlights areas of strength and identifies opportunities for improvement, enabling informed decision-making that supports financial sustainability and enhances service delivery. Ultimately, benchmarking fosters best practice sharing across the NHS network and reinforces our commitment to delivering value for patients and stakeholders.

Cefndir / Background

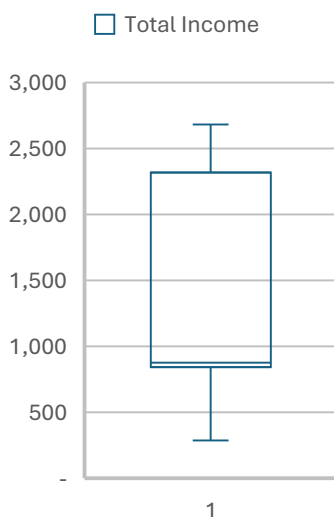
Following on from the prior presentation comparing the Welsh NHS Charities, this paper provides greater insight into performance, and variation to which we can learn and improve from. The paper compares to the following Charities which support the main Health Boards:

	Betsi Cadwalder (Awyr Las)
	Cardiff & Vale Health Charity
	Swansea Bay Health Charity
	Cwm Taf Morgannwg NHS Charity
	Hwel Dda Health Charities
	Powys Health Charity

Asesiad / Assessment

Income

NHS CHARITIES



The greater the income generated, the more good causes which can be supported.

The NHS Charities in Wales (The Charities) income ranges from a low of £286k (Powys) to a high of £2.6m (Hywel Dda). Aneurin Bevan, at £876k is the fourth largest, with Cwm Taf Morgannwg and Swansea Bay being very similar in size to us.

Figure 2 reflects that the composition of this income is also highly variable. However, it is clear that the two highest income charities have far higher legacy and donation totals, as opposed any direct trading activity.

Figure 1 - Range of income for NHS Wales Charities

NHS Wales Charities Income Generation 2023/24

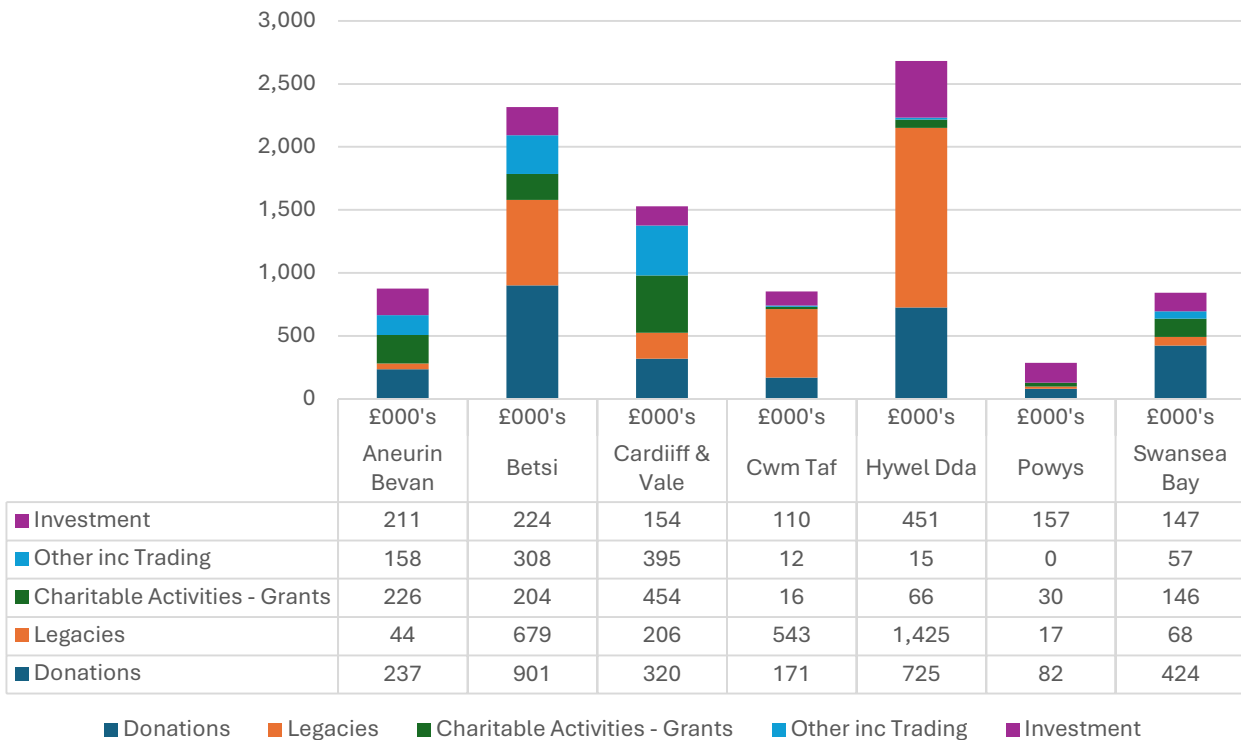


Figure 2- NHS Wales Charities Income Generation 2023/24

Legacies and Donations

Hywel Dda received the highest gifted income, however £1.3m was received from a single benefactor. Adjusting for this would make them more comparable.

However, it can be seen that the Donations income at four of the Charities exceed that at Aneurin Bevan. Hywel Dda also highlights the potential benefit of having targeted campaigns, citing that targeted fund raising for the Bronglais Chemotherapy Unit in the prior year exceeded £500k of additional income.

Action: to develop a strategy and supporting KPIs around increasing donation and legacy income

Investment Income

2023/24	Aneurin Bevan £000's	Betsi Cadwaladr £000's	Cardiff & Vale £000's	Cwm Taf Morgannwg £000's	Hywel Dda £000's	Powys £000's	Swansea Bay £000's
Investment Income	211	224	154	110	451	157	147
Investment Total C/F	5,807	11,032	5,789	3,032	9,124	3,795	4,945
Return %	3.6%	2.0%	2.7%	3.6%	4.9%	4.1%	3.0%

Aneurin Bevan returned £211k from its £5.8m of investments, a rate of 3.6%. If the return rate matched that of the highest performing Charity, Hywel Dda at 4.9% this would have provided an additional £76k of income. However, it can be seen that the rate of 3.6% is broadly in line with our peers and ranked third. Cwm Taf Morgannwg also highlights that holding half the value in investments, yielded half the interest – a scenario that may hold true if Aneurin Bevan were to utilise reserve and accelerate annual deficits.

Other Income, including commercial

Only three charities earned over £100k from other sources. Aneurin Bevan's £158k is a result of the training income received which is payable to the charity. The other two high earning charities being:

1. Betsi Cadwaladr (£308k) which is derived from direct activities such as cake sales, sporting challenges, sponsored walks and coffee mornings.
2. Cardiff & Vale (£395k) with £305k from the operation of their staff lottery, a well established historic revenue stream for Cardiff.
 - a. For the Lottery, Cardiff issued prizes of 10*£1k, 1*£7k and 1*£24k. Therefore the net proceeds would have been £264k.
 - b. At £1 per ticket per week (assumed) there would have been an average of 5,865 staff playing through the year, equivalent to one in three staff for AB.
 - c. Cwm Taff also provide a lottery, although values are not clear: [Cwm Taf Morgannwg NHS Charity | Causes | Unity Lottery](#)

Action: to develop a strategy and timetable to increase the volume of income from direct activities such as fundraising events.

Expenditure

Aneurin Bevan has the fourth highest spend in £ against our peers, however is the second highest when considering "churn" (the ratio of in year expenditure vs in year income) at 100%. The only other charity to spend the annual income in year being Cardiff & Vale.

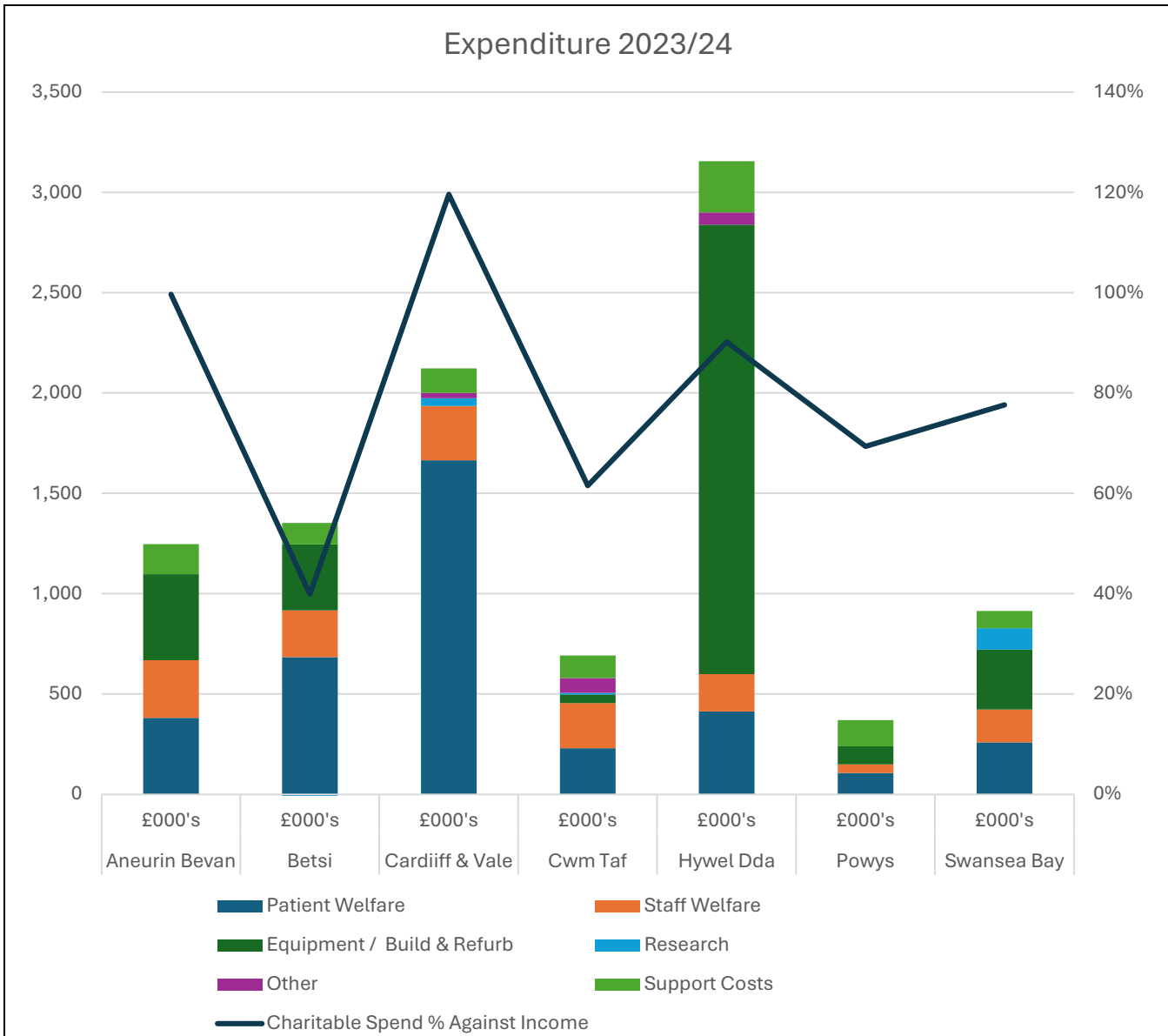
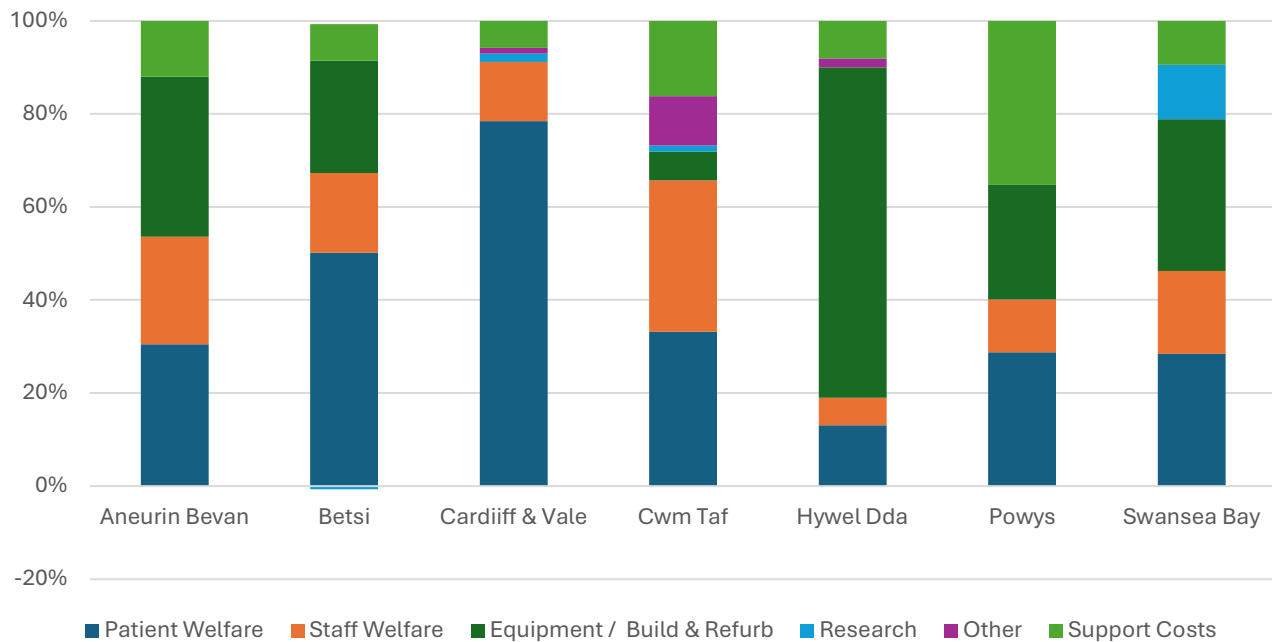


Figure 3 - Expenditure 2023/24

Hywel Dda's high expenditure in year can be attributed largely to Capital purchases, including £200k of cardiology equipment, tied to the generous legacy received in the period.

How We deploy those funds



Aneurin Bevan can be seen to spend proportionally less on patient welfare, and more on staff welfare. The support costs reflect 12% of total spend at £150k, with Swansea Bay being lowest at £86k and Hywel Dda highest at £255k.

Hywel Dda employ 8.71FTE to support fundraising and communication channels of the charity at a cost of £296k with a further £255k on governance. This far exceeds the £150k for Aneurin Bevan for both. However, the return on investment appears strong, with Hywel Dda consistently above other charities in income generation from donations and Legacies (see figure 4 below).

Action: to investigate the remit and activities of the Hywel Dda Fundraising team and its perceived return on investment (especially with respect to legacy donations)

Action: to review the policy of how expenditure is split between the various charity objectives (such as Patient vs Staff Welfare)








Charity	Category	2023/24	2022/23	2021/22	Total	Average
		£000's	£000's	£000's	£000's	£000's
Aneurin Bevan UHB Charitable Funds	Total Value of Funds Held	5,764	5,770	6,044	17,578	5,859
	Donations	237	418	399	1,054	351
	Legacies	44	146	170	360	120
	Charitable Activities - Grants	226	50	99	375	125
	Charitable Activities - Course Fees	149	219	101	469	156
	Charitable Activities - Other	9	111	25	145	48
	Investment Income	211	200	187	598	199
	Total Income	876	1,144	981	3,001	1,000
Expenditure - Raising Funds	10	10	8	28	9	
 Betsi Cadwalder (Awyr Las)	Total Value of Funds Held	13,542	11,801	12,327	37,670	12,557
	Donations	901	1,104	746	2,751	917
	Legacies	679	452	1,731	2,862	954
	Charitable Activities - Grants	204			204	68
	Charitable Activities - Course Fees	12			12	4
	Other trading activities	296	210	258	764	255
	Investment Income	224	194	102	520	173
	Total Income	2,316	1,960	2,837	7,113	2,371
Expenditure - Raising Funds	291	295	370	956	319	
 HealthCharity Elusenlechyd	Total Value of Funds Held	9,354	10,259	8,988	28,601	9,534
	Donations	320	405	1,145	1,870	623
	Legacies	206	423	134	763	254
	Charitable Activities - Grants	454	871	0	1,325	442
	Other trading activities	395	363	307	1,065	355
	Investment Income	154	141	174	469	156
	Total Income	1,529	2,203	1,760	5,492	1,831
	Expenditure - Raising Funds	475	455	456	1,386	462
Cwm Taf Morgannwg NHS Charity	Total Value of Funds Held	4,338	3,761	4,222	12,321	4,107
	Donations	171	118	148	437	146
	Legacies	543	87	367	997	332
	Charitable Activities - Grants	16	39	29	84	28
	Other trading activities	12	15	4	31	10
	Investment Income	110	94	79	283	94
	Total Income	852	353	627	1,832	611
	Expenditure - Raising Funds	0	0	0	0	0
 Elusennau Iechyd HYWEL DDA Health Charities	Total Value of Funds Held	11,994	11,946	9,773	33,713	11,238
	Donations	725	1,542	551	2,818	939
	Legacies	1,425	1,921	281	3,627	1,209
	Charitable Activities - Grants	66	102	24	192	64
	Other trading activities	15	13	4	32	11
	Investment Income	451	405	315	1,171	390
	Total Income	2,682	3,983	1,175	7,840	2,613
	Expenditure - Raising Funds	296	452	388	1,136	379
 Elusen Iechyd Powys Powys Health Charity	Total Value of Funds Held	4,404	4,258	4,597	13,259	4,420
	Donations	82	58	0	140	47
	Legacies	17	6	542	565	188
	Charitable Activities - Grants	30	0	0	30	10
	Investment Income	157	162	112	431	144
	Total Income	286	226	654	1,166	389
	Expenditure - Raising Funds	17	15	16	48	16
	 Elusen Iechyd Bae Abertawe Swansea Bay Health Charity	Total Value of Funds Held	5,142	5,191	6,070	16,403
Donations		424	245	457	1,126	375
Legacies		68	353	199	620	207
Charitable Activities - Grants		146	90	303	539	180
Charitable Activities/Fundraising Inc		57	36	60	153	51
Investment Income		147	147	133	427	142
Total Income		842	871	1,152	2,865	955
Expenditure - Raising Funds		287	297	224	808	269
 ELUSEN Gwasanaeth Ambiliwans Cymru Welsh Ambulance Service CHARITY	Total Value of Funds Held	21,121	9,741	7,395	38,257	12,752
	Donations	9,850	1,434	1,333	12,617	4,206
	Legacies	2,450	2,795	1,314	6,559	2,186
	Charitable Activities - Grants	323	0		323	108
	Charitable Activities/Fundraising Inc	1,595	647	427	2,669	890
	Investment Income	249	144	114	507	169
	Total Income	14,467	5,020	3,188	22,675	7,558
	Expenditure - Raising Funds	816	973	363	2,152	717
 ELUSEN Gwasanaeth Ambiliwans Cymru Welsh Ambulance Service CHARITY	Total Value of Funds Held	947	399	531	1,877	626
	Donations	19	15	18	52	17
	Legacies	165	5	17	187	62
	Charitable Activities - Grants	427	11	0	438	146
	Investment Income	11	4	0	15	5
	Total Income	622	35	35	692	231
	Expenditure - Raising Funds	0	0	0	0	0

Figure 4 - comparisons over time

Balance Sheet

Aneurin Bevan has the fourth highest asset balance, half the balance of Betsi Cadwaladr and Hywel Dda but comparable with Cwm Taf Morgannwg, Powys and Swansea Bay:

Assets held as at 31 March 2024

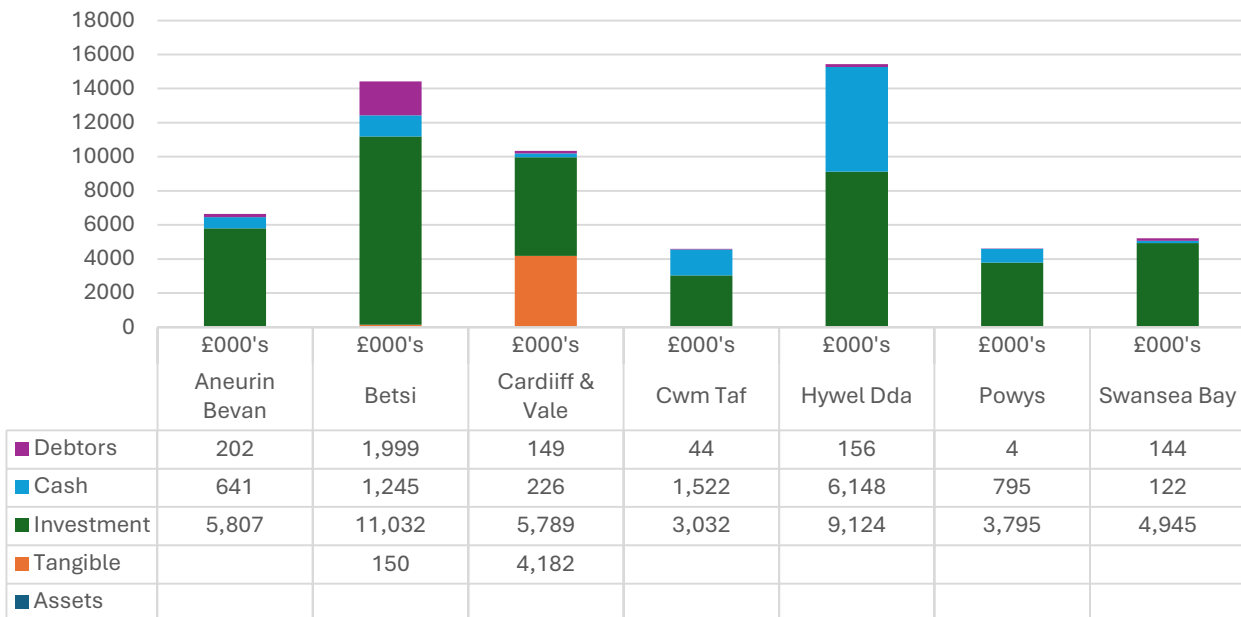


Figure 5 - Assets held

Cardiff & Vale are the only Charity to have significant other Tangible assets at £4m, reflecting Rookwood Hospital. Expressions of interest in the sale of this site commenced in 2024: [Public Statement: Expressions of Interest Rookwood Hospital - Cardiff and Vale University Health Board](#). The £150k assets for Betsi Cadwaladr relate to land held in Porthmadog. The £2m of Debtors reflects Accrued Income, although it is unclear the breakdown of this balance.

The assets of the Charities support the following deployable fund splits:

Fund Compositions

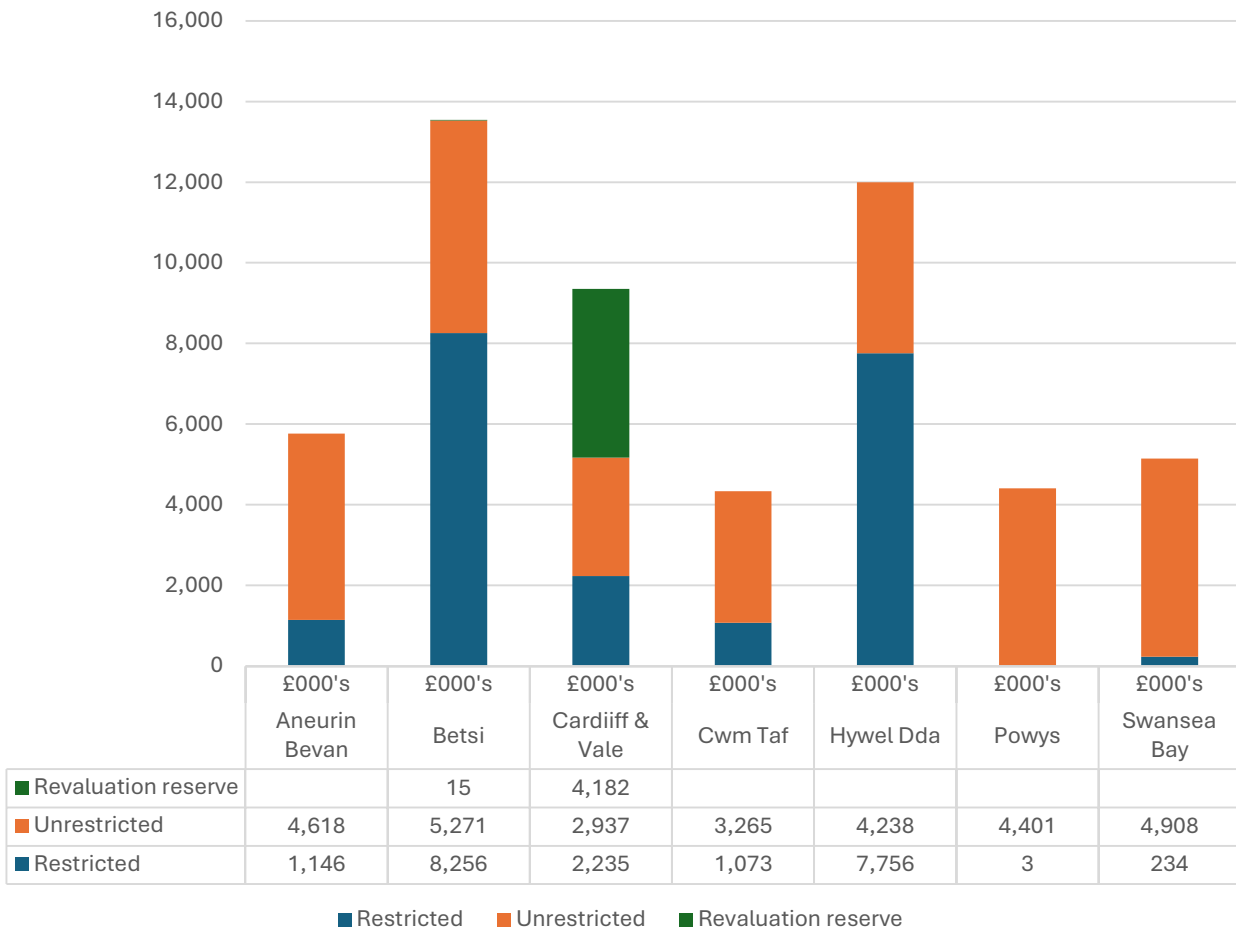


Figure 6 - Composition

It can be seen from Fig. 6 that the three highest "value" charities have the largest amounts restricted. Unrestricted funds remain consistent across the Charities with a low of £3m and high of £5m.

Argymhelliad / Recommendation

The Charitable Funds Committee is asked to consider and discuss this report, and note the following actions identified for the Assistant Director of Finance to own:

- to develop a strategy and supporting KPIs around increasing donation and legacy income
- to develop a strategy and timetable to increase the volume of income from direct activities such as fundraising events.
- to investigate the remit and activities of the Hywel Dda Fundraising team and its perceived return on investment (especially with respect to legacy donations)

- to review the policy of how expenditure is split between the various charity objectives (such as Patient vs Staff Welfare)

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability Choose an item. Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Choose an item.
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Finance
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Improve the Wellbeing and engagement of our staff Choose an item. Choose an item. Choose an item.

Gwybodaeth Ychwanegol:

Further Information:

Ar sail tystiolaeth: Evidence Base:	
Rhestr Termiau: Glossary of Terms:	KPIs – Key Performance Indicators
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	

Effaith: (rhaid cwblhau)

Impact: (must be completed)

Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive
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	Committee, including: policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
• Workforce	Not Applicable
• Service Activity & Performance	Yes, outlined within the paper
• Financial	Yes, outlined within the paper
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	<p>No does not meet requirements</p> <p>An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk</p>
Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working https://futuregenerations.wales/about-us/future-generations-act/	Integration - Considering how the public body's well-being objectives may impact upon each of the well-being goals, on their objectives, or on the objectives of other public bodies Choose an item.

Aneurin Bevan UHB Charitable Funds

Antonia Cavalier, Client Investment Director

7th January 2026



CCLA's partnership with Jupiter

- On 10 July 2025, Jupiter Fund Management plc (Jupiter) announced a partnership with CCLA Investment Management.
- This is subject to approval by the regulator, the Financial Conduct Authority (FCA). Until then, it is business as usual.
- This partnership concludes a long process which was driven by CCLA for several reasons:
 - Governance (converting our funds to Charities Authorised Investment Funds (CAIFs))
 - Resilience (an ongoing commitment to our clients of all sizes)
 - Growth (improvements in our operational infrastructure)

Commitments made by Jupiter

Jupiter has committed to maintaining the following elements of CCLA's identity:

- Branding, visual identity, ethos and culture.
- Investment philosophy and client service model.
- Stewardship activities and ethical investment.
 - This is underpinned by an agreement from Jupiter to the CBF Trustees (as the largest shareholder of CCLA) to maintain the above commitment for 25 years.

CCLA's client interaction, now and once the deal completes, will remain exactly as it is – distinctive, purpose-led, and deeply personal.

It is what makes them special, and it is what we are here to amplify.

Maximilian Guenzl, Co-Head of Client Group

Portfolio valuation

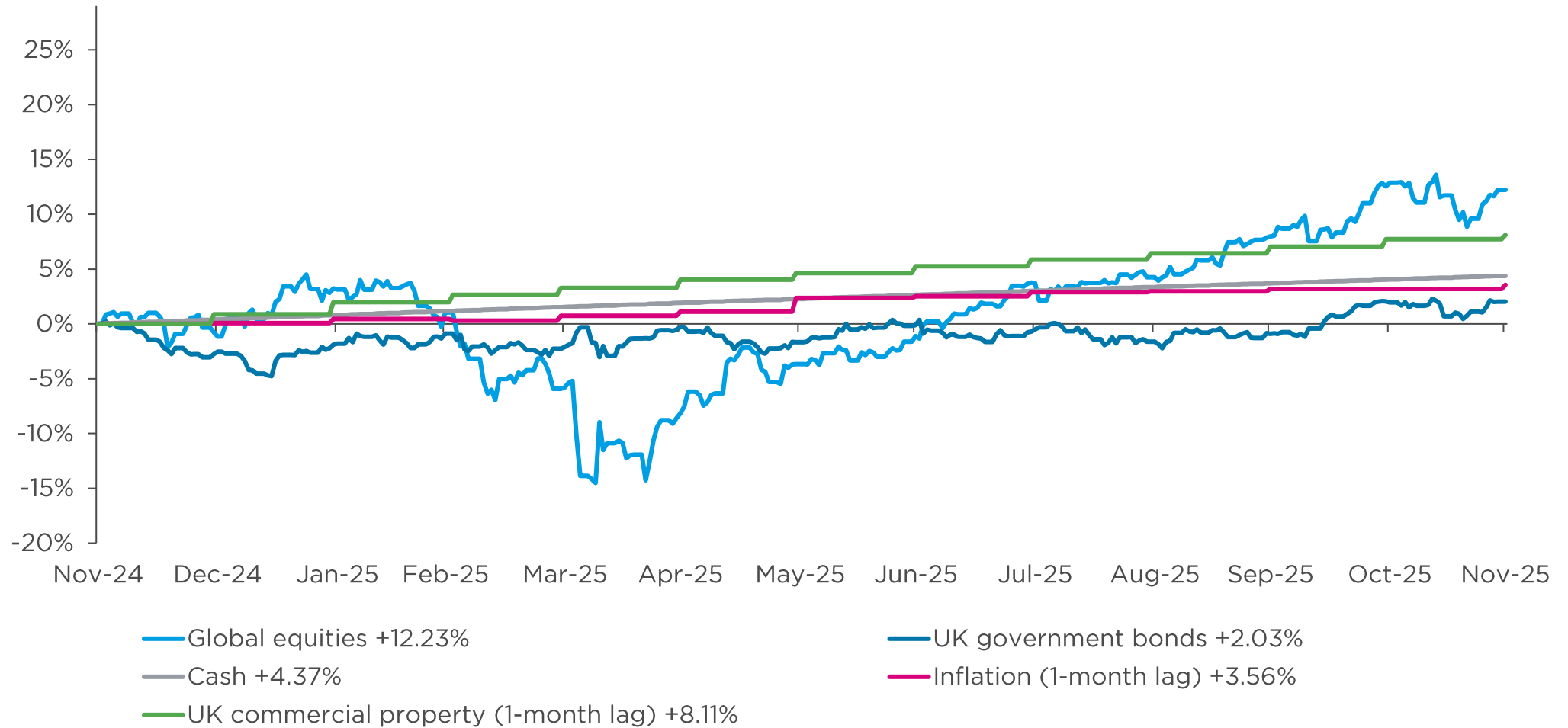
Holdings	Market value	Forecast income yield	Forecast annual income
COIF Charities Ethical Investment Fund	£3,751,725	3.20%	£114,455
COIF Charities Property Fund	£826,145	5.32%	£43,939
Total portfolio	£4,397,870		£158,394

Source: CCLA as at 19 December 2025, Annual income figures from long-term funds are based on current fund share holdings and forecast distributions per fund unit for calendar year 2025. Annual income figures for COIF Charities Deposit Fund balances are based on the current declared interest rate which is subject to change. Please note that this portfolio valuation is not intended for audit purposes. Forecast yields and annual income is not guaranteed.

Please see valuation risk warning at the end of this presentation.

Investment philosophy and performance

Market review – 12-month returns



Source: Bloomberg, as at 30 November 2025. Inflation and UK commercial property performance are on a one-month lag. **Past performance is not a reliable indicator of future results.**

Asset allocation overview

Our overarching goal is to deliver investment performance of CPI+5% gross of fees

Equities

Through direct participation in economic growth, equities are expected to provide most of the long-term increase in capital value

Allocation range:
50–85%¹

Alternatives and property

Including infrastructure, contractual income, property, and private equity as a source of diversification and capital growth

Allocation range:
0–35%²

Fixed income

Fixed income assets traditionally used to provide diversification, relative valuation versus equities and other asset classes has improved

Allocation range:
0–50%³

Cash

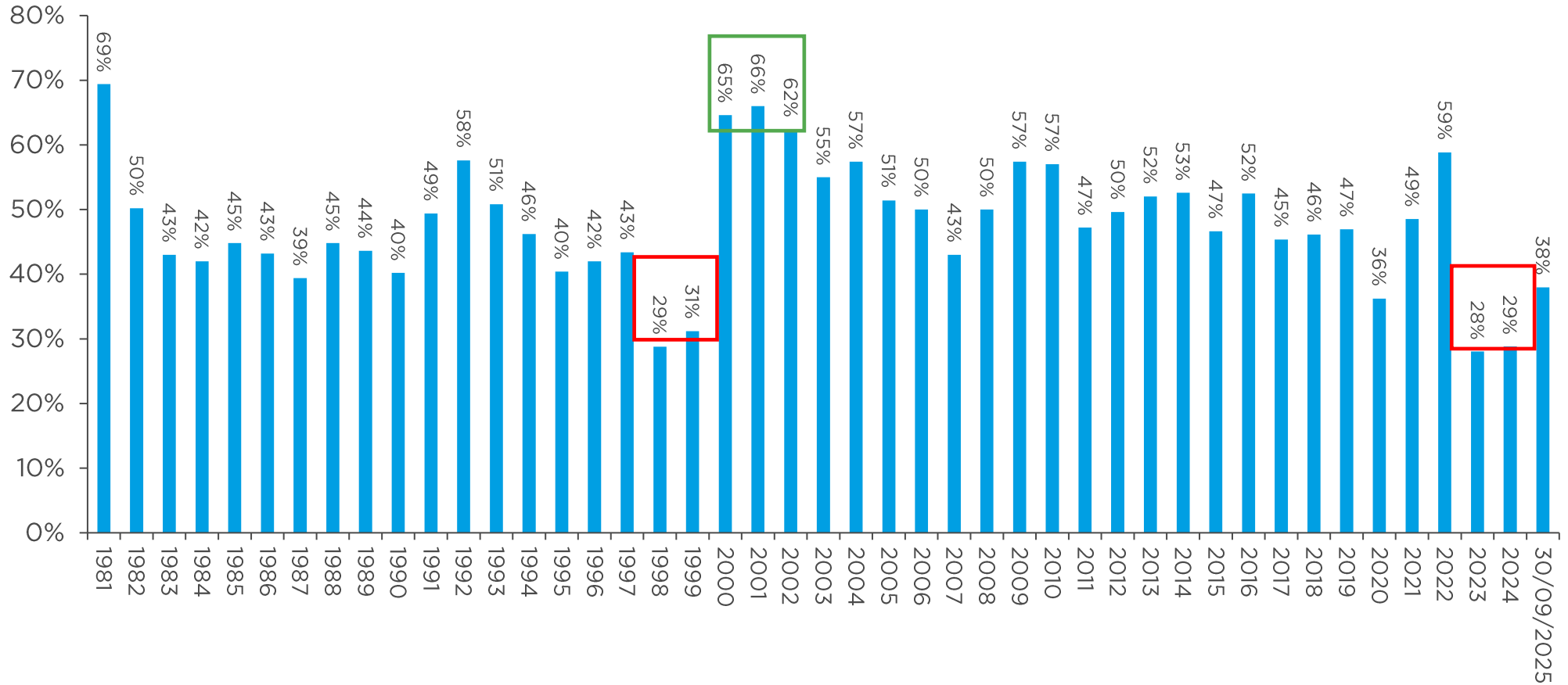
Cash, as an almost riskless asset, acts as a further source of risk reduction where necessary

Allocation range:
0–10%

¹Excludes listed investment trusts and companies with underlying exposure to alternatives such as property. ²Property exposure is limited to 10% of the portfolio. ³Includes near-cash and money-market instruments. Infrastructure and operating assets refers to investments that facilitate the functioning of society with the potential for steady cash flows. Contractual assets refers to investments that generate contracted cash flows over a specific period and are typically secured against assets. The asset allocation ranges are subject to periodic review and change.

Breadth of market leadership

Percentage of S&P 500 stocks outperforming the index



Source: Bloomberg, as at 30 September 2025.

Investment philosophy and approach

- Over the long-term, share prices are driven by fundamentals
- We believe investing in high-quality companies, that can grow cash returns consistently, at valuations that are attractive, will lead to outperformance over the long term

Multiple sources of growth

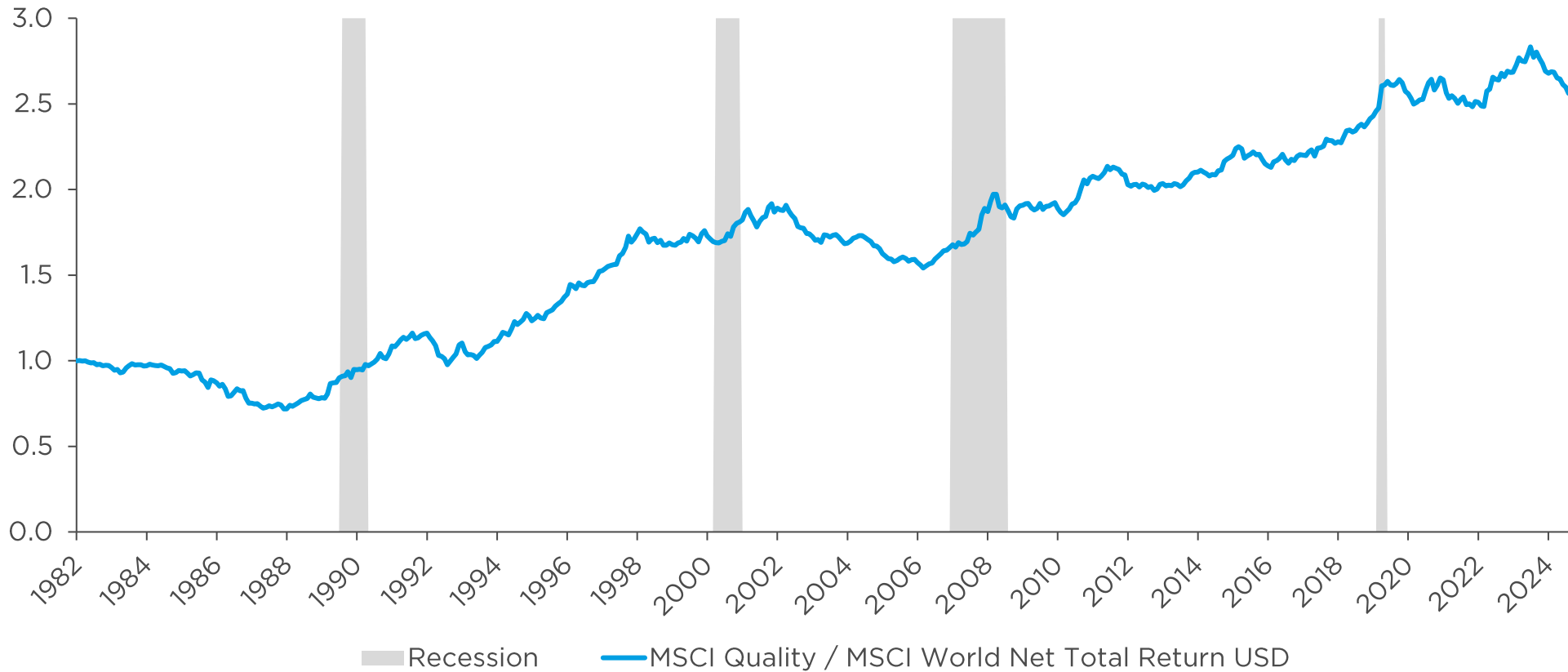
Quality

CCLA holding

Attractive valuation

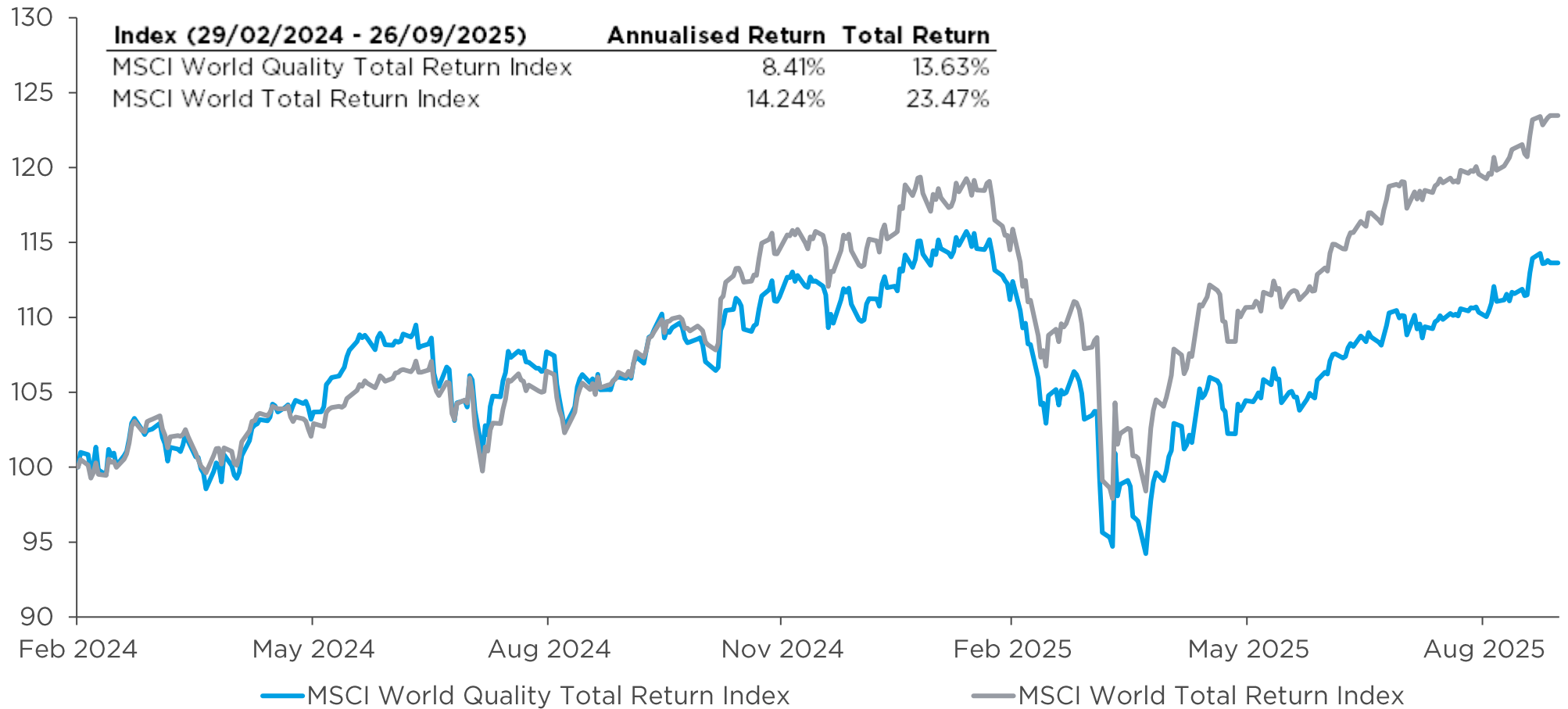
Over the long-term quality outperforms

Over the past 40 years MSCI World Quality has outperformed MSCI World by 2.5% p.a.



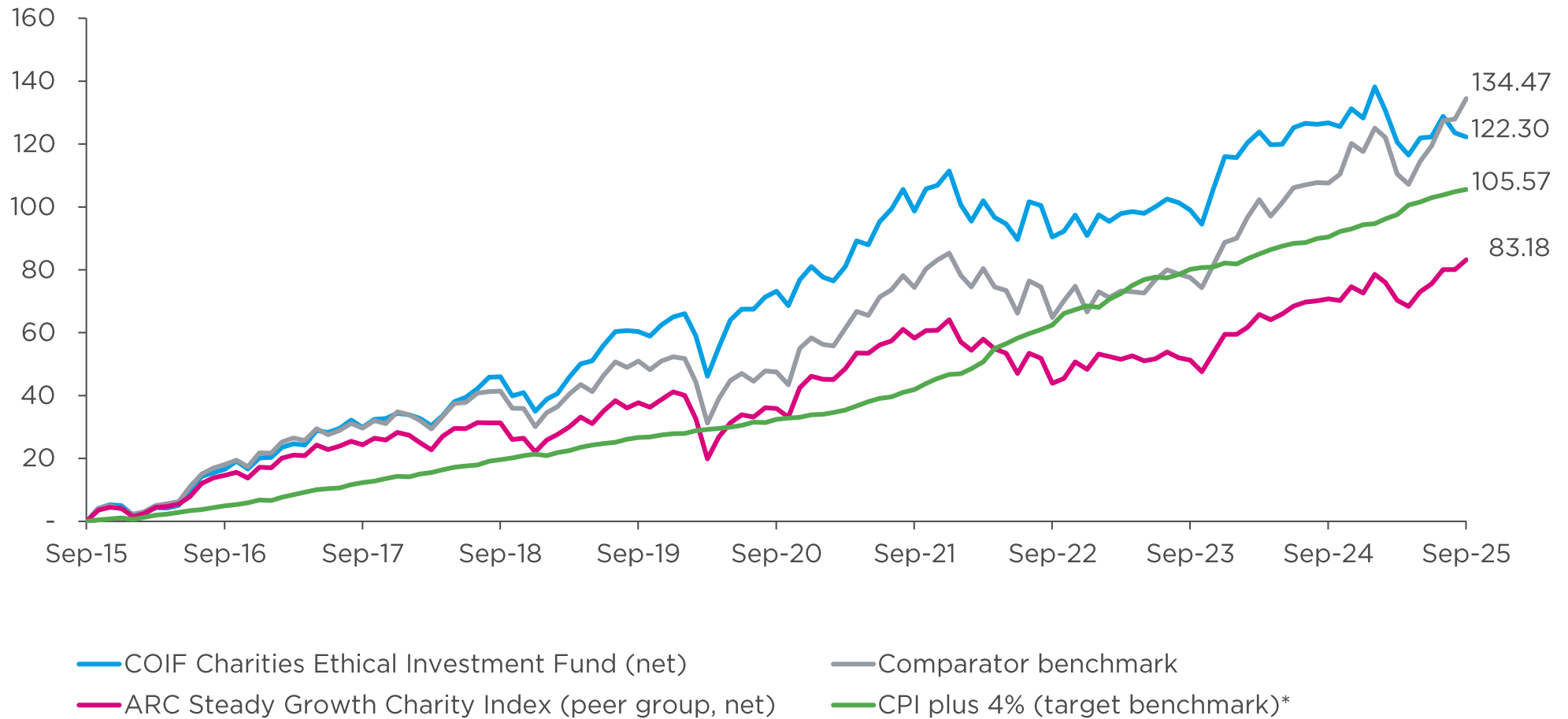
Source: CCLA and Bloomberg, showing the MSCI Quality relative to MSCI World, as at July 2025.

Quality underperforming



Source: Bloomberg, as of 29 September 2025.

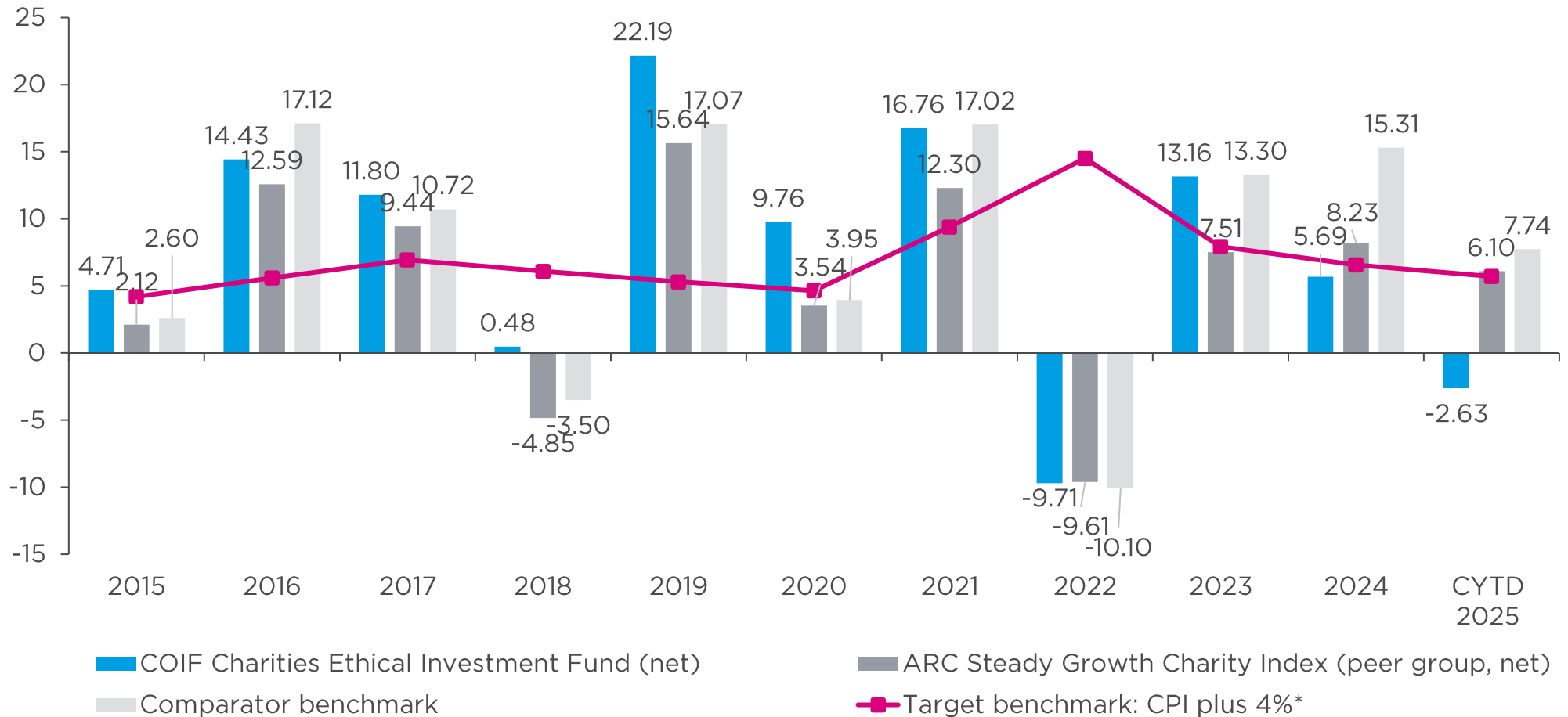
Cumulative performance (%)



Source: CCLA, 10-year net cumulative monthly performance, as at 30 September 2025. *Target benchmark: gross returns of CPI+5%. Note: CPI+4% has been used for the performance charts to give a comparable net figure by assuming 1% costs. Comparator benchmark: MSCI World Index (75%), Markit iBoxx £ Gilts Index (15%), MSCI UK Monthly Property Index (5%) and SONIA (5%). The comparator benchmark is subject to change. Please refer to detailed description in the appendix. Performance shown after management fees and other expenses, with the gross income reinvested.

Past performance is not a reliable indicator of future returns.

Calendar year and year-to-date returns (%)



Source: CCLA, as at 30 September 2025. *Target benchmark: gross returns of CPI+5%. Note: CPI+4% has been used for the performance charts to give a comparable net figure by assuming 1% costs. Comparator benchmark: MSCI World Index (75%), Markit iBoxx £ Gilts Index (15%), MSCI UK Monthly Property Index (5%) and SONIA (5%). The comparator benchmark is subject to change. Please refer to detailed description in the appendix. Performance shown after management fees and other expenses, with the gross income reinvested. **Past performance is not a reliable indicator of future returns.**

Performance factors in 2025

Health care

- Life science tools and managed care companies have faced cyclical and political headwinds driving a de-rating
- Long term demand for health care remains robust and valuations are now very compelling
- We have focused onto the strong life science franchise and exited managed care

Financials

- Holdings in exchanges and data companies hit in Q3 by concerns over AI disruption which we see as overdone
- We have lagged a rally in bank shares, but falling rates and higher valuations keep us cautious
- We have added to exchange and insurance holdings on weakness

IT

- Outside of AI semis the sector has struggled notably in software and industrial linked semiconductors
- We have exited names such as Adobe and Nice where we see disruption pressures increasing

Industrials

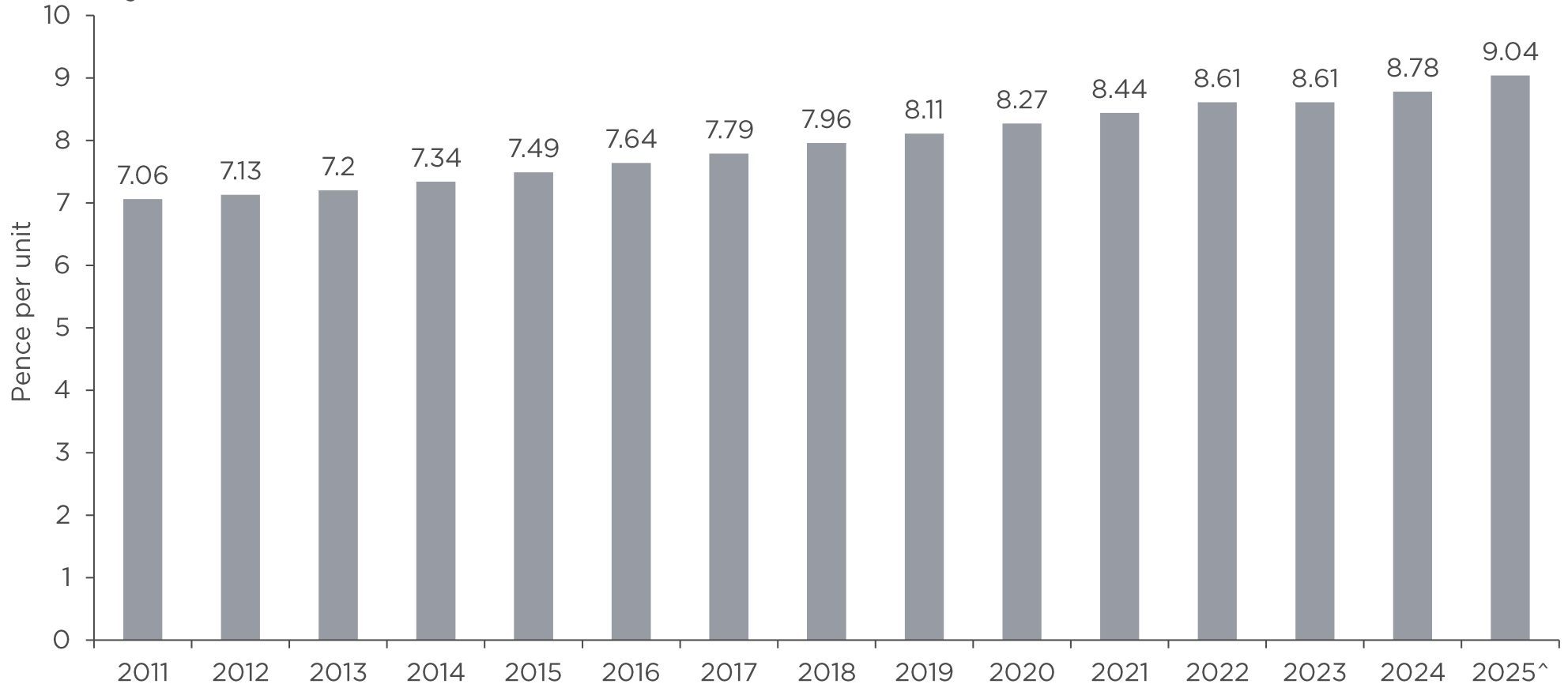
- Industrial end-markets have generally been weak with tariffs adding to the uncertainty
- Long-term themes of electrification, automation & onshoring remain intact
- We have diversified our end-market exposure with names such as Epiroc and Siemens

Infrastructure

- Infrastructure has lagged on disappointing revenue outlook for renewables, putting dividends into question
- We have reduced exposure

Historical and projected annual distribution

Current yield: 3.07%*



Source: CCLA, as at 30 September 2025. Data shows COIF Ethical Fund. [^]Projected annual distribution for COIF Ethical Fund. Projections are subject to change. *Yield is based on unit price as at 30 September 2025 and a projected annual distribution of 9.04 pence per share. Forecast yields are not guaranteed. **Past distribution is not a reliable indicator of future results.**

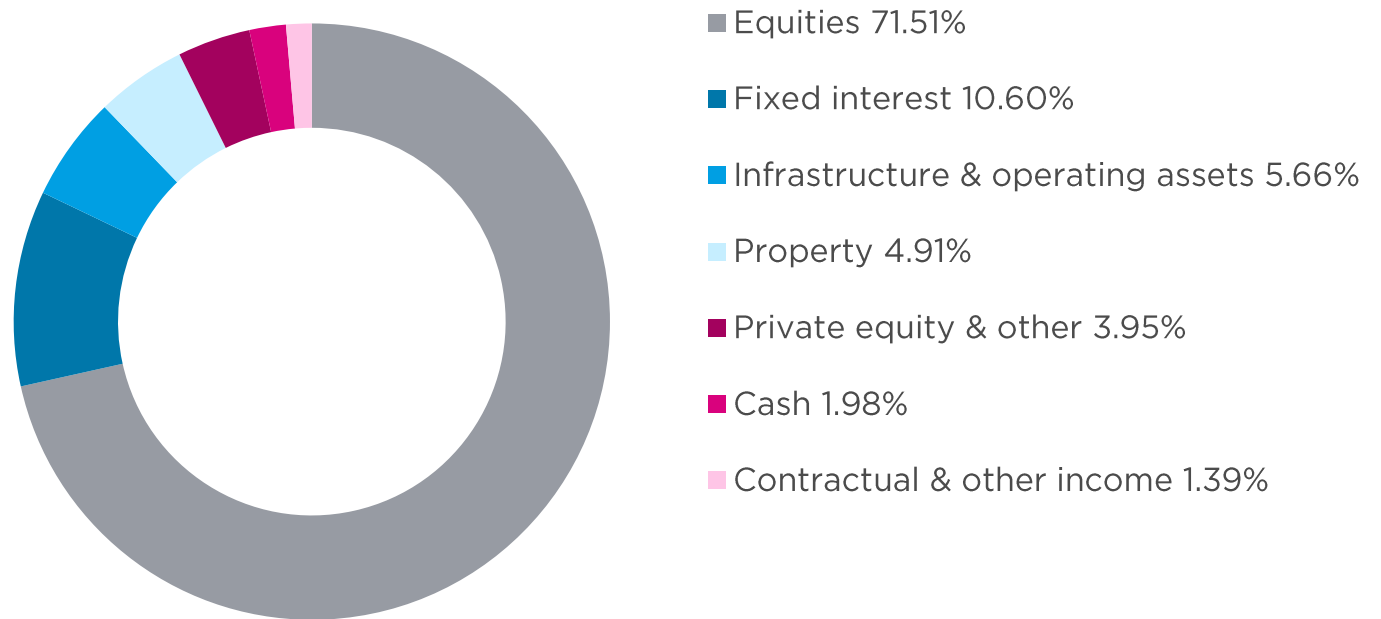
Outlook and positioning

COIF Ethical Investment Fund

Fund size:
£2,220m

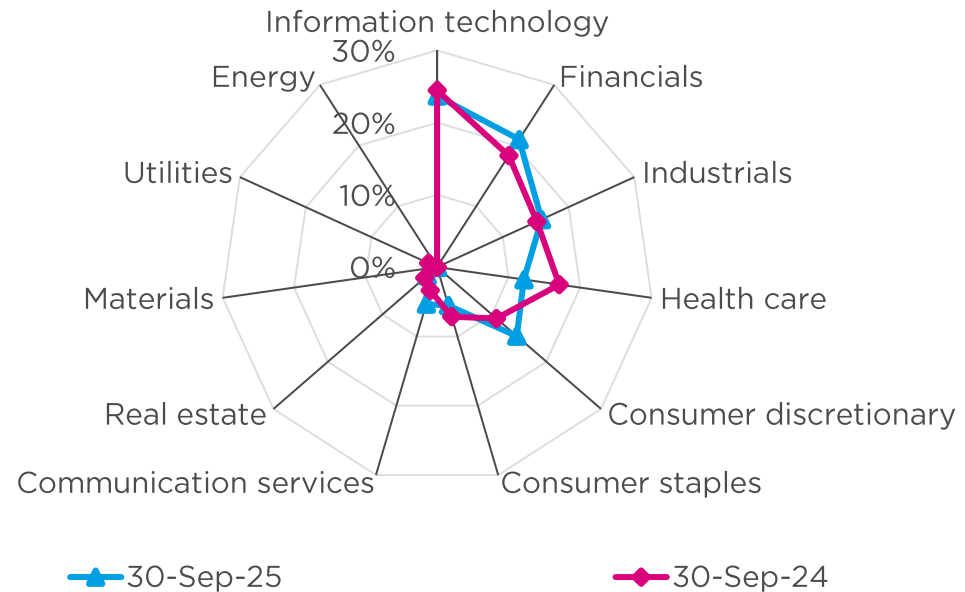
- A multi-asset, long-term fund suitable for eligible charity investors
- Seeks to provide highly diversified and well-balanced spread of investments
- Managed to meet ethical and responsible investment standards
- Uses alternative asset types to provide contractual cash flows

Source: CCLA, as at 30 September 2025. Asset allocation is subject to change. Infrastructure and operating assets refers to investments that facilitate the functioning of society with the potential for steady cash flows. Contractual assets refers to investments that generate contracted cash flows over a specific period and are typically secured against assets.



Equity positioning

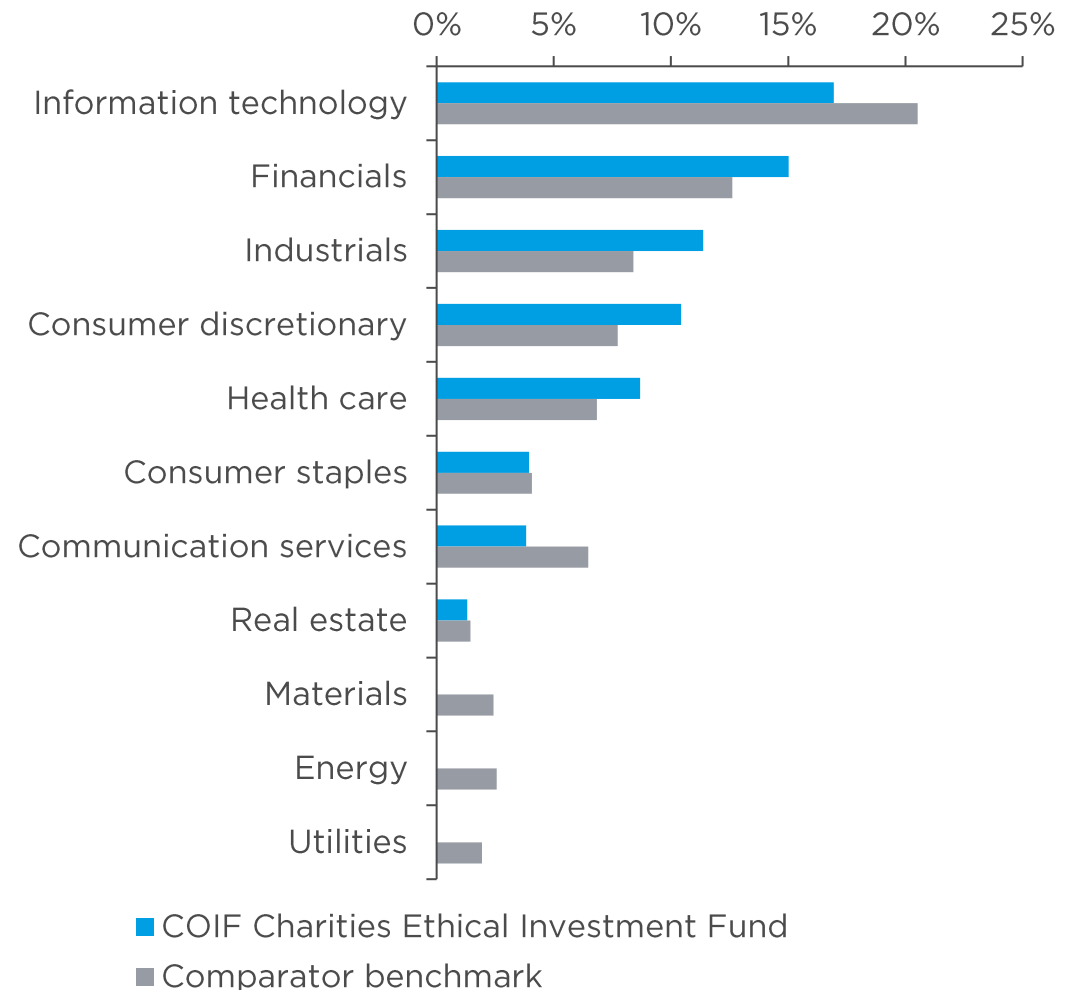
- Over the past 12 months exposure to IT has reduced slightly. Exposure to semiconductors is higher due to strong performance from Broadcom and TSMC, whilst exposure to software has been reduced as positions including Adobe, Nice and Accenture have been sold
- Health care exposure has fallen due to muted performance and uncertainty over US healthcare policy. We have exited positions in United Health, Humana, Avantor and Icon. Elsewhere, we introduced new positions in diagnostic company Diasorin and rare disease franchise Recordati.
- Overall exposure to financials has risen largely due to performance
- Within industrials, we introduced a new holdings in Epiroc a mining equipment company, Siemens, a leader in industrial automation and software with a European focus. Union Pacific Railway and SPirax Sarco have been sold.
- Over the last 12 months new positions have been initiated in TJX, Booking.com and Mercadolibre in the consumer sector, whilst LVMH has been sold.



Source: CCLA, as at 30 September 2025. Data showing COIF Ethical Fund. Sector weights are the percentage of the total equity assets in the portfolio. Asset allocation is subject to change. The market review, analysis, and any projections contained in this slide represent the house view and should not be relied upon to form the basis of any investment decisions. **Past performance is not a reliable indicator for future results.**

Equity positioning

- In the technology sector, we have exposure to several key global trends including cloud computing, digitisation, semiconductor content and AI. Examples include Microsoft, Broadcom and Intuit.
- In financials, preference to market infrastructure and data businesses over banks, such as CME Group, Visa and Partners Group
- In health care, we favour life science tools businesses such as Thermo Fisher and medical equipment businesses such as Stryker with clear long-term growth drivers
- In industrials, we prefer professional services businesses with high recurring revenue alongside niche capital goods business over deep cyclicals e.g. Schneider Electric, Relx and Experian
- In consumer discretionary, exposure to high-quality consumer-facing businesses where there is limited risk of disruption e.g. O'Reilly Automotive and Compass Group
- Very little exposure to highly capital-intensive sectors such as energy, mining and utilities.



Source: CCLA, as at 30 September 2025. Comparator benchmark: MSCI World Index, 75%. Sector allocation are subject to change. **This information does not constitute the provision of financial, investment or other professional advice.**

Exposure to artificial intelligence

Companies we own that play into the trend of investment into AI

ASML

Only provider of high end EUV lithography machines capable of manufacturing high end semiconductors

SYNOPSYS®

Leading EDA software provider. Enables increasingly complex design of semiconductors and benefits as investment into ASIC technology by hyperscalers continues



Microsoft

Leading cloud/AI infrastructure provider & application software developer



amazon

Leading cloud/AI infrastructure provider



BROADCOM®

Provides networking equipment that connect data centres as well as design partner for ASIC development at Alphabet, Meta & Bytedance

Alphabet

Leading cloud infrastructure provider, search engine and LLM developer



TRANE TECHNOLOGIES

Provider of HVAC equipment. Supplies data centres as well as other end markets



tsmc

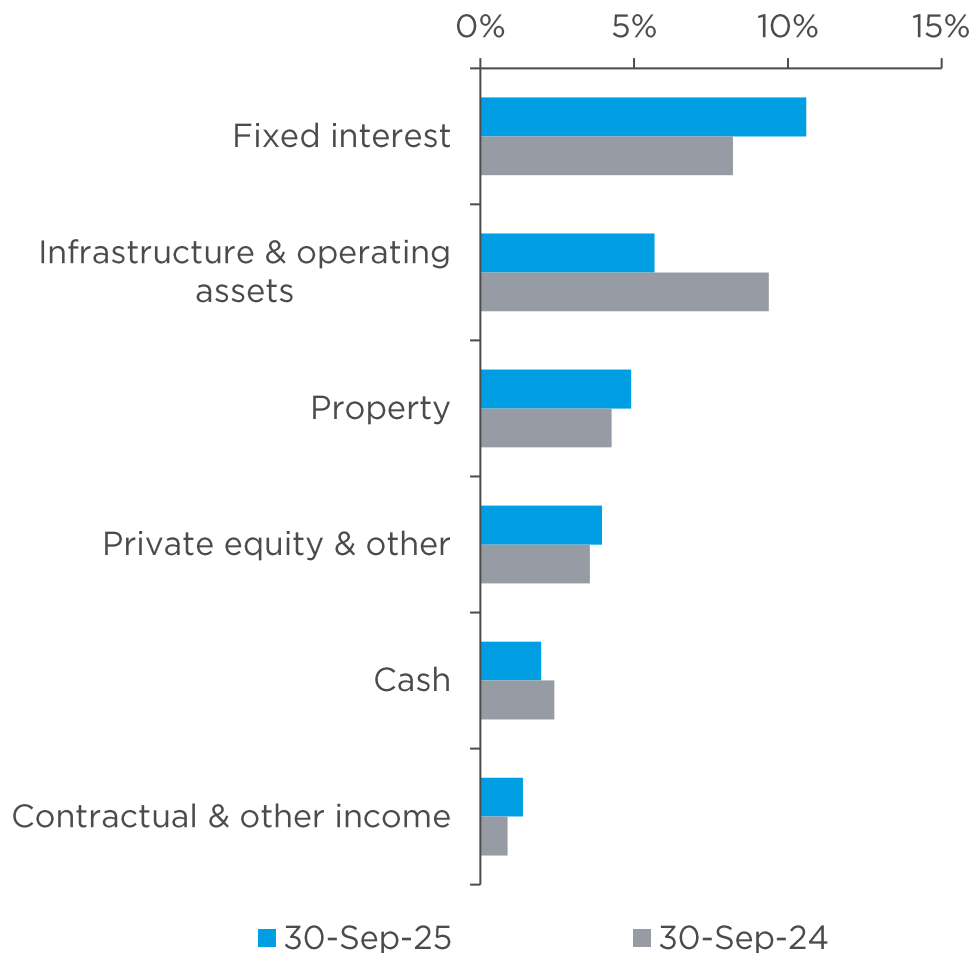
Leading outsourced manufacturer of semiconductors and only business capable of making most advanced AI semis at scale



Schneider Electric

Provider of electrical equipment and power management systems. Supplies data centres as well as other end markets

Positioning in other assets



- The non-equity assets provide diversification and contribute to returns over time
- We invest in high-quality real assets such as traditional infrastructure, renewable energy, student accommodation and logistics warehousing
- A structurally higher interest rate environment is a headwind for assets that derive the majority of their return from a fixed stream of cashflows, distributed as dividends. We have pivoted the alternatives allocation towards assets that derive a higher proportion of their forward-looking returns from capital growth. This explains the year-on-year reduction in the infrastructure and operating assets.
- This has been reinvested into fixed income assets that provide portfolio diversification and income to support the distribution.

Source: CCLA, as at 30 September 2025. Data showing COIF Ethical Fund. Asset allocation is subject to change. Infrastructure and operating assets refers to investments that facilitate the functioning of society with the potential for steady cash flows. Contractual assets refers to investments that generate contracted cash flows over a specific period and are typically secured against assets.

Equity portfolio characteristics

Metric	COIF Charities Ethical Investment Fund	Equity benchmark	Difference
Price/earnings	21.07x	17.77x	3.30x
Earnings yield	4.75%	5.63%	-0.88%
Gross margin	49.15%	25.68%	23.46%
Operating margin	27.41%	17.83%	9.59%
Cash flow return on investment	26.15%	20.70%	5.45%
Return on equity	21.48%	17.80%	3.68%
Sales growth	9.26%	5.98%	3.28%
Earnings growth	12.69%	12.88%	-0.19%
Volatility	16.16%	17.64%	-1.48%
Net debt to shareholders' equity	31.13%	37.57%	-6.44%
Active share	81.86%		
Tracking error	5.13%		

Source: UBS HOLT and UBS Quant Answers, as at 30 September 2025. Equity benchmark: MSCI E World. Risk metrics and portfolio characteristics are for equities only. Please see the definitions in the appendix.

Conclusion

- We remain confident we can achieve our long-term objective of CPI+4%
- We continue to believe quality is the right approach for charity and faith clients
- Market conditions are exceptional – risks are rising
- We have taken action on areas of the portfolio where the long-term outlook has deteriorated and continue to introduce new ideas
- The fundamentals of our equity holdings remain strong and are very attractively valued with an anticipated internal rate of return (IRR) in excess of the index
- We continue to evolve our process and are actively looking at new means to diversify portfolios

COIF Charities Property Fund

Property sector - quarterly and annual total returns

TOTAL RETURNS BY PROPERTY TYPE

	3-MONTH TOTAL RETURNS (%)		12-MONTH TOTAL RETURNS (%)	
ALL PROPERTY	1.4		6.6	
RETAIL	2.0		9.2	
Shopping Centres	2.7		10.2	
Supermarkets	2.3		10.2	
Standard Retail - Rest of UK	1.9		7.7	
Retail Warehouses	1.8		9.6	
Standard Retail - South East	1.7		7.1	
Office	1.1		3.2	
Offices - West End	1.8		5.3	
Offices - Rest of UK	1.0		2.6	
Offices - City	0.8		3.0	
Offices - Rest of South East	0.0		0.2	
Industrial	1.7		9.1	
Standard Industrial - Rest of UK	2.4		11.1	
Distribution Warehouse - Rest of UK	2.0		9.5	
Distribution Warehouse - South East	1.6		8.4	
Standard Industrial - South East	1.4		8.9	
Residential	0.2		3.2	
Student Accommodation	0.3		3.8	
Residential excl. Student Accommodation	0.2		2.5	
Hotel	1.1		4.1	
Leisure	1.3		3.7	
Healthcare	1.7		6.7	
Other Property	1.4		4.5	

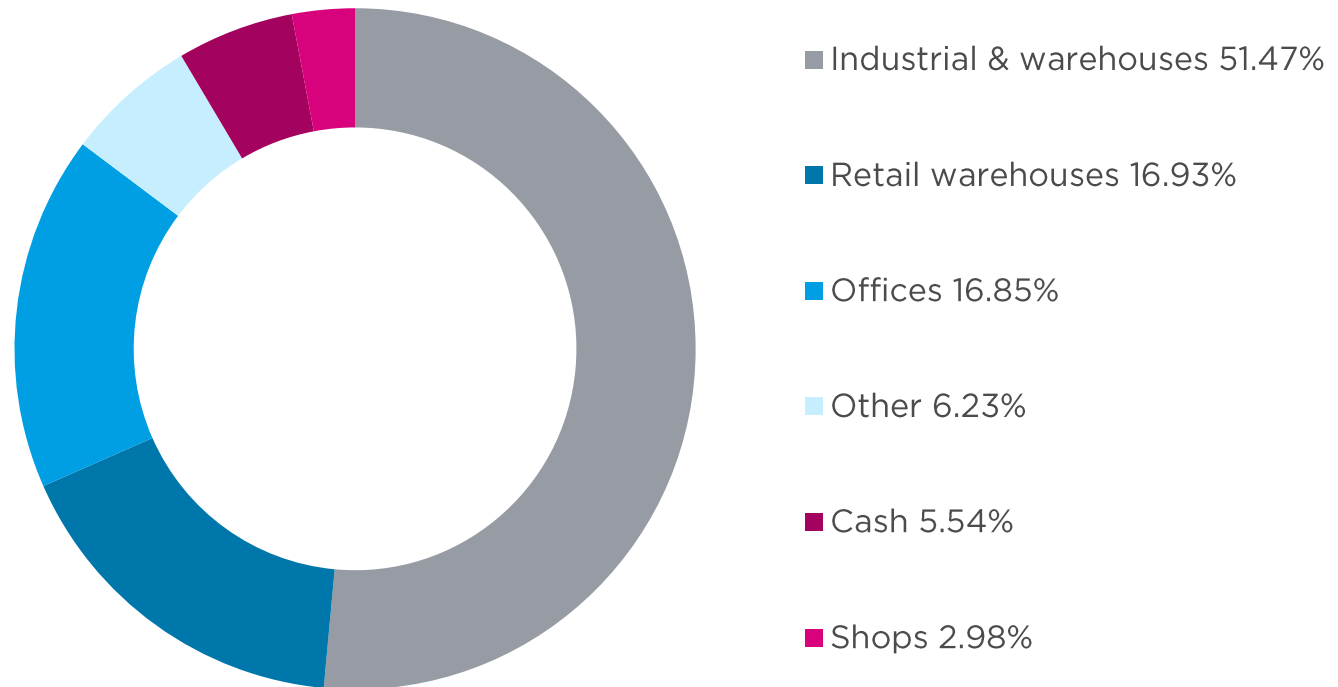
Sorted by 3-month total return

Source: MSCI Quarterly Index, as at 30 September 2025. Sourced November 2025.

COIF Charities Property Fund

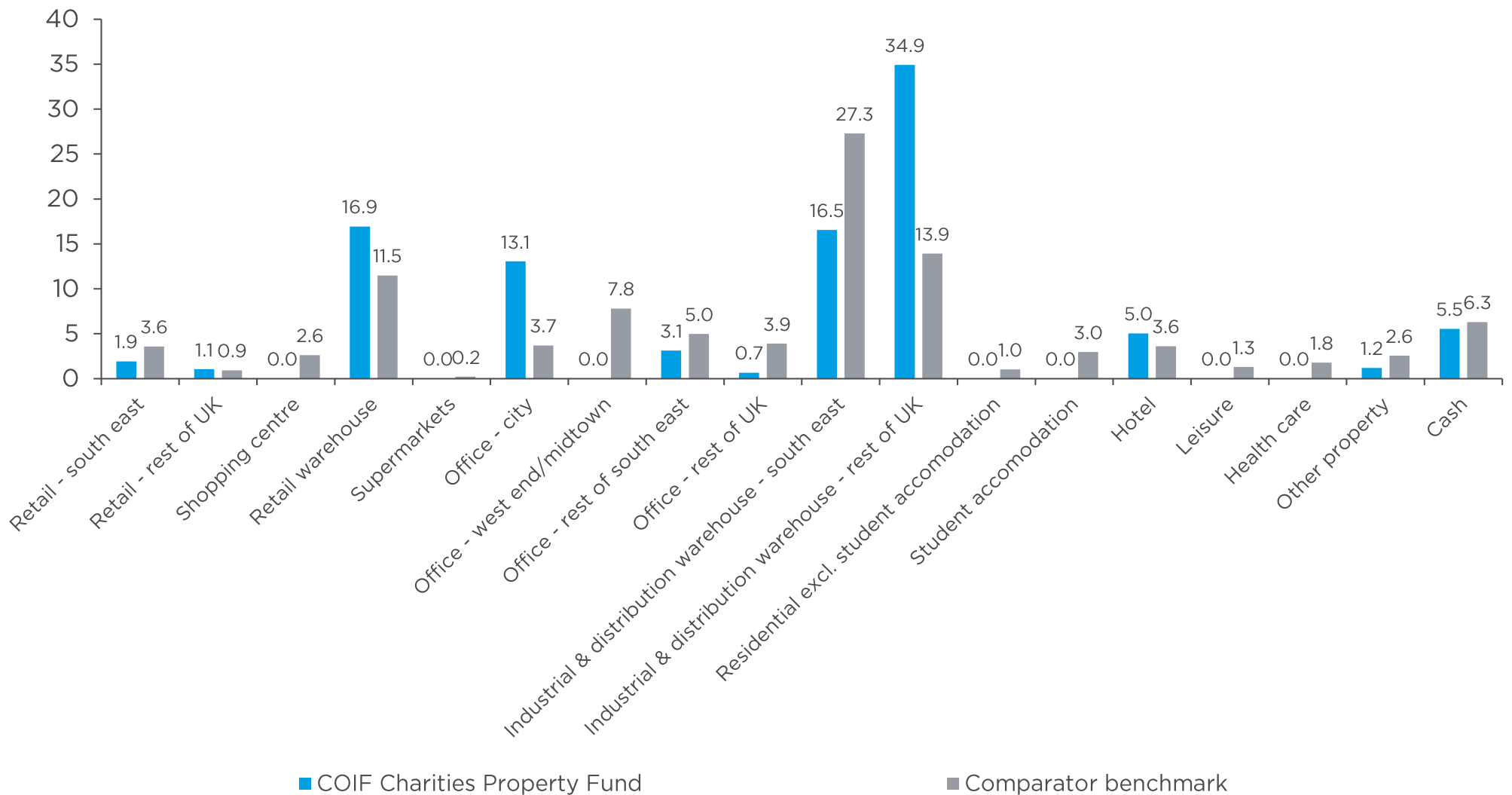
Fund size:
£464 million

- Seeks to provide high quality, well-diversified commercial property portfolio
- Actively managed to add value
- Focus on delivering an attractive income and capital appreciation



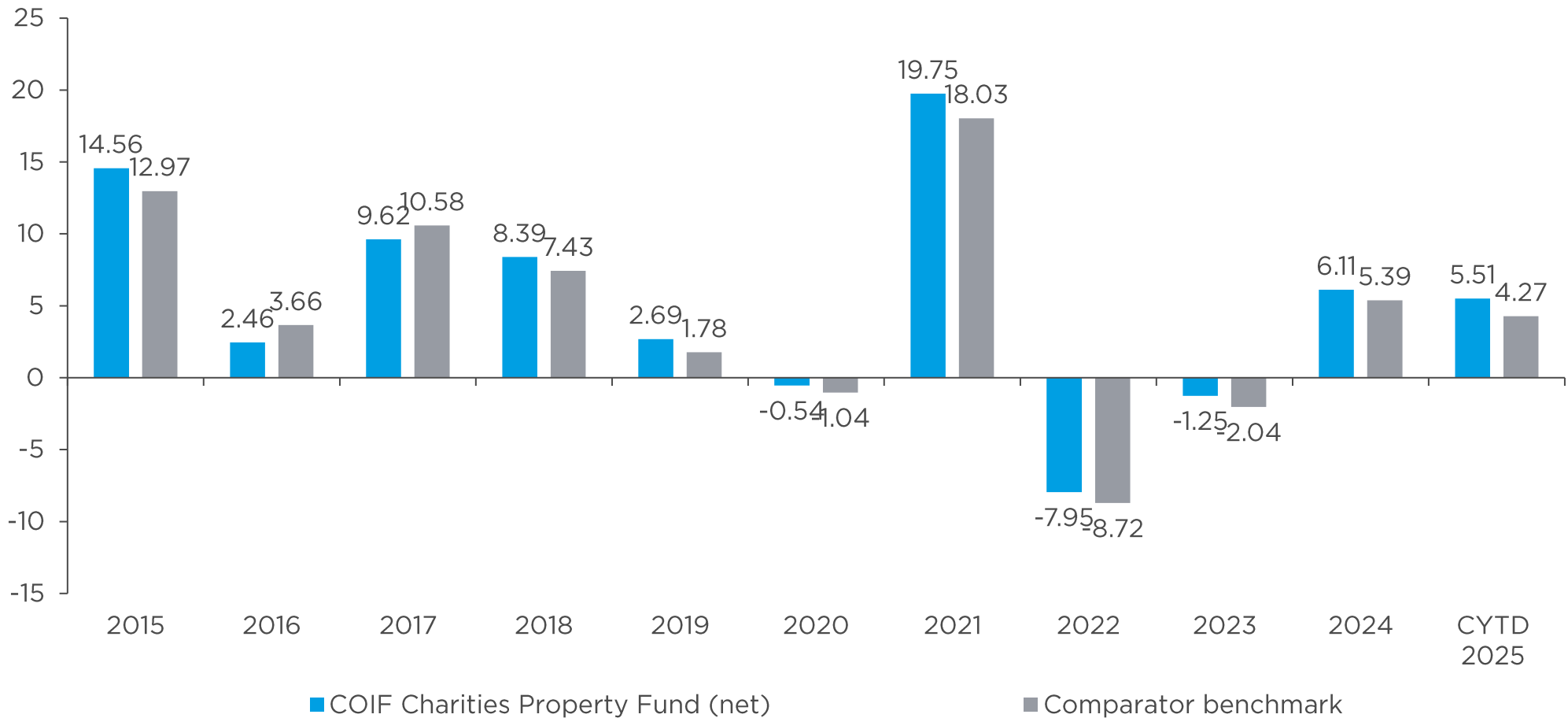
Source: CCLA, as at 30 September 2025. Allocations are subject to change.

Geographic and sector allocation



Source: CCLA, as at 30 September 2025. Comparator benchmark: MSCI/AREF UK Other Balanced Quarterly Property Fund Index. Asset allocation is subject to change.

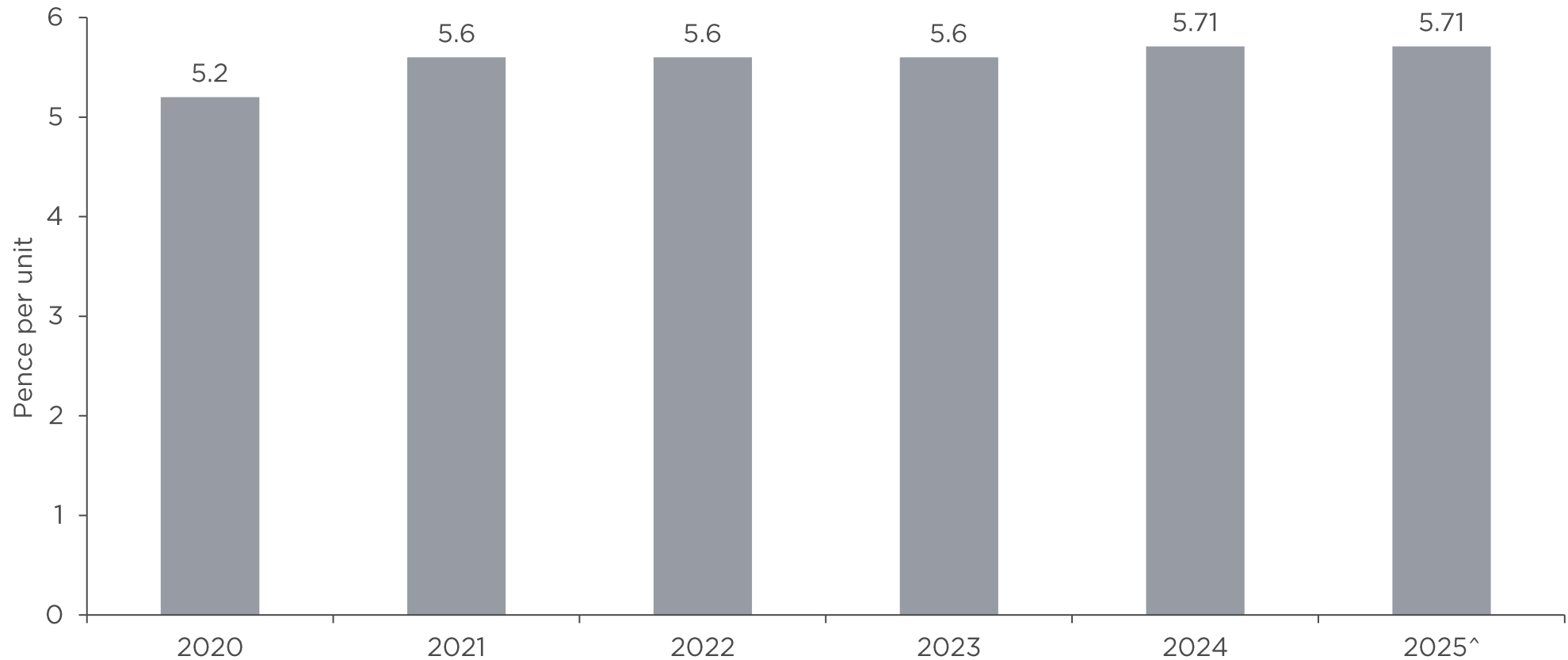
Calendar and calendar year-to-date performance (%)



Source: CCLA, as at 30 September 2025. Comparator benchmark: MSCI/AREF UK Other Balanced Property Fund Index. Total return performance is shown net of management fees and expenses on a NAV price basis with gross income reinvested. **Past performance is not a reliable indicator of future results.**

Historical and projected annual distribution

Income yield: 5.37%*



Source: CCLA, as at 30 September 2025. Data shows the COIF Charities Property Fund. ^Projected distribution. Projections for annual distribution are subject to change and are not guaranteed. *Based on NAV price as at 30 September 2025 and a projected annual distribution of 5.71p per unit. Forecast yields are not guaranteed. **Past distribution is not a reliable indicator of future results.**

Sustainability

Good Investment

Our approach
is guided by
three imperatives.

Act

Driving change

Healthy markets require
healthy communities
and a healthy planet

Assess

Re-assessing the fundamentals

Changing regulation, legislation
and consumer choice will harm
unsustainable businesses

Align

Aligning with our clients

We are the guardians,
not the owners of the
assets that we manage

A track record of catalysing real change



CCLA Corporate Mental Health Benchmark Global 100+

3 GOOD HEALTH AND WELL-BEING

Pushing for better workforce mental health

- Created the CCLA Corporate Mental Health Benchmarks, ranking 220 companies on their mental health commitments
- In 2022-25, 71 companies improved their ranking, with a combined workforce of 5.2 million
- CCLA's Global Investor Coalition on Workplace Mental Health now supported by £8 trillion in AUM*



A climate for Good Investment

13 CLIMATE ACTION

Net-zero portfolios through real-world action

- Long heritage of climate engagement, dating to 2010
- Founder signatory to the Net Zero Asset Manager's Initiative
- Co-created the Powering Past Coal Alliance Finance Principles
- Represented on the Delivery Group of the UK Transition Plan Taskforce
- Corporate engagement targeting top portfolio emitters



Modern Slavery UK Benchmark 2024

8 DECENT WORK AND ECONOMIC GROWTH

Improving the business response to modern slavery

- Former Independent Anti-Slavery Commissioner, Dame Sara Thornton, leads CCLA's modern slavery policy engagement
- Created 'Find It, Fix It, Prevent It' investor coalition, now supported by £19 trillion AUM*
- CCLA's Modern Slavery UK Benchmark has incentivised 35 companies to improve approach
- Focused hospitality/construction sector engagements underway

Source: CCLA, as at 31 March 2025. * Supporting assets under management (AUM) correct as at 31 December 2024 and updated annually.

Values-based restrictions

Value alignment	Further details	COIF Charities Ethical Investment Fund
Adult entertainment		>10% revenue from production and/or distribution of adult entertainment
Alcohol		>10% revenue from production and/or retail of alcohol and related services
Animal testing		Companies involved in animal testing without positive indicators (specific sectors)
Armaments	Civilian firearms	>10% revenue from civilian firearms production and/or retail (including key components)
	Controversial weapons	Production of landmines, cluster munitions, chemical or biological weapons (core weapons and components)
	Military and defence industry	>10% revenue from the production of military weapons and equipment (core weapons, components, equipment/services) + the provision of key non-weapons related tailor-made products for the defence industry
	Nuclear weapons	Production of nuclear weapons (core weapons and components)
Breast milk substitutes		Does not meet CCLA's minimum standard using Access to Nutrition Initiative BMS/CF index scores
Cannabis		>10% revenue from production and/or retail of non-medicinal cannabis
Climate change	Coal	Companies which produce more than 10 million metric tons of coal or have plans to expand their coal production
		Companies expanding coal-fired power generation or primarily generating electricity without aligning with the Paris Climate Agreement (as defined by CCLA).
	Oil and gas	>10% revenue from oil and gas extraction, refining or production
	Oil/tar sands	>5% revenue from oil/tar sands extraction
	Thermal coal	>5% revenue from thermal coal extraction

Values-based restrictions continued

Value alignment	Further details	COIF Charities Ethical Investment Fund
Gambling		>10% revenue from the operation of gambling establishments and the provision of key support services and products
High interest rate lending		>10% revenue from high interest rate lending
Oppressive regimes		The fund will not purchase sovereign debt issued by countries identified as being among the world's most oppressive*
Sanctity of life		Production of single-use abortifacients
Tobacco		Production of tobacco >5% revenue from retail of tobacco and related services
Minimum ESG risk restrictions	CCLA governance	Companies with poor CCLA governance rating require investment committee approval
	Controversies	Companies that fail our controversy process including non-conformance with the UN Global Compact, the UN Guiding Principles on Business and Human Rights and/or other factors defined by CCLA require investment committee approval
	ESG rating	Companies with poor Sustainalytics ESG ratings require investment committee approval

*See [Approach to sovereign debt](#). Further details of restrictions can be found on our [website](#).

Appendix

A force for Good



No. 1

Largest manager of UK charities by number¹



170⁺

Team of staff supporting clients across the UK



60⁺

Years of experience investing sustainably



5 star

Rating in all PRI equity categories



Catalyst

A leader in driving real & positive change



Ethical

investing is rooted in our investments



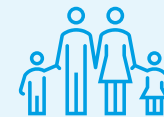
c. £15bn+

In assets under management²



£22tn+

Of assets supporting CCLA initiatives³



Find it, Fix it, Prevent it

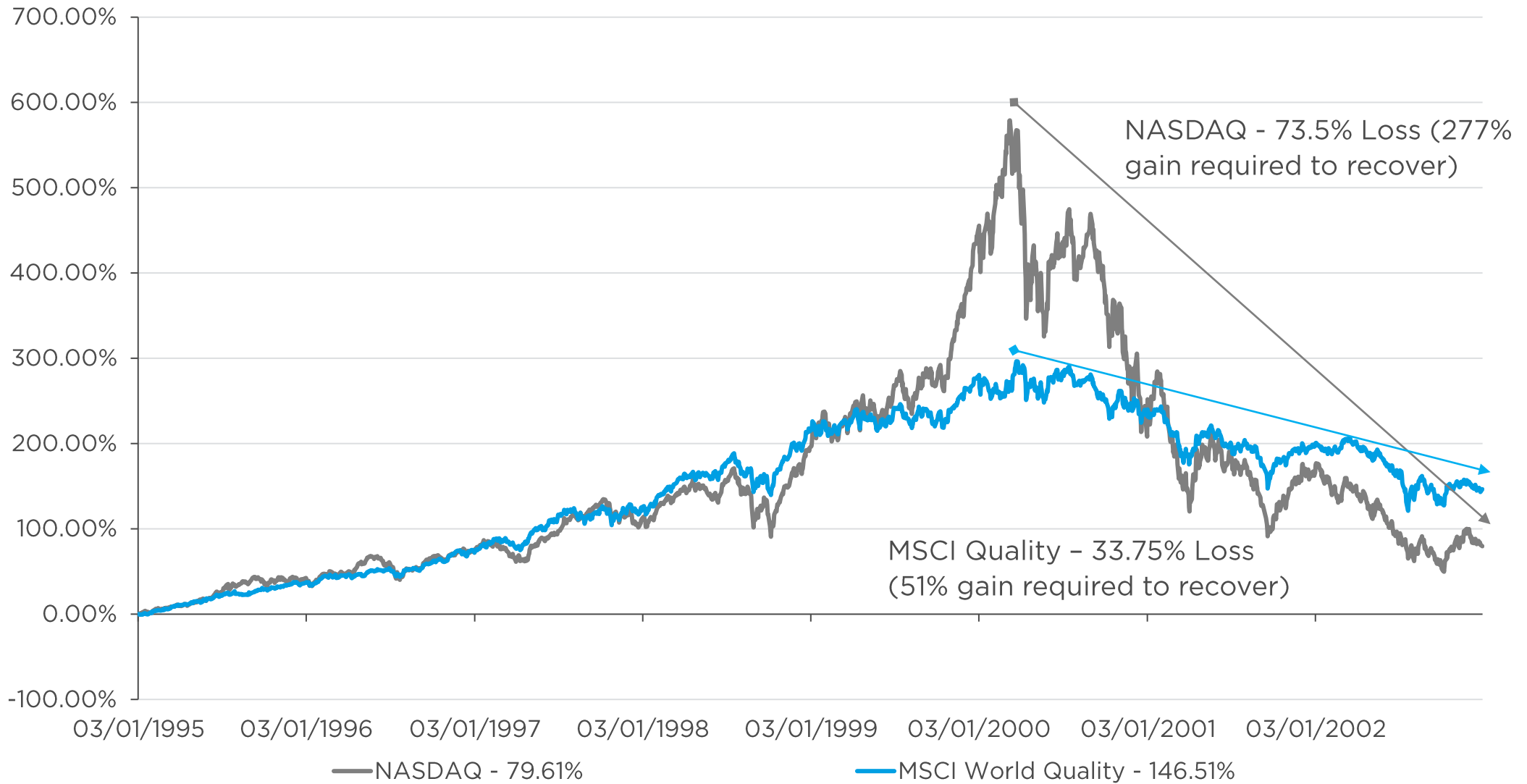
Campaign against modern slavery

¹Charity Finance surveys 2020 to 2024. ²CCLA, 30 September 2025.

³CCLA initiatives and investor coalitions include modern slavery, mental health and climate change.

Slow and steady wins the race?

NASDAQ vs MSCI Quality

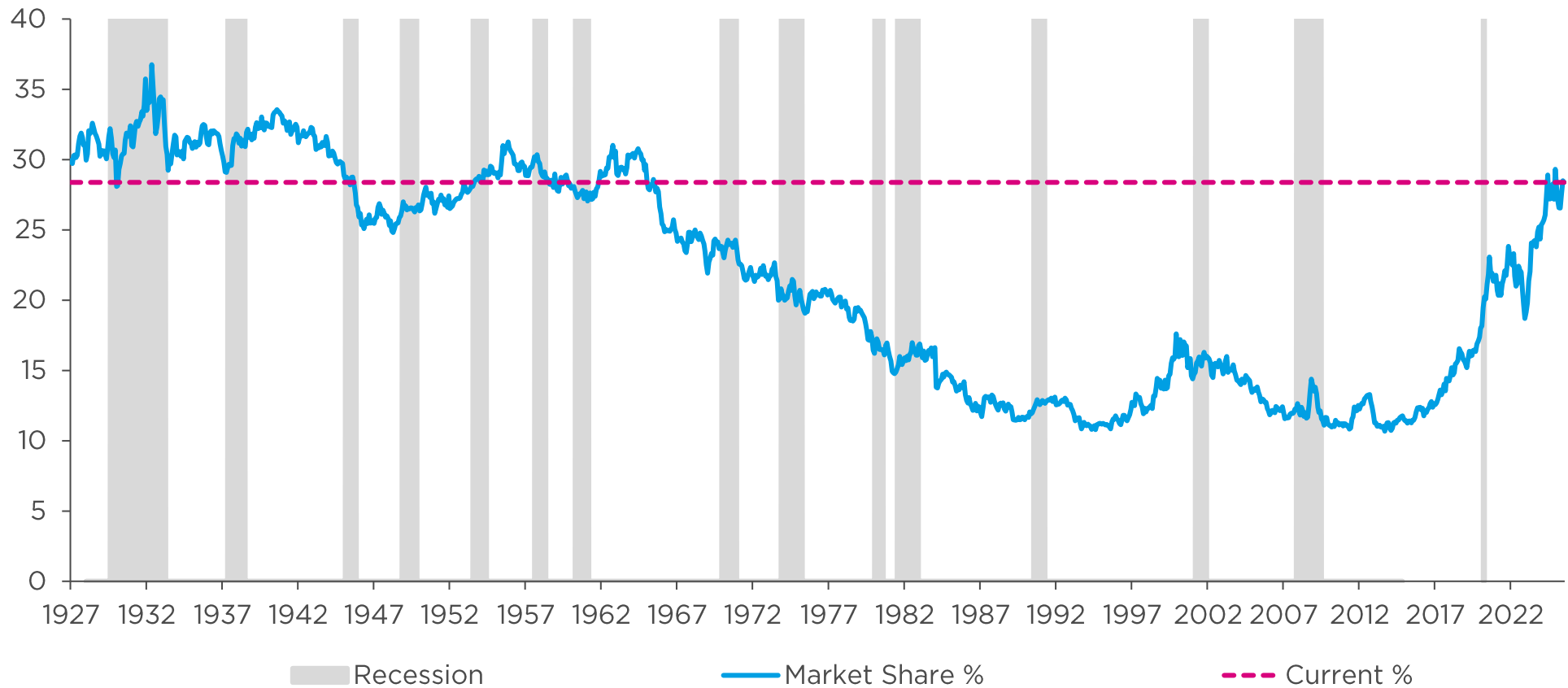


Source: Bloomberg, Investing.com as at 6th November 2025. Data from 01/01/1995 to 31/12/2002

Diversification vs concentration

Our equity portfolios constructed with c.70–90 names; no single name exceeds 4% exposure

Share of US equity market capitalisation from the largest seven stocks



Source: Empirical Research Partners. Last datapoint July 2025.

Why is quality appropriate for our client base?

Long-term time horizon,
owning consistent compounders and
'beating the fade'

Protect the real value of assets –
growth in cash flows but also resilience
in difficult times

Values-based – investing in
businesses that meet our clients'
values/ethics

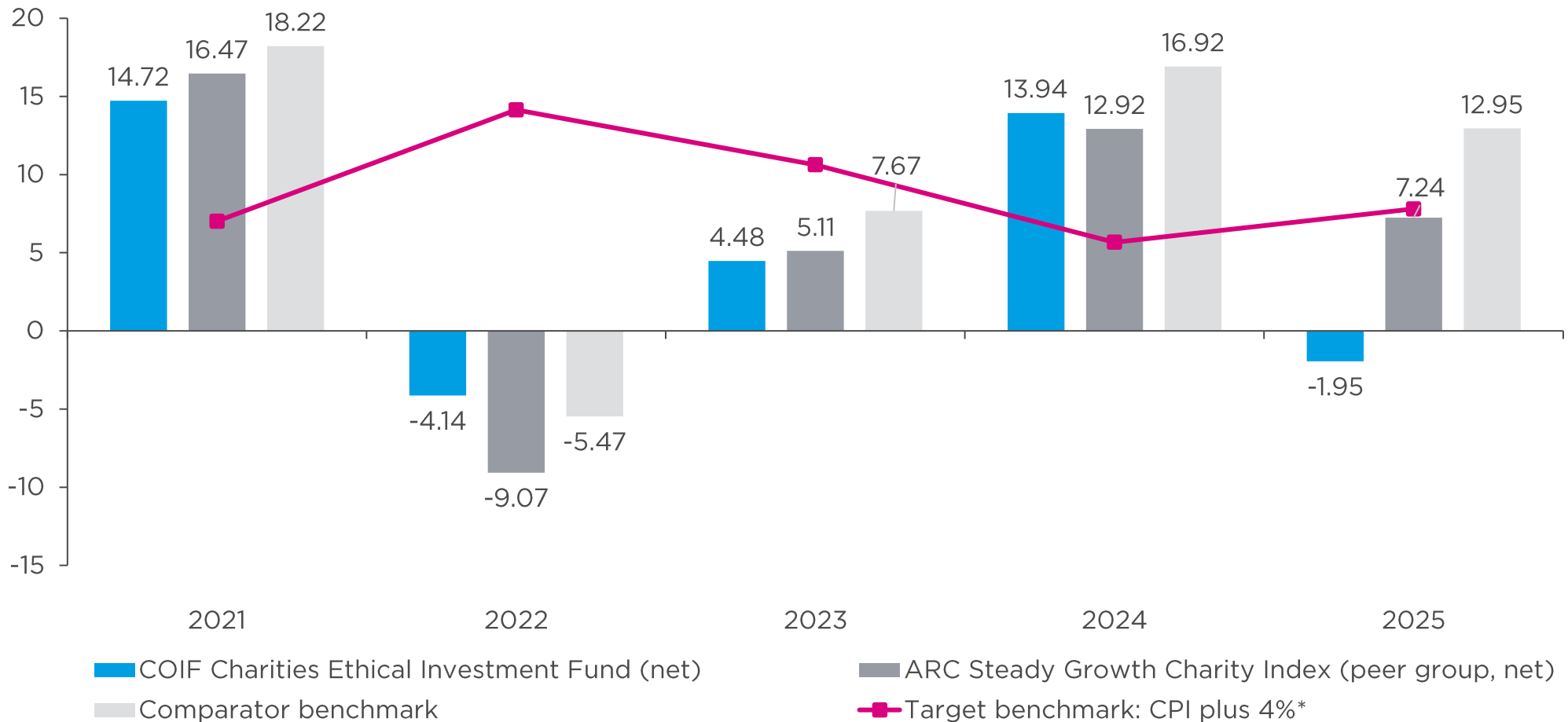
Quality is persistent and can translate into:

- Higher margins
- Pricing power
- Less exposure to economic cycle
- Structural growth
- Capital light
- Robust balance sheets
- Adequate corporate governance
- Greater buffer against cost pressures
- Can pass on higher costs
- Less risk to revenue and profits in a downturn
- Cash flows likely to grow and compound
- Less need for capital expenditure to grow
- Less sensitivity to higher borrowing costs
- Checks & balances on management

But

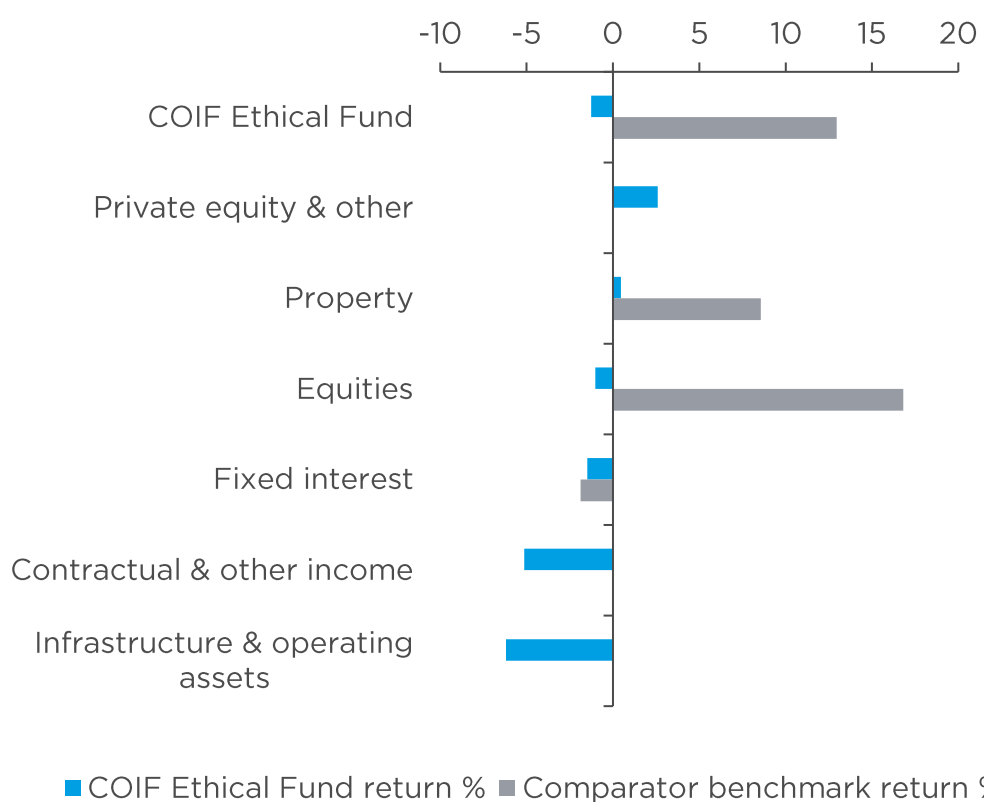
We need to be wary of threats to competitive advantage and disciplined on valuation

Discrete year performance (to 30 September) (%)



Source: CCLA, as at 30 September 2025. *Target benchmark: gross returns of CPI+5%. Note: CPI+4% has been used for the performance charts to give a comparable net figure by assuming 1% costs. Comparator benchmark: MSCI World Index (75%), Markit iBoxx £ Gilts Index (15%), MSCI UK Monthly Property Index (5%) and SONIA (5%). The comparator benchmark is subject to change. Please refer to detailed description in the appendix. Performance shown after management fees and other expenses, with the gross income reinvested. **Past performance is not a reliable indicator of future returns.**

Performance in absolute terms, by asset class

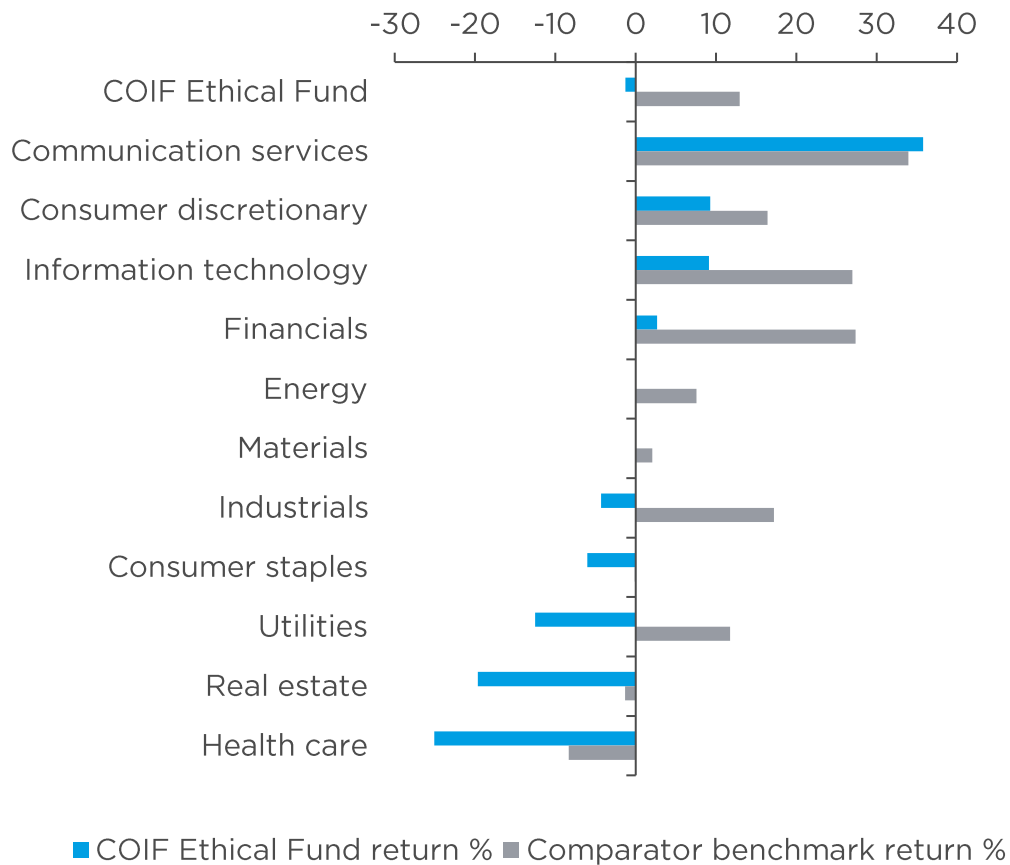


What were the key factors in the portfolio's total return performance?

- Over one year, performance across all major asset classes was mixed, with some strong performance in private equity offset by weaker returns in equity and infrastructure.
- Equities fell slightly over the period, trailing the broader market.
- In infrastructure, the higher for longer narrative in the UK weighed on the infrastructure and renewables names that derived the majority of their returns from a fixed stream of cash flows.
- Listed private equity returns were particularly strong as sentiment towards the sector improved.
- Property performance has been modest over the 12-month period.
- Fixed income fell slightly, with strength from investment-grade credit offset by weaker returns from UK gilts.

Source: CCLA showing total return performance for the COIF Ethical Fund, one year to 30 September 2025. Comparator benchmark: 75% MSCI World Index, 15% Markit iBoxx Gilts £, 5% MSCI UK Monthly Property Index and 5% SONIA. Infrastructure and operating assets refers to investments that facilitate the functioning of society with the potential for steady cash flows. Contractual assets refers to investments that generate contracted cash flows over a specific period and are typically secured against assets. Please note the cash return has been excluded; this is because the zero start balances of these balances created distorted returns. **Past performance is not a reliable indicator of future results.** Performance is shown gross of management fees and expenses. Net returns will be lower after the deduction of fees and charges. This information does not constitute the provision of financial, investment or other professional advice.

Performance in absolute terms, by equity sector

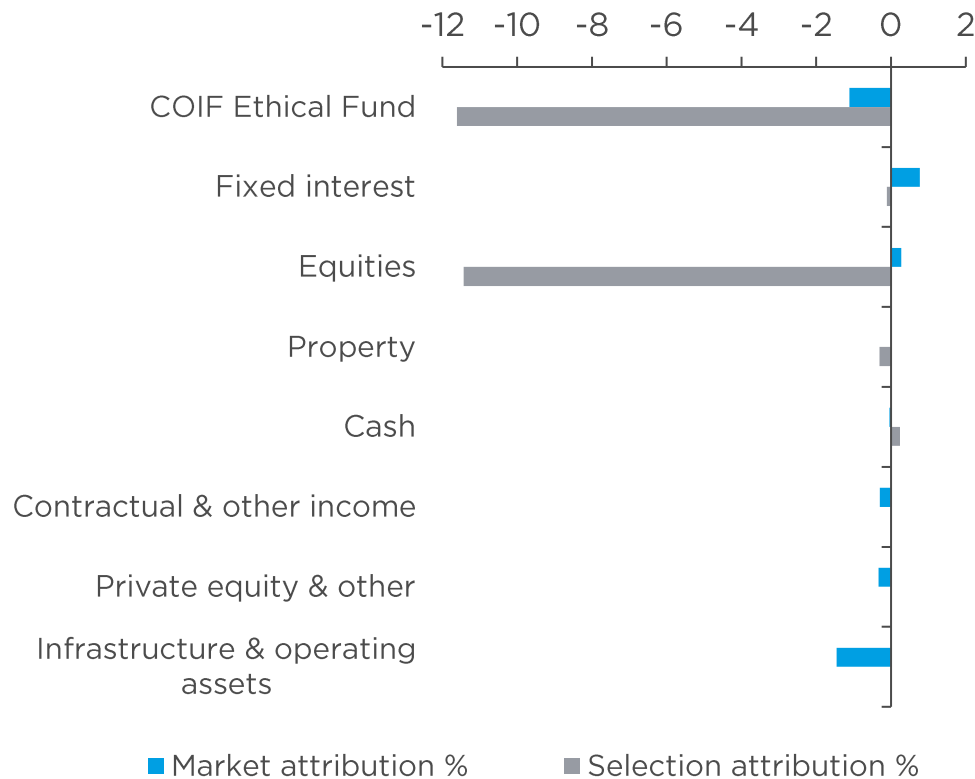


What were the key factors in the absolute performance of different equity sectors?

- In communication services we saw strong absolute performance from the sector, driven by the returns from Alphabet.
- In information technology, good performance from some of the semiconductor businesses such as ASML, TSMC and Broadcom was offset by softer return within some of the software and technology hardware names.
- Health care performance was weak at the sector level, however, we saw good returns from some health care equipment and services companies such as EssilorLuxottica and Abbott Laboratories.
- Within industrials, performance in some US focused capital goods businesses was weak due to tariff uncertainty, while the sector was largely driven by returns within aerospace and defence.
- Consumer staples have struggled in the risk on market environment.

Source: CCLA showing total return performance for the COIF Ethical Fund, one year to 30 September 2025. Comparator benchmark: 75% MSCI World Index, 15% Markit iBoxx Gilts £, 5% MSCI UK Monthly Property Index and 5% SONA. **Past performance is not a reliable indicator of future results.** Performance is shown gross of management fees and expenses. Net returns will be lower after the deduction of fees and charges. This information does not constitute the provision of financial, investment or other professional advice.

Performance relative to the benchmark, by asset class

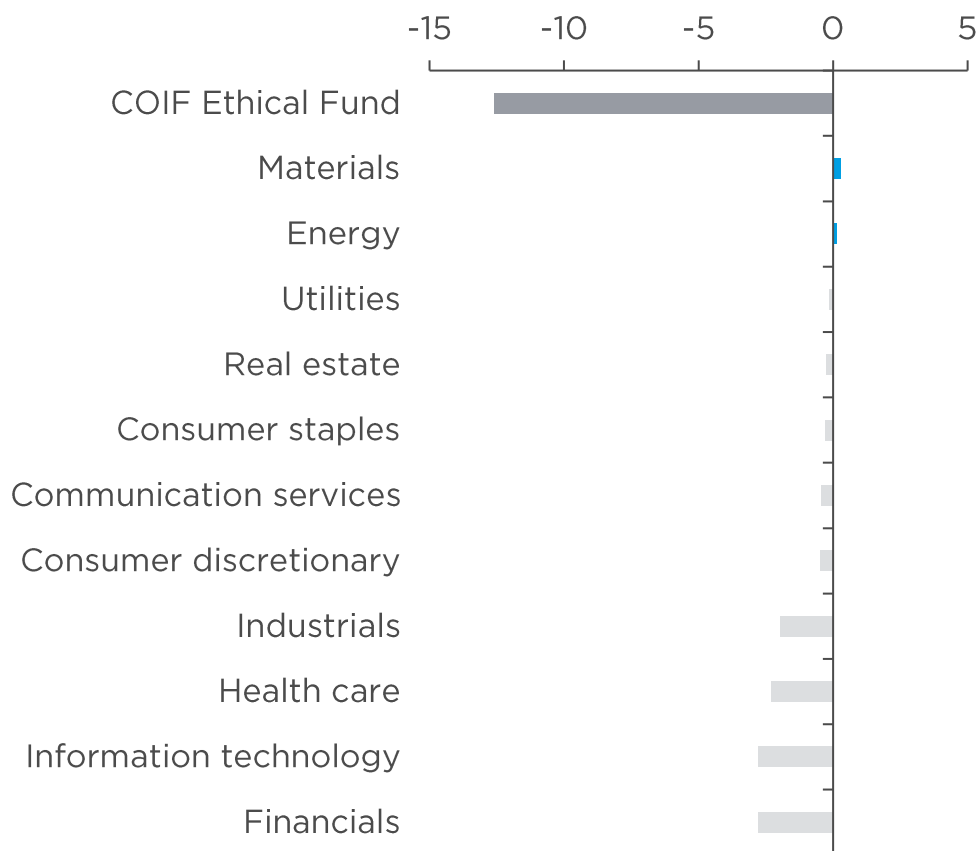


What were the key factors in the portfolio's performance relative to the comparator benchmark?

- Asset allocation effect was minimal, while security selection was a negative over the period.
- The underweight to fixed income was a positive, however this was partially offset by the allocation to infrastructure which delivered negative returns over the year.
- Stock selection in equities was the largest detractor to relative performance over the period, with benchmark returns concentrated in a small number of stocks.

Source: CCLA showing COIF Ethical Fund, one year to 30 September 2025. Allocation effect = (portfolio weighting - benchmark weighting) x benchmark return. Selection effect = (portfolio return - benchmark return) x benchmark weight. Comparator benchmark: 75% MSCI World Index, 15% Markit iBoxx Gilts £, 5% MSCI UK Monthly Property Index and 5% SONIA. Cash is made up of forward contracts, money market instruments and cash. Infrastructure and operating assets refers to investments that facilitate the functioning of society with the potential for steady cash flows. Contractual assets refers to investments that generate contracted cash flows over a specific period and are typically secured against assets. **Past performance contribution and attribution is not a reliable indicator of future results.** Performance is shown gross of management fees and expenses. Net returns will be lower after the deduction of fees and charges. This information does not constitute the provision of financial, investment or other professional advice.

Performance relative to the benchmark, by equity sector



Examples of contributors to and detractors from the performance of the fund's equity holdings, relative to the equity benchmark

- Within financials, our underweight position to the banking sector was a relative headwind, however we saw strength in financial services businesses such as Visa, Mastercard and CME Group. Weakness in other stocks such as LSEG held back returns.
- In information technology, we saw very strong absolute returns across the semiconductor businesses such as Broadcom, TSMC and ASML. However, our holdings in software lagged the strong performance of the sector.
- Returns in health care were weak across pharmaceuticals, biotechnology and life sciences names due to significant US policy uncertainty.
- US driven industrials were weak due to tariff uncertainty, whilst index returns were driven by European aerospace and defence companies.

Source: CCLA showing COIF Ethical Fund, one year to 30 September 2025. Attribution = (asset weight - benchmark asset weight) x (asset performance - benchmark asset performance). Comparator benchmark: 75% MSCI World Index, 15% Markit iBoxx Gilts £, 5% MSCI UK Monthly Property Index and 5% SONIA. Please note fund fair value pricing adjustments have been excluded from the chart. **Past performance and attribution is not a reliable indicator of future results.** Performance is shown gross of management fees and expenses. Net returns will be lower after the deduction of fees and charges. This information does not constitute the provision of financial, investment or other professional advice.

Equity investment philosophy and approach

Enduring competitive advantage



- Network effects
- High switching costs
- Intangible assets such as brands, patents, and trade secrets
- Cost advantages
- Efficient scale

Multiple sources of growth



- Preference for long-term structural growth trends
- Persistent compounding of growth
- Market share gainers
- Growth optionality
- Resilience through the economic cycle

Efficient use of capital



- Track record of successful capital allocation
- Robust returns on investment
- High cash conversion
- Strong balance sheets with conservative financial gearing
- Focus on shareholder returns

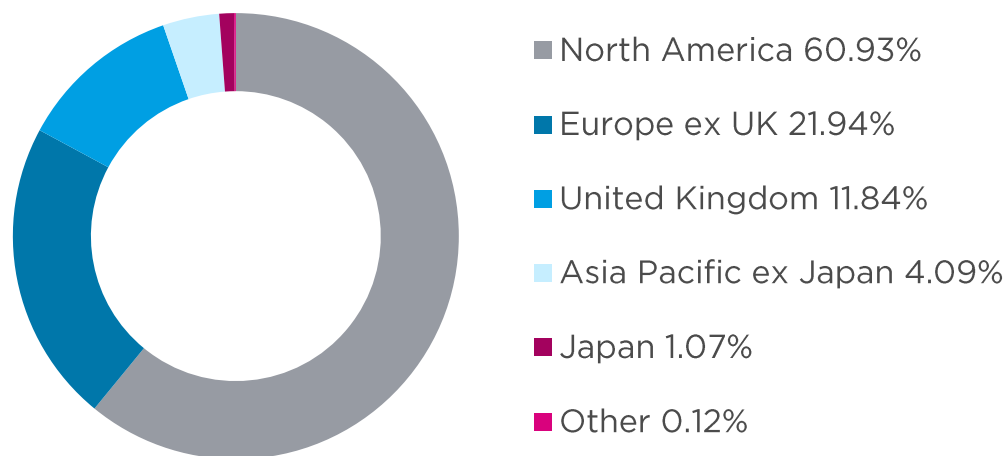
ESG standards



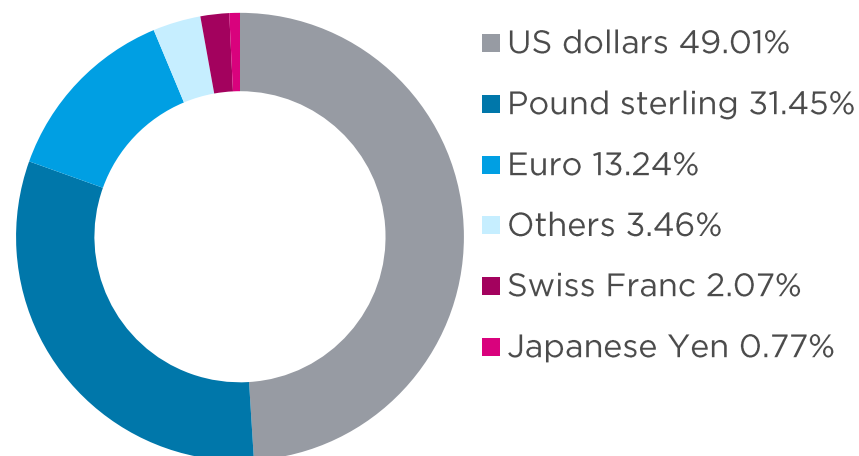
- CCLA Corporate Governance Rating, covering 8,000+ stocks
- Analysis of each holding against sector relevant non-financial sustainability risks
- A formalised approach to considering the impact of ESG controversies

Statement of positioning

Equity region weighting (equities only)



Currency exposure (total fund)



Source CCLA, as at 30 September 2025. Data showing COIF Ethical Fund. Regional weights shown are the percentage of total equity of the portfolio. Asset allocation is subject to change.

Top 20 holdings

COIF Charities Ethical Investment Fund

Security name	Portfolio weight %
Federated Hermes Sustainable Global IG Credit Fund	3.01
Microsoft	2.97
Alphabet	2.73
COIF Charities Property Fund	2.50
UK ILG 0.125% 10/08/2028	2.50
Amazon	2.11
COIF Charities Short Duration Bond Fund	1.97
TSMC	1.71
Broadcom	1.65
Brookfield Infrastructure	1.43
Visa	1.42
Essilor International	1.36
Experian	1.35
ASML	1.33
RELX	1.32
Danaher	1.27
S&P Global	1.27
Intercontinental Exchange	1.26
Coca-Cola	1.24
HG Capital Trust	1.24

Source: CCLA, as at 30 September 2025. Holdings are subject to change.



■ Top 20 holdings 35.64%
 ■ Rest of the portfolio 64.36%

Fixed income

Allocation in the COIF Charities Ethical Investment Fund

Fund/security	Portfolio weight (%)	Modified duration (yrs)	Spread duration (%)	Yield to worst (%)
COIF Charities Short Duration Bond Fund*	1.97	1.87	3.14	4.71
Federated Hermes Sustainable Global Investment Grade Credit Fund	3.01	5.86	5.16	4.28
UKT 4.50% 12/42	1.02	11.73	--	5.27
UKT 3.25% 01/44	1.00	13.17	--	5.37
UKT IL 0.125% 8/28	2.50	2.75	--	0.54
UKT IL 1.25% 11/27	1.14	2.04	--	0.48
Weighted average	100.00	5.29	2.11	3.35
Fund level	10.64	0.55	0.22	3.35

Source: CCLA and Federated Hermes, as at 30 September 2025. Allocation is subject to change. *Portfolio management of the fund has been delegated to Federated Hermes under the oversight of CCLA and fund management remains the responsibility of CCLA as of 27 July 2022.

Alternatives positioning

Source: CCLA, as at 30 September 2025. Asset allocation is subject to change. Infrastructure and operating assets refers to investments that facilitate the functioning of society with the potential for steady cash flows. Contractual assets refers to investments that generate contracted cash flows over a specific period and are typically secured against assets.

Asset class	Sub-asset class	COIF Ethical Fund %
Contractual and other income	Alternative Credit	1.39
Infrastructure and operating assets	General Infrastructure	2.97
	Renewable Infrastructure	1.88
	Student Accommodation	0.78
	Care Home Property	0.03
Private equity and other	Private Equity	3.95
Property	Generalist Commercial	2.50
	Logistics Warehouses	2.18
	Residential Property	0.23
Total		15.91

Costs and charges

COIF Charities Ethical Investment Fund	Cost % p.a.
Annual management charge (AMC)	0.60
Other expenses	0.08
Fund management fee (FMF)	0.68
Costs of underlying investments	0.17
Total ongoing charges figure (OCF)	0.85

Source: CCLA, as at October 2025. The ongoing charges figure (OCF) shows the total annual operating costs taken from the fund. The OCF is the sum of two components: these are the fund management fee (FMF) and the cost of underlying investments. The FMF includes CCLA's annual management charge (AMC), VAT payable thereon where applicable (including any VAT reclaims received during the accounting period that the FMF is based on), and other costs and expenses of operating and administering the fund such as trustee/depositary, audit, custody, legal, regulatory and professional fees, and may include other charges such as Fitch Rating fees if applicable. The underlying investments' costs are the impact to the fund of costs incurred in other funds or similar investments (e.g. investment trusts, limited liability partnerships) in which the CCLA fund invests. The OCF does not include the fund's transaction costs (i.e. the costs of buying and selling the underlying investments in a fund). For more information on costs, including transaction costs, please refer to the fund's key information document.

Definitions of equity portfolio characteristics

Metric	Definition
Price/earnings	Share price divided by earnings per share
Earnings yield	Earnings per share divided by share price
Gross margin	(Revenue – cost of goods sold)/revenue
Operating margin	Operating profit margin: operating profits/sales
Cash flow return on investment	Represents the economic rate of return a firm earns on its total capital base and takes into account both on- and off-balance sheet assets
Return on equity	Net income/shareholders' equity*
Sales growth	Market consensus annualised year-on-year sales growth over the next three years
Earnings growth	Market consensus annualised year-on-year earnings growth over the next three years
Volatility	Estimated annualised volatility calculated using UBS Quant Answers Risk Model
Net debt to shareholders' equity	Net income/shareholders' equity*
Active share	A measure of how actively managed a portfolio is. A figure above 60 for a portfolio is considered actively managed
Tracking error	Estimated tracking error is the standard deviation of the difference between the return of the portfolio and the return of the benchmark. Calculated using Bloomberg MAC2 Risk Model

Source: HOLT Credit Suisse and UBS Quant Answers. *Shareholders' equity defined as: total assets – total liabilities.

Performance comparator explained

The COIF Charities Investment Fund and the COIF Charities Ethical Investment Fund are actively managed to achieve their target benchmark. Over time, they aim to achieve an average annual total return after costs of inflation (as measured by the UK Consumer Prices Index) plus 4%. (Note: the actual target benchmark is gross returns of CPI+5%. CPI+4% has been used to give a comparable net figure by assuming 1% costs.)

To give our clients insight into the progress of their investments over shorter periods we have created a composite comparator benchmark. This is not a formal target, neither does it constrain the types of investments in which the fund may invest, but is intended as a guide. It is based on established investment market indices, weighted in proportions designed to broadly reflect the risk and return profile of the underlying assets of the fund over the long term.

To keep the information relevant the comparator benchmark may be adjusted from time to time to reflect changes in long term return expectations and any structural changes in the fund.

Comparator benchmark: MSCI World Index (75%), Markit iBoxx £ Gilts Index (15%), MSCI UK Monthly Property Index (5%) and Sterling Overnight Index Average (5%).

The comparator benchmark (blended index returns) is calculated by CCLA using end-of-day index-level values licensed from MSCI (MSCI data). For the avoidance of doubt, MSCI is not the benchmark administrator for, or a contributor, submitter or supervised contributor to, the blended index returns, and the MSCI data is not considered a contribution or submission in relation to the blended

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Comparator benchmark detail and history are as follows:

From: 1.1.2021: MSCI World Index 75%; MSCI UK Monthly Property Index, 5%; Markit iBoxx £ Gilts Index, 15% and SONIA (Sterling Overnight Index Average), 5%.

From 1.1.18 to 31.12.2020: MSCI World ex UK Index, 45%; MSCI UK Investable Market Index, 30%; MSCI UK Monthly Property Index, 5%; Markit iBoxx £ Gilts Index, 15% and 7-day LIBID, 5%.

From 1.1.16 to 31.12.17: MSCI UK Investable Market Index, 45%; MSCI Europe ex UK Index, 10%; MSCI North America Index, 10%; MSCI Pacific Index, 10%; IPD UK All Property Index, 5%; Markit iBoxx £ Gilts Index, 15% and 7-day LIBID, 5%.

From 01.01.12 to 31.12.2015 MSCI UK All Cap 45%, MSCI Europe Ex UK (50% Hedged) 10%, MSCI North America (50% Hedged) 10%, MSCI Pacific (50% Hedged) 10%, IPD All Property Index 5%, BarCap Gilt 15% & 7 Day LIBID 5%.

Important information

This document is a financial promotion and is for information only. It does not provide financial, investment or other professional advice.

To make sure you understand whether our product is suitable for you, please read the key information document and the scheme particulars and consider the risk factors identified in those documents. The sustainability approach for each of our funds is outlined in its consumer-facing disclosure document. We strongly recommend you get independent professional advice before investing.

Past performance is not a reliable indicator of future results. The value of investments and the income from them may fall as well as rise. You may not get back the amount you originally invested and may lose money.

The fund can invest in different currencies. Changes in exchange rates will therefore affect the value of your investment. Investing in emerging markets involves a greater risk of loss as such investments can be more sensitive to political and economic conditions than developed markets. The annual management charge is paid from capital (except for the Short Duration Bond Fund). Where charges are taken from capital rather than income, capital growth will be constrained and there is a risk of capital loss.

Any forward-looking statements are based on our current opinions, expectations, and projections. We do not have to update or amend these. Actual results could be significantly different than expected.

Investment in a CCLA COIF Charities fund is only available to charities within the meaning of section 1(1) of the Charities Act 2011. The CCLA COIF Charities funds are approved by the Charity Commission as Common Investment Funds under section 24 of the Charities Act 1993 (as has been

replaced by the Charities Act 2011) and are Unregulated Collective Investment Schemes and unauthorised Alternative Investment Funds.

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CCLA

BECAUSE GOOD IS BETTER

**CYFARFOD BWRDD IECHYD PRIFYSGOLN
ANEURIN BEVAN
ANEURIN BEVAN UNIVERSITY HEALTH BOARD
MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 January 2026
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Fundholder presentations of Spending Plans
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Robert Holcombe, Director of Finance, Procurement and Value Based Healthcare
SWYDDOG ADRODD: REPORTING OFFICER:	Robert Jones, Assistant Director of Finance – Systems & Services

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

Er Gwybodaeth/For Information

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The Charitable Funds Committee monitor fund balances and where large balances are identified as static or slow moving, the Committee request Fundholders attend Committee meetings to see if they require assistance in spending their funds.

This report contains some background and further information on 2 of those funds and the Charitable Fundholders invited to present their spending plans to the Committee.



Cefndir / Background

The following funds have been identified previously as having slow moving or static funds over the last 12 months.

F306 – RGH Vascular Laboratory

Fund Purpose:	To provide equipment and training for the staff within the department
Fundholder presenting:	Jane Trumper, Vascular Laboratory Manager*
Restricted/Unrestricted:	Unrestricted
Fund Balance:	£31,328
Expenditure/Movement in previous 12 Months:	£0

A report is shown in Appendix A, with greater detail on the Funds' spending plans.

F831 – Legacy Gastroenterology Fellowship

Sarah Wilson attended the previous Committee meeting in September. The Committee requested that a detailed plan, including costings, was presented to identify how the Fund would be utilised (**CFC/3009/14**).

Fund Purpose:	Left in Will specifically for the Brian Calcraft Memorial Fund which was for Endoscopy and Gastroenterology
Fundholder presenting:	Sarah Wilson, Directorate Manager, Gastroenterology
Restricted/Unrestricted:	Restricted Legacy
Balance:	£101,296
Expenditure/Movement in previous 12 Months:	£612

An updated plan is shown in Appendix B.

Asesiad / Assessment

Please see attached spending plans in Appendix A and B.



Argymhelliad / Recommendation

The Charitable Funds Committee is asked to note the presentations.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability Choose an item. Choose an item. Choose an item.
Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Choose an item.
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Finance
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Improve the Wellbeing and engagement of our staff Choose an item. Choose an item. Choose an item.

Gwybodaeth Ychwanegol:

Further Information:

Ar sail tystiolaeth: Evidence Base:	
Rhestr Termau: Glossary of Terms:	SGS – Small Grants Scheme CFC – Charitable Funds Committee
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	

Effaith: (rhaid cwblhau)



Impact: (must be completed)	
Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive Committee, including: policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
• Workforce	Not Applicable
• Service Activity & Performance	Yes, outlined within the paper
• Financial	Yes, outlined within the paper
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	No does not meet requirements An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk
Deddf Llesiant Cenedlaethau'r Dyfodol – 5 ffordd o weithio Well Being of Future Generations Act – 5 ways of working https://futuregenerations.wales/about-us/future-generations-act/	Integration - Considering how the public body's well-being objectives may impact upon each of the well-being goals, on their objectives, or on the objectives of other public bodies Choose an item.



**Charitable Fund Holder – Spending Plan 2025/2026
For the Charitable Funds Committee
For funds more than £25K**

Account No:	F306 RGH VASCULAR LABORATORY
Account Name:	
Fund Balance as at 30.11.25	£31,328
Fund Purpose	To provide equipment and training for the staff within the department

Financial Summary

Income £0
Expenditure £0

Describe your main source of income for the year: £0

The monies in the fund have built up from donations from grateful patients, > 20 years ago, with the bulk of the funds received from the sale of a scanner several years ago which was originally purchased with charitable donations.

Please describe how the fund was used in the year, including the items purchased and how they were used to improve the service providing examples of benefits to patients and staff. If appropriate, please provide photographs.

The fund has not been used recently but previously we have used it for training courses which enable staff to remain updated with the latest advances in vascular ultrasound which benefit the patients in our care, computer equipment, room reconfiguration at Nevill Hall Vascular Lab to accommodate a larger desk area for a trainee, and air conditioning units in our scanning room in Ysbyty Ystrad Fawr, due to relocation.

We have also been lucky to receive two software updates for our scanning machines, 1 for Nevill Hall and 1 for Royal Gwent which were kindly purchased by our colleagues in Rheumatology, in order to introduce a new service to diagnose Giant Cell Arteritis [GCA] in 2024.

Please describe detailed plans with estimated costs for the fund in the next twelve months and over the medium term of three years, describing the benefits these purchases will make to both staff and patients.

It has been our intention to use the charitable fund to contribute towards replacing the scanner at Nevill Hall at its "end of life" which has been extended from 5 years to 7 years, and this is due for replacement in 2026. We are making an approach to the Nevill Hall League of Friends to see if they will consider contributing to this.

We were in the process of using our funds at the end of 2024 to purchase another upgrade and transducer at the GUH site for GCA diagnosis (like the ones Rheumatology bought for us) but this was put on hold by the GM for Radiology.

This would have enabled three out of four sites offering the rapid access to GCA and offer patients care nearer home, taking into account that the scans should be performed within 72 hours of symptoms.

Charitable Funds Holder	Jane Trumper
Date:18/09/25	Vascular Laboratory Manager

**Charitable Fund Holder – Annual Report 2025/2026
For the Charitable Funds Committee
For funds more than £25K**

Account No: Account Name:	F831 LEGACY GASTROENTEROLOGY FELLOWSHIP
Fund Balance as at 30.11.25	£101,296
Fund Purpose	Left in Will specifically for the Brian Calcraft Memorial Fund

Financial Summary

Income - £0
Expenditure - £612

Describe your main source of income for the year: £0

This money was left in a Will to the Brian Calcraft Memorial Fund which at the time was an unrestricted charitable fund set up for the gastroenterology/ endoscopy service and was named after a doctor who worked at RGH and died from colorectal cancer.

As a Legacy, this money was allocated as a restricted fund, to support the gastroenterology/ endoscopy service. The Legacy fund is designated as restricted, but there are no restrictions on how it can be used it across the service.

Please describe how the fund was used in the year, including the items purchased and how they were used to improve the service providing examples of benefits to patients and staff. If appropriate, please provide photographs.

One of our doctors previously attended the Charitable Funds Committee and requested that we use the fund for training and in particular an ongoing Gastroenterology Fellowship to attract doctors to work at Aneurin Bevan UHB. The Committee agreed to this plan.

We paid for the publication of a paper in an international journal written by one of our consultants, but we have not used the fund since.

Please describe detailed plans with estimated costs for the fund in the next twelve months and over the medium term of three years, describing the benefits these purchases will make to both staff and patients.

- There is no longer a desire from the directorate to use the fund for the fellowship previously outlined and agreed by the Committee.
- The directorate have many training requests that we are struggling to fund.
- We would like to utilise this fund by sharing amongst the other funds we hold but I have been advised that I cannot do this as it is a restricted fund but we can assign portions of the fund against different groups within the directorate for them to spend.
- As the bequest was for the original Calcraft fund which was for gastroenterology/endoscopy services, there are numerous other ways we can use the fund that would be beneficial to our staff and our patients such as the following:
 - Capital projects
 - Travel and accommodation for training

Training

- In detail, courses identified include the following:
 - Counselling Course £169
 - Endoscopy Conference £612
 - Wireless capsule Reading Course £1225

Capital

- With regard to larger purchases:
 - Clicker Flicker Frequency £3,879.60 Critical Flicker(CFF) is a portable, non-invasive test used to detect minimal hepatic encephalopathy (MHE) in patients with cirrhosis by measuring their reaction to a flickering light. It provides early detection: CFF is particularly useful for identifying MHE, a form of hepatic encephalopathy (HE) that has no apparent clinical signs. A low CFF value can prompt doctors/CNS to start treatments, such as lactulose or rifaximin, to prevent overt HE this in turn can reduce hospital admissions and improve quality of life for patients with chronic liver disease. The CFF is used in outpatients and could be used within patient's homes if we have additional equipment, we have one current CFF but it is now

7 years old and if breaks down we will have to stop this vital service. Additional equipment would enable us to use in community as well as hospital settings – this will bring care closer to home. (see *additional appendix*)

- Vscan Air Kit including 3-year warranty £11,850 (see *additional appendix*)
 - Minor Works to convert room £12,429.77 (see *additional appendix*)
 - Handheld ultrasound for ascites management £5,000.
- Total ordered so far £35k.

Some items are cheaper than originally anticipated due to Procurement process and VAT exemption.

Further items will be identified at future directorate meetings.

Appendices



F831%20Clicker%20 F831%20Q-0556856 F831%20MDC%20B
Flicker%20PPD%20t 1_Aneurin%20BevanREAKDOWN%20CO\$

Charitable Funds Holder	Sarah Wilson
	Directorate Manager
Date:	

PROCEDURES

Aneurin Bevan University
Health Board
Capital Bid Proforma



PPD No: [Completed by Cap Planning]

1. Title of Proposed Capital Investment	Critical Flicker Machine	2. Division & Directorate	Gastroenterology
3. Site	RGH	4. Proposed Project Lead	

5. Reasons for Bid/Change: *Identify what the bid is for. Include a clear description what the investment will deliver.*
 Critical Flicker Frequency (CFF) is a portable, non-invasive test used to detect minimal hepatic encephalopathy (MHE) in patients with cirrhosis by measuring their reaction to a flickering light.

It provides early detection: CFF is particularly useful for identifying MHE, a form of hepatic encephalopathy (HE) that has no apparent clinical signs. A low CFF value can prompt doctors/CNS to start treatments, such as lactulose or rifaximin, to prevent overt HE this in turn can reduce hospital admissions and improve quality of life for patients with chronic liver disease.

The CFF is used in outpatients and could be used within patient’s homes if we have additional equipment, we have one current CFF but it is now 7 years old and if breaks down we will have to stop this vital service. Additional equipment would enable us to use in community as well as hospital settings – this will bring care closer to home.

Identify bid criteria: Please (X) in the relevant box below:

Equipment Replacement	Statutory Requirement	Strategic/Transitional Development	Efficiency/Perf Related	Fees	Small Scheme	Urgent Breakdown	To Sustain the Service
							X

6. Description of Options Considered and Proposed Solution

Include options that have been considered and identify preferred option:

Option 1: To purchase a new machine to ensure the ongoing service and enable home service for care closer to home – preferred option

Option 2: Carry on with one machine, if this breaks down the service will stop.

Option 3: Use paper Psychometric testing, this needs for the patient to be able to read, write and have English as their main language. This will put some patients at a disadvantage if not able to understand. This method is also time consuming and difficult to complete in an outpatient setting.

7. Equipment Replacements: *please give details below of the asset / assets being replaced.*

<i>Equipment Description:</i>		<i>Model:</i>	
<i>RFID Number:</i>		<i>Serial Number:</i>	
<i>EBME Number:</i>		<i>Site:</i>	

For replacements - what has or will happen to the original? -

8. Benefits/Impacts of Proposed Solution

Indicate the benefits and impacts of the proposed award. Emphasis should be placed on the following areas and how the benefits will be quantified and measured:

Please ('X') Below

Quality of Care	Cash Releasing	Efficiency/Performance	Replacement	Governance
x		x		

Clearly identify the 'Benefits' and 'Impacts' that will be delivered from acceptance of the capital bid:

No.	Benefit	Measurement	Baseline	Expected Impact / Outcome
1	Enabling care closer to home for those who can not attend clinics	Data is collected on all home visits and actions taken.		Early detection for those vunrable at home, reduces falls and hospital admisions.
2	Enabling of current servace to continue.	Data of CF is recorded during clinic appoitments		Ensure continuity of current servace.
3	Increased eqipment ensures more patients can assess the servace.			Early detection will reduce hospital admisions.

9. Organisational Risk Assessment

You should indicate how the proposal will help reduce strategic and operational risks identified as part of the risk assessment. The current score from the risk register should be included here. **Note: ALL risks scoring '20' and above are to be supported by a risk mitigation statement below.**

A. Current Risk Rating (0-5):

Likelihood	⊗	Consequence	=	RISK
4		4		16

- | | |
|------------------|----------------|
| 0 Impossible | 0 Negligible |
| 1 Rare | 1 Minor |
| 2 Unlikely | 2 Minor |
| 3 Possible | 3 Moderate |
| 4 Likely | 4 Major |
| 5 Almost Certain | 5 Catastrophic |

Justification of Current Risk Rating:

The likelihood of the current machine not working due to age is high, the results of not being able to complete the CF test has a major impact on not treating MHE.....

How is the risk currently being mitigated:

10. Capital Costs

Cost Category	Details	Cost (£)	VAT (£)	Total (£)
Works Related Costs	Works costs			
	Fees			
	Contingency			
	Costs of Installation / Decant			
Staff Costs	Internal fees / Salaries			
Lease Capital Cost	<i>Contact Capital Finance to calculate.</i>			
Equipment	Equipment	3,233.00	646.60	3,879.60
IT Costs	Hardware / Software / Telephony			
Other Costs	Please describe:			
TOTAL CAPITAL This is the amount, including VAT , that is being requested for this proposal				3,879.60

11. Procurement Process confirm procurement route and timescale

- All equipment details must be confirmed by **Capital Procurement** (including any proposal for single tender action - for which a separate approval is required)
- All Minor **Works/Estates related** schemes must be confirmed by the relevant Estates Officer.
- All bid submissions to be discussed **with Informatics** before submission where applicable.

I confirm that I have received advice from the above before submission of this document ('X') Yes () No ()

12. Capital Cash Flow

Following the above discussions with estates and procurement, please complete the following:

Duration of Works/Delivery (High Level):

Number of Weeks:

Equipment Lead Time:

Number of Weeks:

Expected Spend Profile	Current Year Qtr. 1 (£)	Current Year Qtr. 2 (£)	Current Year Qtr. 3 (£)	Current Year Qtr. 4 (£)	Future Financial Year (£)
Quarterly Spend					
Cumulative Total					

For larger schemes expected to cross over two financial years, a full annual spend profile will be required.

13. Recurrent Revenue Impact of Capital Investment

Cost Category	Details	Current Full Year Cost (£)	Future Full Year Cost (£)	Incremental Increase / (Decrease) (£)
Staff Costs	Please insert			

Non-Staff Costs	Premises Costs			
	Equipment Maintenance Contracts			
	Consumables			
	Other/Annual – <i>Please insert</i>			
	Other – <i>Please insert</i>			
Lease Cost	<i>Contact Capital Finance to calculate.</i>			
Income	<i>Please insert</i>			
TOTAL RECURRENT REVENUE IMPACT				

14. Provide details of any non recurrent revenue costs:

15. Proposed Revenue Funding Source (This is a mandatory requirement for approval):

16. Project Sign Off Please sign to show agreement for the proposal

Position	Name	Signature
Lead Manager	Sarah Wilson	
Divisional Director / General Manager	Tracy Morgan	
Business Partner Accountant	Karen Archer	

17. Submission Officer Details

Name	
Designation/Position	
Contact Details – Telephone & Email	
Date	



Minor Works Costing

LOCATION: Medical Day Case YYF

BUDGET HOLDER: Kelly Milford

REFERENCE: RV/383792

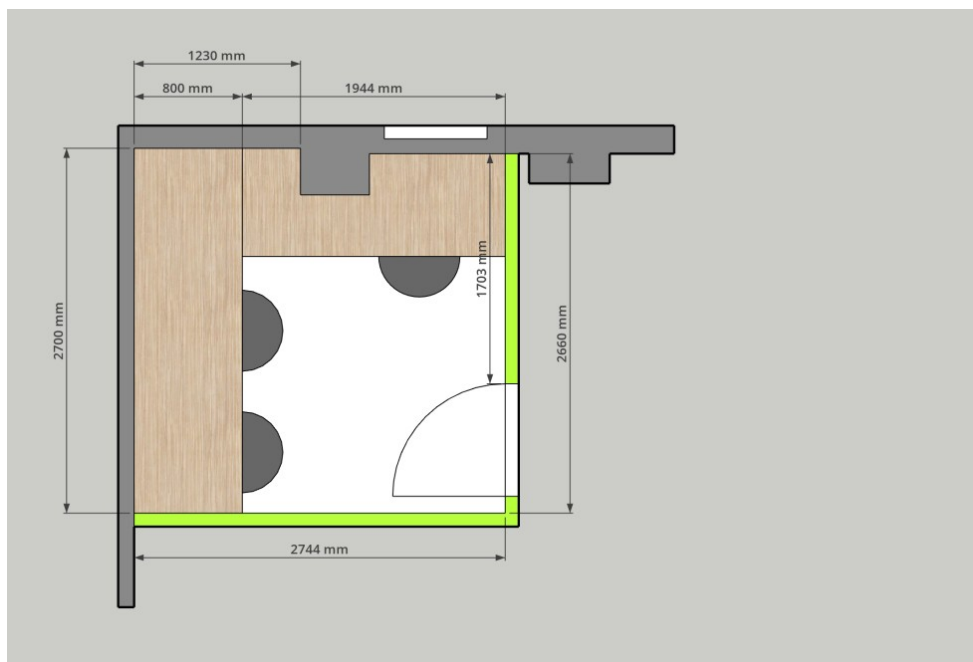
DATE: 03/11/2025

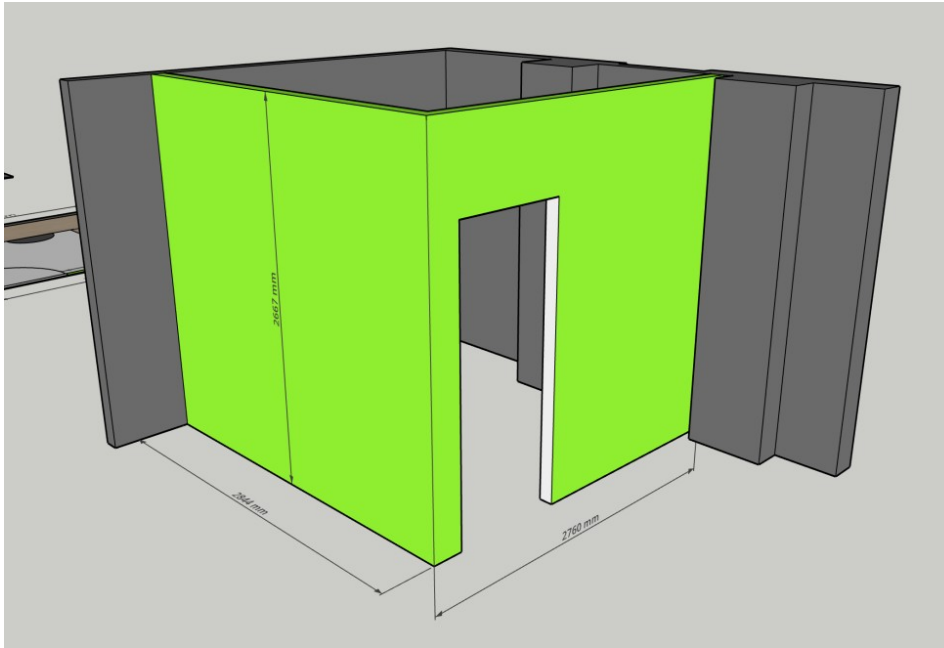
JOB DESCRIPTION: Creation of Office for MDC-02-044, Medical Day Case, YYF.

To Include: -

Building Works -

- Remove sections of suspended ceiling to allow new stud to extend passed ceiling and refit after studwork is built.
- Supply and install stud-wall. 70mm Metal C Studs and base plates. 12mm Plyboard lining. 12mm Tapered edge plasterboards. Tape and jointed ready for decoration.
- Supply and install FD30 glazed fire door and Fire lining including ironmongery and architraves.
- Decorate new stud walls and new door.
- Supply and install perimeter desk worktop 2700mm x 800mm and 2000mm x 800mm including wall battens, support legs and cable management covers.
- Supply and install 100mm x 2mm PVC skirtings. **£9,636.30**





Electrical Works –

- Install 1no length of dado trunking c/w 3no twin sockets & 1no single insert. New sockets to be fed from existing local circuit.
- Install 1no 600x600 LED Sky-tile controlled via 1no new 1 gang 2 way light switch. I have included to alter the existing lighting circuit to the light within the new office is switched separately.
- Install 1no. additional smoke detector that will be commissioned onto the existing fire alarm loop and site Winmag. **£1,922.72**

Contingency – Returnable if Unused (7.5%) **£870**

TOTAL COST FOR THIS JOB REQUEST: £12,429.77 INC VAT

PRICED FOR NORMAL WORKING HOURS

THIS COSTING HAS BEEN PROVIDED BY: - LEE GIBBONS.



GE HealthCare

GE Healthcare

Pollards Wood
Nightingales Lane
Chalfont St Giles
Buckinghamshire
HP8 4SP

United Kingdom

T. 01494 544000

F. 01709 480300

<http://www.gehealthcare.com/uk/en/>

Vscan Air CL

Quotation

For Aneurin Bevan University Health Board

Emma Richards

Lodge Road Caerleon

Newport

NP18 3XQ

Offer No 2012152523.2

Date: 23/9/2025

Your Contact James King

Direct Phone

E-mail: james.a.king@gehealthcare.com

PRODUCT DETAILS

I. Vscan Air CL

No.	Qty	Catalog Ref	Description
1.	3	H45611ZN	Vscan Air CL G1 Kit
2.	3	H91229US	Incl. 3 years Service for Vscan Air (year 1 standard warranty, year 2 + 3 extended service coverage)

PRICE SUMMARY

Qty.	Product
3	I. Vscan Air CL

TOTAL PRICE excluding VAT	11,850.00 GBP
VAT 20.00%	2,370.00 GBP
TOTAL PRICE including VAT	14,220.00 GBP

SPECIFIC CONDITIONS:

Validity of offer	22/11/2025
Billing terms	100% billing at Delivery
Shipping terms	Carriage Paid To
Payment terms	Net Due in 30 Days
Standard Warranty	12 months Some products have an extended coverage, refer to product long description for details

Should you place an order against this quote, please send your Purchase order to:

GE Medical Systems Limited

Pollards Wood
Nightingales Lane
Chalfont St Giles
Buckinghamshire
HP8 4SP

E-Mail: sales.gehc-uk@gehealthcare.com

Fax: 01709 480300

James King
Imaging and Ultrasound Account
Manager - Wales

LONG DESCRIPTIONS

All pictures featured are for illustration purposes only, and do not necessarily relate to products or services mentioned in the text.

H45611ZN - Vscan Air CL G1 Kit

Vscan Air™ is a battery-operated general-purpose diagnostic ultrasound imaging system for use by qualified and trained healthcare professionals or practitioners. It enables ultrasound imaging guidance, visualization and measurement of anatomical structures and fluid.

Vscan Air consists of a dual-headed probe which integrates both curved and linear array transducers, and an app which can be installed on Android™ or iOS® mobile devices.

Its pocket-sized portability and simplified user interface enable integration into training sessions and examinations in professional healthcare facilities (ex. hospital, clinic, medical office), home environment, road/air ambulance and in other environments described in the product user manual. The information can be used for basic/focused assessments and adjunctively with other medical data for clinical diagnosis purposes during routine, periodic follow-up, and triage assessments for adult, pediatric and neonatal patients. Vscan Air can also be useful for interventional guidance.



Vscan Air customers have access to the Vscan™ web portal, including online access to product and product usage information for selected clinical scenarios.

This kit contains Vscan Air CL probe, a protective case, a Quick Start Guide, a wireless charging pad including micro USB cable and an AC adapter type G. The Vscan Air app is available on Google Play or Apple Store®.

This kit is coming with one year of warranty and two years of service coverage including access to remote support and unlimited probe repair and/or exchange.

Customer's use of the app is subject to the governing terms and conditions of this quotation.

GE Healthcare will provide, at no additional charge, updates and/or upgrades to the Vscan Air software when and if made available by GE Healthcare for download by customers, and only if they are provided at no additional charge to all GE Healthcare customers purchasing Vscan Air system. This excludes, for example (and without limitation), any enabling hardware and separately licensable features or option codes. If customer requires GE Healthcare personnel to install any such update and/or upgrade, standard service rates will apply.

Vscan Air and Vscan are trademarks of General Electric Company.

Android, Google Play and the Google Play logo are trademarks of Google LLC.

iOS is a trademark or registered trademark of Cisco in the U.S. and other countries and is used under license.

Apple Store is a trademark of Apple Inc., registered in the U.S. and other countries.

H91229US - UltrasoundCare Included Service Coverage for Years 2 & 3 for Vscan Air

Years 2 and 3 service coverage for the for the Vscan Air:

- Access to remote support
- Probe exchange (mix of new and refurbished) in case of failure
- Does not cover accidental damage, preventive maintenance, consumables & accessories
- Excluding battery replacement

GE Healthcare

Pollards Wood
Nightingales Lane - Chalfont St Giles
Buckinghamshire HP8 4SP



GE HealthCare

GE HealthCare/ Terms and Conditions of Sale / International

1. GENERAL

1.1 In these Terms and Conditions:

The *Buyer* or the *Customer* means the person, firm, company or other organization who or which has ordered Products and/or Services from GEHC;

GEHC means the GE HealthCare group company referred to in the final written offer, quotation or order acknowledgement or, if none, the GE HealthCare company making the supply;

The *Contract* means *these Terms and Conditions, and any further terms* specified in GEHC's final written offer, quotation or order acknowledgement;

The *Equipment* means all electronic equipment, hardware and other electronic or mechanical items agreed to be supplied by GEHC, excluding any consumables and spare parts sold separately;

The *Goods* means all items agreed to be supplied by GEHC other than the Equipment and Software;

The *Products* means any Goods, Equipment or Software agreed to be supplied by GEHC;

"SaaS" or software as a service, means an application service under which a non-exclusive and non-transferable access and use of a GEHC web or mobile-based platform and/or software application and associated support is provided. Specific provisions for SaaS are set out in Section 9. For SaaS, Section 9 shall prevail and take precedence over any conflicting provision in any other section of these Terms and Conditions;

The "SaaS Subscription" means a subscription to SaaS application service;

The *Services* means all advice given and services, including SaaS, performed by GEHC;

The *Software* means any firmware, software or data compilations (i) identified in the Contract or (ii) provided to Buyer by GEHC in connection with installation or operation of the Equipment. For the avoidance of doubt, Software shall not include any "open source" firmware, software or data compilations, as any such "open source" firmware, software or data compilations will be subject to the terms and conditions set out in the relevant "open source" license.

1.2 *These Terms and Conditions shall apply to the exclusion of any conditions of the Buyer. These Terms and Conditions may not be varied or waived except with the express written agreement of GEHC. The failure of GEHC to enforce its rights under the Contract at any time, for any period of time, shall not be construed as a waiver of any such rights.*

2. PRICES AND QUOTATIONS

The price of the Products and/or Services will be GEHC's quoted price, inclusive of any duties, but exclusive of value added or other taxes. All quotations issued by GEHC for the supply of Products and/or Services shall remain open for acceptance for the period stated in the quotation or, if none is stated, for thirty (30) days. In all other cases, prices payable are those currently in effect in GEHC's then current pricelist, which may include charges for handling, freight, packaging, insurance and minimum orders.

3. PAYMENT

3.1 Unless otherwise agreed in writing or set forth in the Contract, the Buyer shall make payment to GEHC in full, without any set-off:

- (i) no later than thirty (30) days from the date of invoice, in the currency invoiced;
- (ii) solely via electronic funds transfer originating from or cheque drawn on Buyer's account held in the country of Buyer's principal place of business.

3.2 In the event of late payment, GEHC reserves the right:

- (i) to suspend deliveries and/or cancel any of its outstanding obligations; and
- (ii) to charge interest at the lower of (a) an annual rate equal to eight (8) % and (b) any applicable maximum statutory rate on all unpaid amounts calculated on a day to day basis until the actual date of payment.

4. CHANGES AND RETURNS

4.1 GEHC reserves the right, subject to prior written notice, to make any change in the specification of the Products, which does not materially affect the installation, performance or price thereof.

4.2 Products may only be returned with prior authorization from GEHC.

5. DELIVERY/INSTALLATION/ACCEPTANCE

5.1 Any term of delivery shall be construed according to the latest edition of Incoterms. If no other term of delivery has been specified in the Contract the Products will be delivered CIP to Buyer's premises or to the agreed destination. Partial deliveries and related invoicing shall be permitted.

5.2 GEHC will use all reasonable endeavours to avoid delay in delivery on the notified delivery dates. Failure to deliver by the specified date will not be a sufficient cause for cancellation, nor will GEHC be liable for any loss or damage due to delay in delivery.

5.3 The Buyer shall notify GEHC in writing within five (5) working days of delivery of any short delivery or defects reasonably discoverable on careful examination. GEHC's sole obligation shall be, at its option, to replace or repair any defective Products or refund the purchase price of any undelivered Products.

5.4 Where delivery of any Product requires an export license or other authorization before shipment, GEHC shall not be responsible for any delay in delivery due to delay in, or refusal of, such license or authorization.

5.5 Where the Equipment requires installation, the Buyer shall, at its own cost, be responsible for preparing and maintaining the installation site in accordance with GEHC's pre-installation requirements (such as specifications for power quality/grounding, temperature and/or humidity) and other instructions provided by GEHC. Installation will not begin unless such responsibilities are completed.

5.6 If the Buyer fails to accept delivery of the Products within a reasonable period after receiving notice from GEHC that they (or any part of these) are ready for delivery, or if delivery is delayed for reasons attributable to the Buyer (e.g. due to failure by the Buyer to comply with the pre-installation requirements set out in Section 5.5), GEHC may dispose of or store the Products at the Buyer's risk and charge the Buyer for any additional expenses related to Buyer's delay, such as any additional storage, insurance or transportation costs, and as applicable, any product related specific costs (e.g. helium top ups for the magnetic resonance imaging products). If such failure by Buyer to accept delivery exceeds 90 days, GEHC also reserves the right, at its choice, to terminate the Contract and/or cancel any of its outstanding obligations without cost to GEHC, or as an alternative to termination to increase GEHC's quoted price by an amount that is reflecting the increase in the Consumer Price Index of the country where the Buyer is located, as published by the OECD (<https://data.oecd.org/price/inflation-cpi.htm>), during the period between the month of the notified delivery date and the month of the actual delivery date.

5.7 Following installation, and where applicable, GEHC will proceed with final testing using GEHC's published performance specifications and using its standard instruments and procedures. Upon the satisfactory completion of such final testing demonstrating compliance with the above specifications (with any permitted variations/tolerances) GEHC may issue a Test Certificate which shall be conclusive evidence of such compliance and thereupon installation of the Equipment shall be deemed to be complete and in compliance with GEHC's obligations under the Contract. In any event Buyer agrees that the Equipment is accepted (i) seven (7) days after the date on which GEHC notifies Buyer that final testing was successfully completed, or issues the Test Certificate or (ii) on the date Buyer first uses the Equipment for operational use, whichever is earlier. For partial deliveries this Section applies to each item of Equipment

5.8 Buyer, at its reasonable request, shall be entitled to be present at and to witness the testing and shall not be entitled to raise any objection to testing carried out, or to the results thereof, if Buyer failed to attend when advised that testing was to take place.

5.9 Where Products are supplied by GEHC in returnable containers, these must be returned at the Buyer's expense and in good condition, if requested by GEHC. Title to these containers shall remain with GEHC at all times, but they shall be held at the risk of the Buyer until returned to GEHC. Failure by the Buyer to comply with the above provision shall entitle GEHC to invoice the Buyer for the full replacement value of the containers.

5.10 Buyer shall obtain all necessary permits, licenses or approvals to receive and operate any radiation emitting equipment.

6. RISK AND TITLE

6.1 The risks of loss of and damage to the Products shall transfer to Buyer in accordance with agreed delivery term. Full title to the Goods and Equipment shall pass to the Buyer on full payment. In case of non-payment by the Buyer, GEHC, without prejudice and in addition to any rights it has under Section 3.2 or otherwise, may take back all or part of the Goods and Equipment and dispose of these in any way it seems fit with a view to mitigating the consequences of the non-payment by Buyer (to avoid doubt all depreciation, de-installation and other costs will be borne by the Buyer.)

6.2 In relation to any Equipment used for clinical or diagnostic purposes, the Buyer shall keep adequate written records of the identity of any person or entity to whom the Equipment is transferred and of the location of such Equipment and shall procure that any purchaser of such Equipment is subject to the same requirement in respect of any onward sales.

7. SERVICES

7.1 GEHC is under no obligation to provide Services unless Buyer ensures adequate and safe facilities exist at its premises and that GEHC is properly notified of any hazardous conditions, relevant regulations and safety procedures. In particular, the Buyer shall be responsible for taking all necessary actions prior to GEHC performing the installation/Services to remove and/or remediate any hazardous conditions or materials from the Equipment or service area. If any risks can result from the co-activities between GEHC, Buyer (and/or any third party) in the work area, such risks shall be addressed through a mutually agreed safety coordination plan.

7.2 If the Buyer has purchased a Product or Service including remote access support, the Buyer will permit GEHC to connect to the Products by remote access and maintain such connection as required by GEHC for the performance of maintenance or repair activities as part of GEHC's warranty obligations or otherwise. This may include automatic software downloads and proactive monitoring and access to performance data related to the products, to gather and use products and resource usage data in various ways such as product development, quality initiatives, benchmarking and reporting services. If remote access is not provided, GEHC reserves the right to charge the Buyer for onsite support at GEHC's then current pricelist.

7.3 Buyer shall be responsible for proper management, storage, and disposal of all Service and/or installation-related waste, unless otherwise agreed in writing or GEHC is legally required to take back the materials. Unless the relevant mandatory national legislation provides otherwise, or unless otherwise agreed in writing, GEHC's obligation to take back electrical and electronic equipment waste (WEEE) does not include creation of physical access to the equipment; de-installation; decoupling; disinfecting; craning/lifting; transportation to a ground level loading area or -ramp; packing; or any related similar activities; and Buyer agrees to perform such activities at its own cost as and when required.

7.4 When required by GEHC, Buyer shall make available at least one (1) suitably qualified person who can ensure the safety of GEHC personnel at all times during installation /performance of the Services. If no such person is made available, GEHC reserves the right to charge Buyer at GEHC's then current pricelist for an additional GEHC person to be present.

• **8. SOFTWARE LICENSE**

Unless a separate software license agreement has been concluded concerning the Software, the Buyer is hereby granted a non-exclusive license to use the Software solely in object code format and solely for its own internal business purposes subject to the terms contained herein. The Buyer shall not (i) use the Software for purposes other than those for which it was designed; (ii) use the Software in connection with other manufacturers' products unless such connectivity is authorized in the Product documentation; (iii) grant, assign, transfer, or otherwise make available to third parties any right whatsoever in the Software; (iv) disclose to third parties any information contained in the Software; (v) copy or reproduce the Software (except for one copy for back-up purposes or as may otherwise be permitted by applicable law); (vi) alter or modify the Software; or (vii) reverse engineer, decompile, disassemble or create any derivative works based upon the Software except as expressly permitted by mandatory law.

9. SAAS SUBSCRIPTION

9.1. Scope. GEHC will provide Customer with the SaaS Subscription in accordance with these Terms and Conditions, the Contract and the relevant accompanying documentation.

9.2. Term and Termination. The SaaS term is identified in the **Contract** and renews automatically for the same duration as the initial term unless otherwise identified in the **Contract**. Either party may opt not to renew the SAAS Subscription after the initial term or any subsequent renewal terms by providing at least 60 days' prior written notice to the other party. Unless otherwise indicated in the **Contract**, the SAAS Subscription commences on the date GEHC provides Customer access to the SaaS.

9.3. On termination or expiration of the SaaS Subscription GEHC will remove Customer's access, and Customer must immediately discontinue use of the SaaS and return any associated leased hardware to GEHC.

9.4. Access and Use. Customer must ensure: (i) use of the SaaS is consistent with these Terms and Conditions; (ii) the SaaS is used only for its internal business operations; (iii) the SaaS is not accessed by non-Customers, unless GEHC consents and then Customer must ensure that any such users comply with these Terms and Conditions and the Contract; and (iv) users maintain individually-assigned confidential user identifications and control mechanisms to access the SaaS. Customer will notify GEHC immediately of unauthorized access to or use of a user name, password or other breach of security. GEHC may disable any user name, password or other identifier if it believes Customer has breached these Terms and Conditions.

9.5. Subscription Hardware. Title to any leased hardware provided with the SaaS Subscription remains with GEHC. Risk of loss and damage to such equipment installed on Customer's site shall pass to Customer on delivery.

9.6. Prohibited Activities. Customer must not use the SaaS, and ensure the SaaS is not used, to: (i) introduce viruses, trojan horses, worms, logic bombs or other harmful material; (ii) modify, reverse engineer, copy or create derivative works of the SaaS; (iii) remove or modify labels or notices of proprietary rights of the SaaS or the accompanying documentation; (iii) use the SaaS outside of the scope and purpose defined in the Contract or accompanying documentation or (iv) use the SaaS in any way that is illegal or adversely affects another person or entity or otherwise exposes them to liability.

9.7. Disclaimer of Warranties. OTHER THAN ANY UPTIME COMMITMENT SET OUT IN THE CONTRACT, IF ANY, THE SAAS IS PROVIDED IN ACCORDANCE WITH ITS DOCUMENTATION ON AN "AS IS" AND "AS AVAILABLE" BASIS. UNLESS

OTHERWISE PROHIBITED BY APPLICABLE LAW, GEHC DISCLAIMS ALL WARRANTIES, EXPRESS OR IMPLIED, INCLUDING WARRANTIES OF MERCHANTABILITY, FITNESS FOR A PARTICULAR PURPOSE OR NON-INFRINGEMENT OR TO THE ACCURACY, RELIABILITY OR USEFULNESS OF STATEMENTS, CONTENT, OR PRODUCTS OR SERVICES MADE AVAILABLE OR OBTAINED THROUGH THE SAAS.

• **10. RESTRICTED USE**

10.1 With respect to certain Products, use restrictions are a condition of the purchase which Buyer must satisfy by strictly abiding by the restriction as set forth in GEHC's catalogue and/or on the Product and/or accompanying documentation. Buyer is solely liable to ensure compliance with any regulatory requirements related to the Buyer's use of the Products. Any warranty granted by GEHC to the Buyer shall be deemed void if any Products covered by such warranty are used for any purpose not permitted hereunder. In addition, the Buyer shall indemnify GEHC and hold GEHC harmless from and against any and all claims, damages, losses, costs, expenses and other liability of whatever nature that GEHC suffers or incurs by reason of any such unintended use.

10.2 With respect to Products regulatory approved for clinical and medical treatment and diagnostic use, any decisions relating to such treatment and use shall be at the risk of the Buyer and the respective HealthCare providers.

• **11. GENERAL WARRANTY**

11.1 Section 11.2-11.5 shall apply in the event no other specific warranty has been agreed in the Contract. As regards any Products covered by a warranty issued by a third-party manufacturer, such warranty terms shall apply to the exclusion of Section 11.2-11.5.

11.2. Goods - GEHC warrants that its Goods meet GEHC's specifications at the time of delivery. All warranty claims on Goods must be made in writing within ninety (90) days of receipt of the Goods. GEHC's sole liability and Buyer's exclusive remedy for a breach of this warranty is limited to repair, replacement or refund at the sole option of GEHC.

11.3 Equipment - GEHC's Equipment of its own manufacture is warranted from date of delivery or GEHC completing any agreed installation works, if later, to be free of defects in workmanship or materials under normal usage for a period of one (1) year and any claim shall be submitted in writing within such period. GEHC's sole liability and Buyer's exclusive remedy for a breach of this warranty is limited to repair, replacement or refund at the sole option of GEHC. Such repairs or replacement will not extend the warranty period.

11.4 Software - GEHC warrants, for a period which is the longer of:

(i) three (3) months from the date of delivery or;

(ii) in the event the Software is intended to be installed and run on GEHC's Equipment of its own manufacture, twelve (12) months from the date of delivery, that the Software substantially conforms to its published specifications and that the media on which the Software resides will be free from defects in materials and workmanship under normal use and any claim shall be submitted in writing within such period. GEHC does not warrant that the Software is error free or that Buyer will be able to operate the Software without problems or interruptions. GEHC's sole liability and Buyer's exclusive remedy in the event of breach of this warranty is limited to repair, replacement or refund, at the sole option of GEHC.

11.5 Services - GEHC warrants that all Services will be carried out with reasonable care and skill. GEHC's sole liability for breach of this warranty shall be at its option to give credit for or re-perform the Services in question. This warranty shall only extend for a period of ninety (90) days after the completion of the Services and any claim shall be submitted in writing within such period.

11.6 SaaS - the warranty set out in Section 9.7 shall apply to SaaS in the event no other specific warranty has been agreed in the Contract.

11.7 To the maximum extent permitted by applicable law GEHC hereby expressly disclaims, and Buyer hereby expressly waives, any warranty regarding results obtained through the use of the Products, including without limitation any claim of inaccurate, invalid, or incomplete results. All other warranties, representations, terms and conditions (statutory, express, implied or otherwise) as to quality, condition, description, merchantability, fitness for purpose or non-infringement (except for the implied warranty of title) are hereby expressly excluded.

11.8 Unless expressly agreed, GEHC is not obliged to carry out dismantling or re-installation of any Product in connection with any warranty claims.

• **12. LIMITATION OF LIABILITY**

12.1 GEHC shall have no liability under the warranties contained in Section 11 in respect of any defect in the Products arising from: specifications or materials supplied by the Buyer; fair wear and tear; willful damage or negligence of the Buyer or its employees or agents; abnormal working conditions at the Buyer's premises; failure to maintain the site in accordance with GEHC's pre-installation requirements; failure to **comply with user manual, or** GEHC's use restrictions or other instructions (whether oral or in writing); misuse or alteration or repair of the Products without GEHC's approval; or if the Buyer is in breach of its payment obligations under this Contract. If any of the exclusions set out in this Section

12.1 apply, GEHC reserves the right to charge the Buyer for repairing such defect at GEHC's then current pricelist.

12.2 Subject to any express obligation to indemnify, neither party shall be liable for any indirect or consequential, or punitive damages of any kind from any cause arising out of the sale, installation, use or inability to use any Product or Service, nor for, without limitation, loss of profits, goodwill or business interruption.

12.3 The total liability of GEHC arising under or in connection with the Contract, including for any breach of contractual obligations and/or any misrepresentation, misstatement or tortious act or omission (including without limitation, negligence and liability for infringement of any third party intellectual property rights) shall be limited to damages in an amount equal to the amount paid to GEHC under the Contract.

12.4 The exclusion of liability in these Terms and Conditions shall only apply to the extent allowed according to applicable law.

• **13. INTELLECTUAL PROPERTY RIGHTS**

13.1 Where the Buyer supplies designs, drawings, and specifications to GEHC to enable it to manufacture non-standard or custom made Products, the Buyer warrants that such manufacture will not infringe the intellectual property rights of any third party.

13.2 All intellectual property rights in the Products and/or Services shall at all times remain vested in GEHC or its licensors.

• **14. DATA PROTECTION**

14.1 The Buyer and GEHC shall comply with data protection laws applicable to their respective processing of personal data under the Contract.

14.2 Where GEHC, its affiliates and suppliers may process patient personal data stored in Equipment or Software when performing the Services, the following provisions shall apply:

- (i) The Buyer has the sole and exclusive authority to determine the purposes and means of the processing of patient personal data by GEHC. GEHC shall process such personal data only for the purposes of providing the Services in accordance with the Buyer's instructions.
- (ii) The Buyer shall endeavor to limit the disclosure of patient personal data to GEHC to that reasonably necessary to perform the Services.
- (iii) GEHC shall keep patient personal data confidential and shall implement technical and organizational measures to protect it against accidental unlawful or unauthorized destruction, loss, alteration, disclosure or access.
- (iv) GEHC may transfer personal data relating to patients to recipients located in countries outside of the European Economic Area in connection with provision of Services. Such transfers will be subject to the BCR for Processors <https://www.gehealthcare.com/about/privacy/privacy-policy> or other transfer mechanism approved by the European Union authorities.

14.3 Prior to returning any equipment to GEHC, the Buyer shall decontaminate it and ensure that all personal data, including but not limited to patient personal data stored in such equipment is deleted. The Buyer acknowledges that, in any case, all data and settings stored in the returned equipment may be deleted by GEHC.

14.4 Prior to and during the Contract, the Buyer may provide GEHC with personal data relating to their personnel or other individuals involved in the use of Products or Services. The Buyer consents to the processing of this personal data by GEHC, its affiliates and suppliers, and shall, to the extent legally required, provide appropriate notice to each individual or obtain requisite consent to such processing of his or her personal data for the following specific purposes: (i) performing the Contract; (ii) transferring personal data (iii) satisfying legal or regulatory requirements and (iv) other purposes described by GE HealthCare Privacy Policy available at <https://www.gehealthcare.com/about/privacy/privacy-policy>.

14.5 GEHC may transfer personal data relating to the Buyer's personnel or other individuals involved in the execution of the Contract to recipients located in countries outside of the European Economic Area. Such transfers will be subject to a transfer mechanism approved by the European Union authorities

14.6 The Buyer agrees that GEHC may process certain de-identified and/or aggregated data for the purposes described in Section 7.2.

• **15. HEALTH AND SAFETY**

The Buyer shall ensure that:

- (i) the Products (provided such Products comply with its specifications) are suitable and safe for the Buyer's intended use;
- (ii) the Products are handled in a safe manner.
- (iii) containers, packaging, labelling, equipment and vehicles, where provided by the Buyer, comply with all relevant national and international safety regulations.

• **16. INDEMNITIES**

Except where a claim arises as a direct result of the negligence or breach of contract of GEHC, the Buyer shall indemnify GEHC in respect of any claim which may be made against GEHC:

- (i) arising in connection with the Buyer's unintended or unauthorized use of the Products or Services;
- (ii) alleging that the Buyer's use of the Products or Services infringes the intellectual property rights of any third party

• **17. INSOLVENCY**

In the event that the Buyer becomes insolvent or applies for bankruptcy or, being a company, goes into liquidation (other than for the purposes of reconstruction or amalgamation), GEHC shall be entitled immediately to terminate the Contract without notice and without prejudice to any other rights of GEHC hereunder.

• **18. ASSIGNMENT - SUBCONTRACTING**

Seller may assign or novate its rights and obligations under the Contract, in whole or in part, to any of its affiliates or may assign any of its accounts receivable under this Contract to any party without Buyer's consent. Buyer agrees to execute any documents that may be necessary to complete Seller's assignment or novation. Seller may subcontract portions of the work, so long as Seller remains responsible for it. The delegation or assignment by Buyer of any or all of its rights or obligations under the Contract without Seller's prior written consent (which consent shall not be unreasonably withheld) shall be void.

• **19. FORCE MAJEURE**

19.1 A party shall not be liable in respect of the non-performance of any of its obligations to the extent such performance is prevented by any circumstances beyond its reasonable control including but not limited to, strikes, lock outs or labour disputes of any kind (whether relating to its own employees or others), fire, flood, explosion, natural catastrophe, epidemics, pandemics or any other severe causes threatening health, acts of government, military operations, blockade, sabotage, revolution, riot, civil commotion, war or civil war, acts or threats of terrorism, plant breakdown, computer or other equipment failure and inability to obtain equipment.

19.2 If an event of force majeure exceeds one (1) month a Party may cancel the Contract without liability.

• **20. EXPORT CONTROL**

The Buyer undertakes not to re-export the Products without the requisite export license from the relevant body of the United Nations or other similar international organization, the United States Government, the country of origin or the original country of export. The requirement to obtain a license may vary depending on the country of destination, the end user, the end use and other factors. Upon request from GEHC the Buyer shall furnish GEHC with copies of all documents relating to such re-export.

• **21. GOVERNING LAW**

This Contract shall be governed by and construed in accordance with the substantive laws of the country or state where the GE HealthCare group company (or relevant branch) office referred to in the Contract is situated and the parties hereby submit to the non-exclusive jurisdiction of the courts of that country or state.

• **22. PRODUCT-SPECIFIC TERMS AND CONDITIONS**

Additional terms and conditions govern the sale of certain Products and Services. These additional terms and conditions are available from the sales offices of GEHC and shall take precedence in the event of any inconsistency with these Terms and Conditions.

• **23. TRANSLATIONS AND LOCAL VARIATIONS**

Translations of these terms and conditions are available from the sales offices of GEHC. In some territories, local variations to these Terms and Conditions may apply. If so, such variations shall take precedence in the event of any inconsistency with these Terms and Conditions.

DYDDIAD Y CYFARFOD: DATE OF MEETING:	07 January 2026
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Charitable Funds Committee – Review of Committee Forward Work Plan 2025/26
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Director of Corporate Governance
SWYDDOG ADRODD: REPORTING OFFICER:	Governance Support Officer

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

Er Gwybodaeth/For Information

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

The Charitable Funds Committee is asked to review the agreed Committee Forward Work Plan appended to this report. The Forward Work Plan has been developed with due regard to recommendations from the Committee Self-Assessment 2025/26 and to enable the Committee to: -

- Fulfil its Terms of Reference;
- Seek assurance and provide scrutiny on behalf of the Board, in relation to those items identified within the Committees terms of reference, and,
- Seek assurance that governance, risk, and assurance arrangements are in place and working well.

Cefndir / Background

In line with good governance practice, the Committee has a Forward Work Plan that was developed to ensure statutory requirements for items of Committee business are scheduled in across the year. The Forward Work Plan can therefore

be utilised as a tool for informing and pre-empting Committee business and support the agenda setting process.

To aid the Committee when reviewing its programme of business, the Forward Work Programme captures the timing of when reports are to be submitted, identifies items that have been deferred and captures new requests for reports and enables the Committee to monitor and review its business at each meeting.

During the period the following requests and/or changes to the forward work plan have been included:

Items Deferred on the Forward Work Plan

- Attendance of fund holders for slow moving funds – account F306 RGH VASCULAR LABORATORY was deferred and would be reported at January 2026 meeting.

Additional items on the Forward Work Plan

- At the September meeting it was agreed to have a briefing paper on transition reported at the January 2026 meeting.
- At the September meeting it was agreed to have a review on the current practice and provide recommendations for spending plans over 25k to be reported at January 2026 meeting.
- Costing plan for Attendance of fund holders for slow moving funds – account F831 to be reported to the January 2026 meeting.
- Progress update report on monitor slow moving funds, supporting fund holders in developing spending plans to be reported at January 2026 meeting.
- Proposal for Flexible use of Charitable Funds requested at the agenda setting meeting to be reported at March 2026 meeting.

These changes have been reflected on the updated Forward Work Programme.

Argymhelliad / Recommendation

The Committee is requested to **NOTE** the updated Committee forward work plan as provided in **Appendix 1**.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	The monitoring and reporting of committee business is a key element of the Health Boards assurance framework
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability Choose an item. Choose an item. Choose an item.

Blaenoriaethau CTCI IMTP Priorities Link to IMTP	Choose an item. Choose an item. The Committee Forward Programme monitors delivery of objectives.
Galluogwyr allweddol o fewn y CTCI Key Enablers within the IMTP	Governance
Amcanion cydraddoldeb strategol Strategic Equality Objectives Strategic Equality Objectives 2020-24	Not Applicable Choose an item. Choose an item. Choose an item.

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	N/A
Rhestr Termau: Glossary of Terms:	N/A
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	N/A

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Resource Assessment:	A resource assessment is required to support decision making by the Board and/or Executive Committee, including: policy and strategy development and implementation plans; investment and/or disinvestment opportunities; and service change proposals. Please confirm you have completed the following:
• Workforce	Not Applicable
• Service Activity & Performance	Not Applicable
• Financial	Not Applicable
Asesiad Effaith Cydraddoldeb Equality Impact Assessment (EIA) completed	No does not meet requirements An EQIA is required whenever we are developing a policy, strategy, strategic implementation plan or a proposal for a new service or service change. If you require advice on whether an EQIA is required contact ABB.EDI@wales.nhs.uk

**Deddf Llesiant
Cenedlaethau'r Dyfodol – 5
ffordd o weithio
Well Being of Future
Generations Act – 5 ways
of working**

<https://futuregenerations.wales/about-us/future-generations-act/>

Not Applicable
Choose an item.

Annual Programme of Business for 2025-26

Charitable Funds Committee

This Annual Programme of Business has been developed with reference to:

- Aneurin Bevan University Health Board's Standing Orders;
- The discharge of the business needs of the individual Directorates
- The Health Board's Integrated Medium-Term Plan and related Annual Delivery Plan;
- The Board's Assurance Framework and Corporate Risk Register; and
- Key statutory, national and best practice requirements and reporting arrangements.

Area of Focus as per Standing Orders:

The purpose of the Charitable Funds Committee is to ensure the stewardship and effective management of funds which have been donated, bequeathed and given to the Aneurin Bevan Health Charity for charitable purposes by making and monitoring arrangements for the control and management of the Health Board's Charitable Funds.

MATTERS TO BE CONSIDERED (Report Title)	Lead	Frequency of Report	Dates of Meeting			
			QTR 1/2 4 th June 2025	QTR 3 30 th September 2025	QTR 4 7 th January 2026 (Accounts)	QTR 1 18 th March 2026
			Preliminary Matters			
Attendance and Apologies	Chair	SI	√	√	√	√
Declaration of Interest	All Members	SI	√	√	√	√
Minutes of the Previous Meeting	Chair	SI	√	√	√	√
Action log and Matters Arising	Chair	SI	√	√	√	√
Committee Governance						
Development of Committee Annual Programme of Business 2026/27	DoCG	AN				√
Review of Committee Programme of Business 2025/26	Chair	SI		√	√	√
Annual Review of Committee Terms of Reference 2025/26	DoCG	AN	√ 2024/25			√
Annual Review of Committee Effectiveness 2025/26	DoCG	AN	√ 2024/25			√

Committee Annual Report 2025/26	DoCG	AN	√ 2024/25			√
Committee Self-Assessment Results 2025/26	DoCG	AN	√ 2024/25			√
Committee Assurance						
Finance & Performance Report to include:- <ul style="list-style-type: none"> • Report on Significant Donations, legacies and grant income. • Update on new and closed funds • Overdrawn Accounts • KPIs Review • Benchmark data for other Health Board charity income (Action September) • Options appraisal for growing the charity and promoting the benefits (Action September) • Briefing paper on transition (Action for January) 	AHOFA	SI	√	√	√	√
Legislation Changes	HOFSA	SI	√	√	√	√
Funds available to the Committee	HOFSA	SI	√	√	√	√
Consideration of Bids/Small Grants <ul style="list-style-type: none"> • 3 year plan for Decarbonisation – (Action for June 2025 meeting) 	HOFSA	SI	√	√	√	√

<ul style="list-style-type: none"> • Staff Network grant - (Action for June 2025 meeting) • Clearer breakdown of the bid by financial year and further information on the impact and affordability of the proposal (Action for January) 						
Update on Property Matters <ul style="list-style-type: none"> • Update on Clytha Square (June 2025 meeting) 	HOFSA	SI	√	√	√	√
Spending Plans over £25K <ul style="list-style-type: none"> • Review the current practice and provide recommendations (Action for January) 	HOFSA	Bi-AN		√		√
Level of Reserves	AFD	AN	√			
Review of Investment Strategy and Performance (CCLA)	AFD	AN			√	
Review of Financial Control Procedure	AFD	AN				√
Administration Charge	HOFSA	AN			√	
Draft Accounts and Annual report	HOFSA	AN		√		
Final Accounts and Annual report for approval	HOFSA	AN			√	
Attendance of fund holders for slow moving funds	DOFP	SI	√	√	√	√

<ul style="list-style-type: none"> • Detailed plan with costings for account F831 (Action for January) • Progress update on monitor slow moving funds, supporting fund holders in developing spending plans (Action for January) • Account F306 RGH VASCULAR LABORATORY (Action for January) 						
Audit Plan Update (Verbal)	HOFSA	Action	√			
Review of the various options presented, including benchmarking with other NHS Wales charities, and bring back a prioritised plan	ADOF	Action			√	
Proposal for Flexible use of Charitable Funds	DOF	Ad Hoc				√

Lead Officer	
Key	
CEO	Chief Executive
DoCG	Director of Corporate Governance
DoF&P	Director of Finance & Procurement
DoSP&P	Director of Strategy, Planning & Partnerships
COO	Chief Operating Officer
DPH	Director of Public Health
DoT&HS	Director of Therapies & Health Science
DoW&OD	Director of Workforce & Organisational Development
DoN	Director of Nursing
MD	Medical Director
DOD	Director of Digital
Chair	Chair
AFD	Assistant Finance Director
HOFSA	Head of Finance
CFM	Charitable Funds Manager

Frequency of Inclusion	
Narrative of Reason why Included in the FWP – other reasons to be developed as part of FWP discussions	
SI	Standing Item
An	Annual
1/4ly	Quarterly
BI	!/2 yearly
Schedule of Meetings	
v	Scheduled agenda item in FWP
D	Deferred from this agenda
√D	Deferred Scheduled agenda item

W	Withdrawn from FWP
T	Transferred to another Committee
IC	Matter discussed In Committee