

Charitable Funds Committee

Mon 22 January 2024, 12:00 - 14:00

Microsoft Teams



Agenda

0 min **1. PRELIMINARY MATTERS**

1.1. Welcome and Introductions

Oral Chair

1.2. Apologies for Absence

Oral Chair

1.3. Declaration of Interest

Oral Chair

1.4. Draft Minutes of the last Meeting held on 9th November 2023

Attached Chair

1.4 Draft CFC Minutes 9th November 2023 RD PD reviewed v3.pdf (9 pages)

1.5. Committee Action Log

Attached Chair

1.5 Charitable Funds Action Log - January 2024.pdf (5 pages)

0 min **2. ITEMS FOR APPROVAL/RATIFICATION/DECISION**

2.1. Final Annual Accounts 22/23

Attached Head of Financial Services & Accounting

- 2.1 Final Annual Accounts Annual Report 2022-23 new format.pdf (5 pages)
- 2.1a App A ABUHB Final Charitable Funds Accounts 2022-23.pdf (21 pages)
- 2.1b App B Charitable Funds Final Annual Report 2022-23.pdf (41 pages)

2.2. Annual Report 22/23

Attached Head of Financial Services & Accounting

- 2.2 ABUHB Charitable Funds Audit Plan 22-23.pdf (16 pages)
- 2.2a ABUHB Charitable Funds ISA 260 Report 22-23 - Draft.pdf (14 pages)

2.3. Finance Report, Including-

Attached Assistant Head of Financial Accounting


- Financial Update and Investments Valuation
- Report on Significant Donations, Legacies, and Grant Income
- Update on New and Closed Funds
- Overdrawn Accounts
- KPIs Review

 2.3 Finance Report 22.12.23.pdf (8 pages)

2.4. Funds Available and CFC Small Grants Scheme

Attached *Head of Financial Services & Accounting*

 2.4 Available Funding Small Grants_.pdf (5 pages)

 2.4a SGS-014 Decarb Promotion.pdf (3 pages)

0 min 3. ITEMS FOR DISCUSSION

3.1. Churches Charities Local Authority (CCLA) Presentation re Investments


Presentation *CCLA*

 3.1- 24-01-22 CCLA update for Charitable Funds Committee.pdf (28 pages)

3.2. Committee Self-Assessment Results

Attached *Director of Corporate Governance*

 3.2 Final CFC Self Assessment of Committee Effectiveness Cover Report Approved by RD.pdf (6 pages)

 3.2a Appendix A CFC Self Assessment Template.pdf (5 pages)

 3.2b Appendix B Charitable Funds Committee Self-Assessment Checklist.pdf (11 pages)

0 min 4. ITEMS FOR INFORMATION


4.1. Legislation Changes

Oral *Head of Financial Service & Accounting*

4.2. Assessment and Outcomes of Previously Funded Bid:

Attached *Charitable Funds Manager*

- Incontinence

 4.2 Continence-Dementia charter V2.pdf (10 pages)

0 min 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

Thursday 7th March 2024 - 09:30-12:30

**CYFARFOD BWRDD IECHYD PRIFYSGOLN
ANEURIN BEVAN**

**MINUTES OF ANEURIN BEVAN UNIVERSITY
HEALTH BOARD CHARITABLE FUNDS COMMITTEE**

DATE OF MEETING	Thursday 9th November 2023 at 9:30-12:00
VENUE	Microsoft Teams

PRESENT	Paul Deneen - Independent Member (Chair) Louise Wright- Independent Member (Vice Chair) Iwan Jones- Independent Member Nicola Prygodzicz- Chief Executive Robert Holcombe - Director of Finance and Procurement
IN ATTENDANCE	Estelle Evans - Head of Financial Services and Accounting Alison Griffiths - Charitable Funds Manager Susan Gauntlett – Assistant Head of Financial Accounting Mark Ross - Assistant Finance Director Bryony Codd - Head of Corporate Governance Teresa Allcock – Directorate Manager ENT Rhys Knight – Directorate Manager Rheumatology Cristina Martin- Business Change & Engagement Manager Michelle Jones – Head of Board Business Fern Cook – Governance Support Officer
APOLOGIES	Rani Dash - Director of Corporate Governance

CFC/0911/01	Preliminary Matters
CFC/0911/01.1	Welcome and Introductions The Chair welcomed everyone to the meeting.
CFC/0911/01.2	Apologies for Absence Apologies for absence were noted.
CFC/0911/01.3	Declarations of Interest There were no declarations of interest to record.
CFC/0911/01.4	Draft Minutes of the meeting held on 28th June 2023 The minutes of the meeting held on 28th June 2023 were agreed subject to the following amendment:



	<p>A request of change was made to item 1.5, Iwan Jones (IJ), Independent Member, who would share the request with Michelle Jones (MJ), Head of Board Business, outside of the meeting. Action: Iwan Jones Independent Member</p>
CFC/0911/01.5	<p>Committee Action Log</p> <p>The Committee received the action log. Members were content with progress made.</p> <p><i>The Committee received the report for information.</i></p>
CFC/0911/2	Items for Approval/Ratification/Decision
CFC/0911/2.1	<p>Draft Annual Accounts & Annual Report 2022/23</p> <p>Estelle Evans (EE), Head of Financial Services and Accounting, provided an overview of the draft account and the key issues contained within the accounts.</p> <p>The following was noted by the Committee: -</p> <ul style="list-style-type: none"> • The audited accounts were scheduled to be submitted to the Charities Commission by 31st January 2024 and noted that the audit of accounts is scheduled to commence on 27th November 2023. • The outcome of the audit would be submitted to the next Charitable Funds Committee for approval. Action: Estelle Evans, Head of Financial Services and Accounting. • There was a reduction of income from donations, grants and 5 new legacies for 2023. • Loss of investments of £370k due to the decrease in the stock market values. • The following amendments were scheduled to be made to the report: <ul style="list-style-type: none"> ○ Note 12 in relation to the apportionment for the administration fee. ○ Accounting policies – removing the wording of key and leaving it as a risk. <p>Louise Wright (LW), Independent Member, expressed the view that there were two statements from the annual report where the font was difficult to read and therefore may not be as accessible to all. It was agreed for the font to be changed. Action: Estelle Evans, Head of Financial Services and Accounting.</p>



	<p>Robert Holcombe (RH), Director of Finance and Procurement, thanked the Finance Team for the work in completing the Annual Report.</p> <p><i>The Committee noted the report.</i></p>
<p>CFC/0911/2.2</p>	<p>Finance Report</p> <p>Susan Gauntlett (SG), Assistant Head of Financial Accounting, outlined the Financial Report for Period Ending 30th September 2023.</p> <p>SG provided a summary of the level of Income and Expenditure for the financial year. The Committee noted the following:</p> <ul style="list-style-type: none"> • Total income of £506K for the year, • A total spends of £600K, • A loss of £61k on investment assets that in turn resulted in an in-year deficit of £155k. <p>The Committee reviewed the balance sheet and noted:</p> <ul style="list-style-type: none"> • Property values at £355k, • Investments at £5.1M • Debtors, creditors, cash in the bank at £406K and • The document also listed all donations received via grants, donations, or legacies that the Charity had during 2023. <p>The Committee was advised that new fund requests had been received and approval was sought from the Committee to set up 2 new restricted funds, a legacy fund and a new grant fund. The Committee were also asked to approve the setup of the following 4 new funds in respect of Urology Bladder Cancer fund, Project Kickstart, Recovery through Sports, and Psychological Therapies.</p> <p>SG advised that in the first 6 months of 2023/24 the Charity have received 455 donations to the value of £125,683K and at the end of September the Health Board had 418 funds with 25 of these funds static funds.</p> <p>The Committee noted that:</p> <ul style="list-style-type: none"> • The Health Board had received a grant from NHS charities to date of £263k for person centred meaningful activities and engagement.



- Had been successful in obtaining a grant of £30k to support the funding of a Health Board Grants Officer post and,
- An expression of interest application was submitted to Greener Communities fund for £200k.

Paul Deneen (PD), Independent Member (Chair), questioned what plans were in place for the available funds. SG advised that over the next few months those in receipt of funds would be required to spend a large amount of these funds, but other options would also be explored moving forwards.

Robert Holcombe (RH), Director of Finance and Procurement. queried whether if there were any alternatives already in existence before funding Bladder Cancer, project kickstart recovery through sports and the Psychological Therapies. SG advised that a lot of work had taken place to ensure there was no alternative options for the request.

PD proposed that the Finance Team use a briefing pack approach for those Divisions who request funds to support their projects. RH advised that there are established communication channels in place for requesting funds, but agreed that a focused approach could work, and that a review would be undertaken to test the consistency of approach. **Action: Robert Holcombe, Director of Finance and Procurement and Team.**

The Committee noted the report and approved the new funds to be set up.

CFC/0911/2.3

Levels of Reserve 2023-24

Mark Ross (MR), Assistant Finance Director, informed the Committee that the paper had been updated based on comments from the Committee's June meeting. The Committee was advised that it was a requirement of the Charitable Funds Financial procedure for a reserve to be maintained which would cover any downwards movements in the stock market and administration fees.

MR outlined the report and provided an overview of the available options as to how funding may be utilised to create a reserve for 2023/24.



	<p>The Committee agreed for a reserve to be created of £396K for 2023/24 using the following: -</p> <ul style="list-style-type: none"> • Allocate current fixed assets as a reserve. • Retain the annual interest and dividends on the investments to add this to the Charity reserves. <p><i>The Committee agreed the proposal of the recommendation.</i></p>
CFC/0911/2.4	<p>Funds Available and CHC Small Grants Scheme</p> <p>Estelle Evans (EE), Head of Financial Services and Accounting, informed the Committee that the report presented provided information on the amount of funds being held that could be utilised on small grant schemes.</p>
CFC/0911/2.4.1	<p>SGS-012 Well Being Pop Up Event Across ABUHB</p> <p>A request for £5k was submitted to the Committee to continue with the development of the Well Being pop ups across the organisation for a further 6 to 8 months. It was noted that the £5k would allow the department to: -</p> <ul style="list-style-type: none"> • Create 5 Well Being zones for staff and carers and • Buy chairs, garden furniture and craft activity tables. <p>Robert Holcombe (RH), Director of Finance and Procurement, requested to have oversight of the Well Being pop ups terms of reference. Action: Estelle Evans Head of Financial Services and Accounting</p> <p><i>The Committee agreed to approve the funds request in principle subject to the information being provided.</i></p>
CFC/2806/2.4.2	<p>SGS-013 Mental Health & Learning Disabilities Well Being Space.</p> <p>A request for £3k was submitted to the Committee to enable set up of a QR code to gather feedback from having the Well Being pop up in place.</p> <p>Robert Holcombe (RH), Director of Finance and Procurement, asked if the Mental Health team had any funds available to support the £3k request. Alison Griffiths (AG), Charitable Funds Manager, advised that the Mental Health team was presently reviewing its funds.</p> <p>Nicola Prygodzicz (NP), Chief Executive, advised that herself and RH would review how funds could be utilised</p>



	<p>going forwards. Action: Robert Holcombe Director of Finance, Procurement and Nicola Prygodzicz, CEO</p> <p><i>The Committee approved the requests for funds.</i></p>
CFC/0911/2.4.3	<p>CFC 264 Televisions for Bedwas Ward, Ysbyty Ystrad Fawr</p> <p>A request for £23k was submitted to the Committee for new televisions on the Bedwas Ward at Ysbyty Ystrad Fawr Hospital.</p> <p>The Committee raised concerns on the proposed costs of this request. Nicola Prygodzicz (NP), Chief Executive advised that the request had been challenged by officers and noted that the proposed televisions did meet the standards of the other televisions across the Health Board.</p> <p>The Committee sought clarification on the difference between the basic and hotel graded televisions be investigated and was advised that the latter will enable the organisation to place organisational messages on the screen.</p> <p><i>The Committee approved the request on the basis of being able to add information onto the television screens.</i></p>
CFC/0911/2.5	<p>Administration Charge 2023/24</p> <p>Estelle Evans (EE), Head of Financial Services and Accounting, requested approval to utilise between £154k to £165k for 2023/24 in respect of the administration charge fees.</p> <p><i>The Committee considered the request and approved the amount requested.</i></p>
CFC/0911/3	Items for Discussion
CFC/0911/3.1	<p>Update on Spending Plans for Over £25K/Static Funds</p> <p>The Committee was provided with an update on spending plans of the following projects: -</p> <p>F367-RGH ENT</p> <p>Teresa Allcock (TA), Directorate Manager ENT, informed the Committee that there were funds available of £24k in the Research and Teaching account. It was proposed that the funds would be used on the following: -</p>



- Upgrade the IT systems in the ENT seminar room to link with theatres and MDT with the total costs being between £10k-£12k.
- Staff Well-being away day early in 2024.

The Committee noted the update provided.

F340-ABUHB RHEUMATOLOGY & F34- LEGACY NHH RHEUM 1 M MORRIS

Rhys Knight (RK), Directorate Manager Rheumatology, provided the Committee with an update on the plans for the use of the legacy funds of £144k. It was noted that the proposal involved: -

- Creating a bespoke giant cell arthritis pathway, which would involve buying an ultrasound machine and tailored hockey stick transducer. The Committee were advised that by purchasing this equipment it would enable the department to provide a prompt diagnose and treat giant cell arthritis within house.

Robert Holcombe (RH), Director of Finance and Procurement, asked if there were any long-term maintenance contracts involved with this purchase. Alison Griffiths (AG), Charitable Funds Manager, advised that it had been agreed the costs for the contract would be funded by charitable funds at the time the equipment is purchased when the value of the funds held are known.

The Committee requested that moving forwards it receives more regular updates on the use of the static fund.

The Committee noted the update provided.

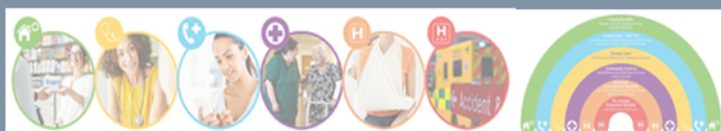
Teresa Allcock – Directorate Manager ENT and Rhys Knight – Directorate Manager Rheumatology joined the meeting to support the item.

CFC/0911/3.2

Committee Effectiveness

Michelle Jones (MJ), Head of Board Business, provided an overview of the self-assessment process.

Louise Wright (LW), Independent Member, questioned if the form would need to be completed for each Committee. MJ advised that the self-assessment is tailored to each committee and as such there would be a requirement to complete an assessment for each committee.



	<p><i>The Committee considered and approved the Assessment Form for completion</i></p>
CFC/0911/3.3	<p>Evaluation/Feedback from SGS-009 Person Centred Value Based Health Care Education Programme.</p> <p>Cristina Martin (CM), Business Change & Engagement Manager, presented to the Committee the outcomes of the evaluation from the Education Programme that took place on 17th & 18th April 2023.</p> <p>The following key points were noted: -</p> <ul style="list-style-type: none"> • Attendance for this cohort was 64 attendees. • Their approach when hosting the sessions was to put tables together of people with different work backgrounds. • Speakers presented from across the world on their experiences, lessons, successes, and failures around value. • Attendees were asked to outline what they would do with the information they had learnt from the programme. <p>CM highlighted to the Committee those projects that had come from the Education Programme and the following was noted: -</p> <ol style="list-style-type: none"> 1. MRI – swapping a GA for specialist play. 2. Increasing the uptake of breastfeeding. 3. Urgent suspected cancer referrals, patient health optimisation using digital forms. <p>Robert Holcombe (RH), Director of Finance and Procurement, advised that going forward minor changes would need to be made to ensure that the event remains affordable.</p> <p>The committee was advised that the cohorts selection process for future programmes would be based on a priority area of focus.</p> <p><i>The Committee noted the information provided.</i></p> <p><i>Cristina Martin- Business Change & Engagement Manager Joined the meeting to support the item.</i></p>
CFC/0911/4	Items for Information
CFC/0911/4.1	Legislation Changes



	<p>Estelle Evans (EE), Head of Financial Services and Accounting, informed the Committee of the new legislation for England and Wales on investing charity money (CC14) that had been released by the Charity Commission, it was noted at present there was no impact on the Charity Health Board but when reviewing the policy next year, changes would be considered.</p> <p><i>The Committee noted the update.</i></p>
CFC/0911/5.0	Other Matters
CFC/0911/5.1	<p>Items to be Brought to the Attention of the Board and Other Committees</p> <p>There was a request made by the Committee for a question to be raised around the work of the Charitable Funds Committee and how funds may be accessed by staff for the benefit of patients and staff, the chair of the committee would mention at the next board development session. Action: Paul Deneen Independent Member</p>
CFC/0911/5.2	<p>Any Other Urgent Business</p> <p>There was not any other urgent business.</p>
CFC/0911/5.2	<p>Date of Next Meeting</p> <p>Monday 22nd January 2024 at 12:00pm</p>





GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

CYFARFOD BWRDD IECHYD PRIFYSGOLN ANEURIN BEVAN

ANEURIN BEVAN UNIVERSITY HEALTH BOARD – CHARITABLE FUNDS COMMITTEE MEETING

Outstanding	In Progress	Not Due	Completed	Transferred to another Committee
-------------	-------------	---------	-----------	----------------------------------

Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
June 2022	CFC 1006/06	Revised Terms of Reference The Committee requested any future changes to the Terms of Reference presented to the Committee showed as “tracked changes” to highlight the amendments.	Director of Corporate Governance	July 2023	Noted.
Requested in June 2023- taken from March 2023 Minutes	CFC/0203/2.3	Expenditure Requests for Approval; CFC-261 Bladder Bowel Quality Improvement Project On completion of the improvement project, findings would be presented to the Committee and Board.	Head of Financial Services and Accounting	January 2024	Complete On January agenda At Agenda item 4.2
March 2023	CFC/0203/2.2	Financial Control Procedure Update: A review the policy of sponsorships received by the Health Board, to be undertaken, outside of the Charitable Funds.	Director of Finance and Procurement	End of March 2024	Review of the Health Board’s Standards of Business Conduct is being undertaken, which will include sponsorships

Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
March 2023	CFC/0203/4.5	Annual Presentation from our Investment Company (CCLA): An overview of Charitable Funds investments to take place.	Assistant Finance Director	January 2024	On january agenda at 3.1
November 2023	CFC/0911/01.4	Draft Minutes of the meeting held on 28th June 2023 A request of change was made to item 1.5, Iwan Jones (IJ), Independent Member who was going to share the request with Michelle Jones (MJ), Head of Board Business, outside of the meeting.	Iwan Jones Independent Member		Complete
November 2023	CFC/0911/2.1	Draft Annual Accounts & Annual Report 2022/23 The outcome of the audit would be submitted to the next Charitable Funds Committee for approval.	Head of Financial Services and Accounting.	January 2024	On January agenda items 2.1 & 2.2
November 2023	CFC/0911/2.1	Draft Annual Accounts & Annual Report 2022/23 two statements from the annual report where the font was difficult to	Head of Financial Services and Accounting.	November 2023	Complete - The fonts on both statements were changed to fonts suitable for dyslexic people.

Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
		read and therefore may not be as accessible to all. It was agreed for the font to be changed.			
November 2023	CFC/0911/2.2	Finance Report DP proposed that the Finance Team use a briefing pack approach for those Divisions who request funds to support their projects. RH advised that there are established communication channels in place for requesting funds, but agreed that a focused approach could work, and that a review would be undertaken to test the consistency of approach	Director of Finance, Procurement.	April 2024	In progress – information available on the intranet re available charitable funds and contact details. More focused approach will be implemented within divisions going forward
November 2023	CFC/0911/2.4.1	SGS-012 Well Being Pop Up Event Across ABUHB Director of Finance, Procurement, requested to have oversight of the Well Being pop ups terms of reference.	Evans Head of Financial Services and Accounting	April 2024	In Progress - No terms of reference currently exist for the Well Being pop up schemes. The Senior Service Improvement and Programme Manager in MH & LD

Committee Meeting	Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
					is in the process of drafting terms of reference which will be shared with the group when complete
November 2023	CFC/2806/2.4.2	SGS-013 Mental Health & Learning Disabilities Well Being Space. NP and RH would review how funds could be utilised going forwards	Director of Finance, Procurement& CEO	June 2024	Update to be provided at the June meeting.
November 2023	CFC/0911/5.1	Items to be Brought to the Attention of the Board and Other Committees Request made by the Committee for a question to be raised around the work of the Charitable Funds Committee and how funds may be accessed by staff for the benefit of patients and staff , the chair of the committee would mention at the next board development session.	Paul Deneen-Chair		The Board Development Session at which the Chair was going to raise this matter was postponed and an update will be provided in due course.

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
MEETING

DYDDIAD Y CYFARFOD: DATE OF MEETING:	22 January 2024
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Final Annual Accounts & Annual Report 2022-23
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Robert Holcombe, Director of Finance, Procurement and Value Based Healthcare
SWYDDOG ADRODD: REPORTING OFFICER:	Estelle Evans, 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 gives an overview of the Final Annual Accounts and Annual Report for the year ending 31 March 2023 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 2023 with the Charities Commission before 31 January 2024. The accounts and annual report are attached and have been 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

1. Annual Accounts

Following completion of the draft accounts, a number of minor amendments were identified which are reflected in these final accounts.

The detailed accounts are shown at Appendix 1 and the following are key points to note from the accounts for 2022/23:

Statement of Financial Activities for year ended 31 March 2023
(Page 2 of Accounts)

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

Income from Donations, legacies and grants has decreased by £54K from the previous year to £614K. There were 5 legacies received in the year.

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

Income from courses has increased by £118k from the previous year as courses resume post covid levels. Other income has increased by £86k, mainly due to monies received in respect of filming at St Cadocs Hospital.

Investment Income (Note 7, Page 10 of Accounts)

Investment income has increased by £13K from the previous year to £200K due to an increase in income on investments.

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

Expenditure has increased by £118K. The main increase in spend relates to staff education & welfare and the purchase of new equipment.

The net impact of income and expenditure is an increase in funds of £96k before investment gains, compared with an increase of £51k in the previous year. (Page 2 of Accounts)

Loss on Investment Assets (Page 2 of Accounts)

During the year there has been a net loss of £370K on investments which is mainly with CCLA reflecting stock market increases on underlying investments.

The stock market decreases since the previous year caused our CCLA investments to decrease from £5,484K on 1st April 2022 to £5,102K on 31st March 2023 (Note 16, Page 13 of Accounts).

The net movement in funds for the year is therefore a decrease of £274K. (Page 2 of Accounts)

Balance Sheet as at 31 March 2023 (Page 3 of Accounts)

Net assets / liabilities have decreased by £274K reflecting the decrease in funds during the year. The main movement in the balance sheet consists of a decrease in the value of the CCLA investments. The balances sheet movements are as follows:

	£000
Investments	-370
Increase in Cash Balances	154
Increase in Debtor Balances	-3
Increase in Creditor Balances	-55
Total	-274

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

	Balance 1 Apr 2022 £000	Disposals £000	Realised Gains / (Losses) £000	Unrealised Gains / (Losses) £000	Balance 31 Mar 2023 £000
Fixed Asset Investments					
Investments					
CCLA	5,484	-	-	- 382	5,102
	5,484	-	-	- 382	5,102
Property					
13 Clytha Square	250	-	-	-	250
TP Price - Newport / Six Bells	18	-	-	7	25
TP Price - Strip of land Oakdale	50	-	-	5	55
	318	-	-	12	330
Other					
Painting	25	-	-	-	25
Total per Note 16 of the Accounts	5,827	-	-	- 370	5,457

Cash Balances (*Note 18, Page 14 of Accounts*)

Cash at 31 March 2022 totalled £527K as follows:

	£000
Nat West Current Account	505
Santander Bonus Account	21
Petty Cash	1
Total	527

2. Annual Report

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

3. Next Steps and Actions

The audit of the Annual Accounts and Annual Report has been completed, and they will be presented to the Board for approval on 24th January 2024.

The final step will be to file the Annual Accounts and the Annual Report with the Charity Commission before the 31st January 2024 deadline, and the accounts and annual report will then be available on the Charity Commission website.

Asesiad / Assessment

This report presents the Annual Accounts and Annual Report of the charity for 2022/23.

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 2022/23.

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.

Gwybodaeth Ychwanegol:

Further Information:

Ar sail tystiolaeth: Evidence Base:	
Rhestr Termiau: Glossary of Terms:	

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.

<p>Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities</p>
--

The accounts for Funds Held on Trust.

FOREWORD

The Charity's accounts and annual report for the year ended 31st March 2023 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 2023

	Note	Unrestricted funds £000	Restricted Income funds £000	Total Funds 2022-23 £000
Incoming resources from generated funds:				
Donations, legacies and grants	4	418	196	614
Charitable activities	5	330	0	330
Investments	7	161	39	200
Total incoming resources		909	235	1,144
Expenditure on:				
Raising Funds	8	10	0	10
Charitable activities	9	811	227	1,038
Total expenditure		821	227	1,048
Net gains / (losses) on investments	16	(286)	(84)	(370)
Net income / (expenditure)		(198)	(76)	(274)
Transfers between funds	22	(73)	73	0
Net Movement in funds		(271)	(3)	(274)
Reconciliation of Funds				
Total Funds brought forward	23	4,802	1,242	6,044
Total Funds carried forward		4,531	1,239	5,770

Statement of Financial Activities for the year ended 31 March 2022

	Note	Unrestricted funds £000	Restricted Restricted Income funds £000	Total Total Funds 2021-22 £000
Incoming resources from generated funds:				
Donations, legacies and grants	4	399	269	668
Charitable activities	5	126	0	126
Investments	7	149	38	187
Total incoming resources		674	307	981
Expenditure on:				
Raising Funds	8	8	0	8
Charitable activities	9	716	206	922
Total expenditure		724	206	930
Net gains / (losses) on investments	16	539	38	577
Net income / (expenditure)		489	139	628
Transfers between funds	22	0	0	0
Net Movement in funds		489	139	628
Reconciliation of Funds				
Total Funds brought forward	23	4,313	1,103	5,416
Total Funds carried forward		4,802	1,242	6,044

Balance Sheet as at 31 March 2023

		Unrestricted	Restricted	Total	Total
	Note	funds	Income	31 March	31 March
		£000	funds	2023	2022
			£000	£000	£000
Fixed assets:					
Investments	16	4,194	1,263	5,457	5,827
Total fixed assets		4,194	1,263	5,457	5,827
Current assets:					
Debtors	17	204	24	228	231
Cash and cash equivalents	18	397	130	527	373
Total current assets		601	154	755	604
Liabilities:					
Creditors: Amounts falling due within one year	19	264	178	442	387
Net current assets / (liabilities)		337	(24)	313	217
Total net assets / (liabilities)		4,531	1,239	5,770	6,044
The funds of the charity:					
Restricted income funds	23	0	1,239	1,239	1,242
Unrestricted income funds	23	4,531	0	4,531	4,802
Total funds		4,531	1,239	5,770	6,044

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

Approved by the Trustees on 24 January 2024 and signed on its behalf by:

Signed :

Name : (Chair of Trustees)

Statement of Cash Flows for the year ending 31 March 2023

	Note	Total Funds 2022-23 £000	Total Funds 2021-22 £000
Cash flows from operating activities:			
Net cash provided by (used in) operating activities	21	(46)	(52)
Cash flows from investing activities:			
Dividend, interest and rents from investments	7	200	187
Proceeds from the sale of investments	16	0	0
Net cash provided by (used in) investing activities		200	187
Change in cash and cash equivalents in the reporting period		154	135
Cash and cash equivalents at the beginning of the reporting period	18	373	238
Cash and cash equivalents at the end of the reporting period	18	527	373

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 between restricted and unrestricted funds, which is deemed to be the most appropriate methodology to use.

There are no material assumptions judged to affect the 2022/23 accounts.

As at 31st March 2023, there is no other information to show that assets/liabilities would need to be materially adjusted during 2023/24.

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:

	2022-23		As at 31st March 2023	
	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	1,048	24	144	31

The Corporate Trustee has interests in related parties as follows:

Member	Related Organisation	Relationship with Related Party	2022-23		As at 31st March 2023	
			Expenditure to related party	Income from related party	Amounts owed to related party	Amounts due from related party
			£000	£000	£000	£000
Glyn Jones	Welsh Ambulance Trust	Sister is Project Manager	0	21	0	0
Katija Dew	Newport Live	Trustee	1	0	0	0
Richard Clark	Torfaen County Borough Council	Elected Member, Executive Portfolio holder (Education) and Deputy Leader	0	0	0	0
Iwan Jones	Swansea Bay Health Board	Sister is Assistant Finance Director	4	2	0	2

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 transactions with Torfaen County Borough Council were less than £500 and therefore round to £0 in the above table.

3. Related party transactions (continued)

In 2021-22 the charity had significant material transactions with Aneurin Bevan University Local Health Board as follows:

	2021-22		As at 31st March 2022	
	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	930	24	175	5

The Corporate Trustee had interests in related parties as follows:

Member	Related Organisation	Relationship with Related Party	2021-22		As at 31st March 2022	
			Expenditure to related party	Income from related party	Amounts owed to related party	Amounts due from related party
			£000	£000	£000	£000
Robert Holcombe	JW Bowkett (Electrical Installation) Ltd	Son is an Employee of the Company	1	0	0	0
Emrys Elias	Velindre NHS Trust	Spouse is Employee (Seconded to Health Inspectorate Wales)	0	0	0	0
Richard G Clark	Torfaen County Borough Council	County Borough Councillor, Deputy Leader and Elected Member	0	0	0	0
Prof Helen Sweetland	Cardiff University	Employed	6	1	6	1

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.

4. Income from donations, legacies and grants

	Unrestricted funds £000	Restricted Income funds £000	Total 2022-23 £000	Total 2021-22 £000
Donations	418	0	418	399
Legacies	0	146	146	170
Grants	0	50	50	99
	418	196	614	668

5. Income from charitable activities

	Unrestricted funds £000	Restricted Income funds £000	Total 2022-23 £000	Total 2021-22 £000
Course income	219	0	219	101
Other income	111	0	111	25
	330	0	330	126

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.

Due to the pandemic and in order to comply with Government guidelines and hospital infection control measures, some of these volunteer services were suspended during the year.

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 2022-23 £000	Total 2021-22 £000
Fixed asset equity and similar investments	153	37	190	187
Short term investments, deposits and cash	8	2	10	0
	161	39	200	187

8. Analysis of expenditure on raising funds

	Unrestricted funds £000	Restricted Income funds £000	Total 2022-23 £000	Total 2021-22 £000
Fundraising office	0	0	0	0
Fundraising events	0	0	0	3
Investment management	0	0	0	0
Support costs	10	0	10	5
	10	0	10	8

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

9. Analysis of charitable activity

	Grant funded activity £000	Support costs £000	Total 2022-23 £000	Total 2021-22 £000
Medical research	0	0	0	3
Purchase of new equipment	405	62	467	397
Building and refurbishment	16	2	18	36
Staff education and welfare	377	57	434	262
Patient education and welfare	103	16	119	224
	901	137	1,038	922

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 Account Managers 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 undesigned 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 2023	Total 31 March 2022
	£000	£000	£000	£000
Opening balance at 1 April	274	0	274	406
Movement in funding commitments	289	0	289	(132)
Closing balance at 31 March 2023	563	0	563	274

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 a charity.

	Raising funds	Charitable activities	Total 2022-23	Total 2021-22	Basis
	£000	£000	£000	£000	
Governance					
External audit	1	18	19	16	Average fund balance
Finance and administration	6	67	73	65	Average fund balance
Total governance	7	85	92	81	
Finance and administration	3	52	55	58	Average fund balance
Total Finance and Administration	3	52	55	58	
	10	137	147	139	

	Unrestricted funds	Restricted Income funds	Total Funds 2022-23	Total Funds 2021-22
	£000	£000	£000	£000
Raising funds	10	0	10	5
Charitable activities	105	32	137	134
	115	32	147	139

13. Trustees' remuneration, benefits and expenses

The charity does not make any payments for remuneration nor to reimburse expenses to the charity trustees for their work undertaken as 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 £167,563 (2021-22: £200,198) for these services.

15. Auditors remuneration

The auditors remuneration of £18,761 (2021-22: £16,314) 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 2022-23 £000	Total 2021-22 £000
Market value brought forward	318	5,484	0	25	5,827	5,250
Add: additions to investments at cost	0	0	0	0	0	0
Less disposals at carrying value	0	0	0	0	0	0
Add any gain / (loss) on revaluation	12	(382)	0	0	(370)	577
Movement of cash held as part of the investment portfolio	0	0	0	0	0	0
Market value as at 31st March 2023	330	5,102	0	25	5,457	5,827

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 freehold ground rent 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 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 short notice.

17. Analysis of current debtors

Debtors under 1 year	Total 31 March 2023 £000	Total 31 March 2022 £000
Accrued income	144	71
Trade Debtors	62	133
Prepayments	22	27
	228	231

18. Analysis of cash and cash equivalents

	Total 31 March 2023 £000	Total 31 March 2022 £000
Current Accounts	526	372
Petty Cash	1	1
	527	373

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 2023 £000	Total 31 March 2022 £000
Trade creditors	246	259
Deferred Income	181	125
Accruals	15	3
Total creditors	442	387

20. Analysis of Deferred Income

	Total 1 April 2022 £000	Deferred £000	Released £000	Total 31 March 2023 £000
Grant Income	84	96	(16)	164
Other Income	41	17	(41)	17
	125	113	(57)	181

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

	Total 2022-23 £000	Total 2021-22 £000
Net income / (expenditure) (per Statement of Financial Activities)	(274)	628
Adjustment for:		
(Gains) / losses on investments	370	(577)
Dividends, interest and rents from investments	(200)	(187)
(Increase) / decrease in debtors	3	(43)
Increase / (decrease) in creditors	55	127
Net cash provided by (used in) operating activities	<u>(46)</u>	<u>(52)</u>

22. Transfer between funds

Transfers have been actioned between Unrestricted funds during 2022/23 to streamline the number of funds in line with the Charitable Funds Committee plans to merge and reduce the number of Charitable Funds.

In addition, centrally held reserves were transferred across all funds to partially offset the loss on investments allocated to each fund.

23. Analysis of funds**a. Analysis of restricted fund movements**

	Balance 1 April 2022	Income	Expenditure	Transfers	Gains and losses	Balance 31 March 2023
	£000	£000	£000	£000	£000	£000
Royal Gwent Coronary Care Legacy	116	55	(29)	6	(7)	141
ABUHB Calcraft Legacy Fund	100	13	(3)	6	(6)	110
Royal Gwent Childrens Ward Legacy	150	4	(47)	8	(9)	106
Nevill Hall Rheumatology Legacy	100	3	(16)	6	(7)	86
Renal Unit Legacy	75	3	(3)	4	(5)	74
Nevill Hall Coronary Care Legacy	75	2	(6)	4	(5)	70
Royal Gwent Haematology Legacy	61	2	(2)	4	(4)	61
Royal Gwent Breast Care Legacy	61	2	(2)	4	(4)	61
Chepstow General Legacy	52	2	(1)	3	(4)	52
Other - 55 restricted designated funds	452	149	(118)	28	(33)	478
	<u>1,242</u>	<u>235</u>	<u>(227)</u>	<u>73</u>	<u>(84)</u>	<u>1,239</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 Royal Gwent Hospital Coronary Care Unit Legacy Fund was bequeathed to the charity for the provision of medical facilities, towards the cost of providing equipment for the heart unit at the hospital.

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

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 Chepstow General Legacy was bequeathed to the charity for the Chepstow Community Hospital.

The other 55 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 2022	Income	Expenditure	Transfers	Gains and losses	Balance 31 March 2023
	£000	£000	£000	£000	£000	£000
ABUHB Breast Centre	236	33	(6)	15	(17)	261
Royal Gwent Property, 13 Clytha Square	250	0	0	0	0	250
The Care Project	44	143	(67)	6	(7)	119
St Woolos Springfield Fund	111	4	(3)	7	(8)	111
ABUHB Charitable Funds Committee	399	101	(57)	(307)	(30)	106
Royal Gwent Casting Techniques Course	103	24	(22)	6	(7)	104
Nevill Hall Voluntary Body	95	42	(42)	4	(5)	94
ABUHB Covid-19	101	4	(13)	6	(6)	92
Royal Gwent Post Grad Eye	88	4	(2)	5	(6)	89
ABUHB Employee Well Being Service	86	39	(40)	5	(6)	84
Royal Gwent Property, TP Price	68	0	0	0	13	81
Nevill Hall Oncology Rehabilitation	76	3	(2)	4	(5)	76
ABUHB Volunteering (Corporate)	58	17	(3)	4	(5)	71
Royal Gwent Breast Care Unit	72	2	(3)	4	(5)	70
Monmouth Chippenham Community Nurses	72	2	(7)	4	(5)	66
ABUHB Person Centred Care Fund	83	4	5	(21)	(6)	65
Grange Critical Care Unit	83	7	(25)	4	(4)	65
ABUHB Ffrind I Mi Volunteer Service	83	2	(20)	4	(5)	64
Royal Gwent Prostate Cancer Fund	62	2	(1)	3	(3)	63
ABUHB Media Fund	0	65	(3)	0	0	62
ABUHB Post Graduate Fund	107	5	(49)	5	(6)	62
ABUHB Rheumatology	58	2	(1)	3	(4)	58
Nevill Hall Windsor Suite	52	4	(2)	3	(3)	54
Ysbyty Ystrad Fawr Adult Medicine	55	2	(4)	3	(4)	52
Other - 331 unrestricted designated funds	2,360	398	(454)	160	(152)	2,312
	4,802	909	(821)	(73)	(286)	4,531

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

Our CCLA investments have increased in value to pre-pandemic levels but growth in the year ahead is expected to be challenging as a result of the war in Ukraine and a slow down in the global economy.

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:

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 2023 under the Charities Act 2011. These comprise the Statement of Financial activities, Balance Sheet, Statement of Cash Flows and related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In my opinion the financial statements:

- give a true and fair view of the state of affairs of the charity as at 31 March 2023
- 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. I am independent of the charity in accordance with the ethical requirements that are relevant to my audit of the financial statements in the UK including the Financial Reporting Council's Ethical Standard, and I have fulfilled my other ethical responsibilities in accordance with these requirements. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Conclusions relating to going concern

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.

Report on other requirements

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:

- the information given in the financial statements is inconsistent in any material respect with the trustees' report;
- 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
- I have not received all of the information and explanations I require for my audit.

Responsibilities

Responsibilities of the trustee for the financial statements

As explained more fully in the statement of trustee's responsibilities set out on page 18, the trustee is responsible for preparing the financial statements in accordance with the Charities Act 2011, for being satisfied that they give a true and fair view, and for such internal control as the trustee determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditor's responsibilities for the audit of the financial statements

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

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

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

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;
- reading minutes of meetings of those charged with governance and the trustee; and
- 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.

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' control, 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.

Adrian Crompton
Auditor General for Wales
27 January 2023

24 Cathedral Road
Cardiff
CF11 9LJ



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

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

Trustee's Annual Report and Accounts 2022-2023

Registered Charity No: 1098728



Aneurin Bevan Health Charity

About Us

We receive 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 we provide.

Our Partner NHS Health Board

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

It delivers healthcare services to people in Blaenau Gwent, Caerphilly, Monmouthshire, Newport, Torfaen and provides some services to the people of South Powys.

Blaenau Gwent is situated in the valleys of southeast Wales and covers approximately 10,900 hectares with a population of **69,713**. The area has accessible green spaces and close community working but it is an area with high levels of unemployment and a high percentage of people who are dependent on benefits.

Caerphilly has the largest population in Gwent of **181,019**. People are widely dispersed amongst fifty small towns and villages with the main settlements largely reflecting the area's rich coal mining heritage. Caerphilly has an expanding economy and benefits through good transport links to Cardiff but there are significant levels of unemployment and poor health.

Monmouthshire is classed as a 'semi-rural accessible area'. There are four major towns, with a total population of **94,412**. Monmouthshire has the lowest level of unemployment in Gwent: however, there are pockets of deprivation as evidenced in north Abergavenny.

Newport City is the third largest urban centre in Wales with a population of **153,302**. The city has the second largest number of people from minority ethnic communities of all the Welsh counties (after Cardiff).

Torfaen is the most easterly of the south Wales urbanised valleys with a population of **93,049**. There are three urban centres: Pontypool, Blaenavon, and Cwmbran.

The Health Board employed 12,648 whole time equivalent (WTE) staff as at 31st March 2023 and has a budget of £1.6 billion. It is the largest employer in Gwent.



Introduction

On behalf of the corporate trustee, 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 ended 31st March 2023.

Message from our Chair

I am delighted to accept responsibility to Chair the Charitable Funds Committee. I take this opportunity to thank my predecessor Katija Dew for all her superb work over the years in supporting this committee.

As a charity we welcome the support from the public and others regarding donations for this important charitable work and we are most grateful for such contributions. The funds help to improve the quality of life for the patients as well as supporting staff in delivering such great care.



Huge thanks to the team of staff who do an incredible job in relation to producing this report and for their excellent work throughout the year as well.

Thank you for your support and for taking the time to read this Annual Report and Accounts 2022-23 which is greatly appreciated.

Paul Deneen, Chair of the Charitable Funds Committee

Message from our Chief Executive

Firstly, I would like to say a heartfelt thanks to everyone who made a donation, legacy or generated income for our Health Board charity. This funding made a real difference to many of our staff and services.

The year ahead for the Health Board is a financial challenge unlike anything we have ever seen before. All the additional funding we were receiving as part of the pandemic response is no longer available, yet we continue to see costs rise, resulting in a large deficit.

I want to ensure we consider all the great ideas staff have on how we can better use our resources and avoid waste no matter how big or small the opportunity.

We look to charitable funds to assist us in this, piloting projects, testing proof of concept and steering funds to where they are needed most.

Charitable funds provide opportunities to support staff wellbeing initiatives and events.

You will see from the highlights of our previous year, shown below, the types of projects we have been able to support.



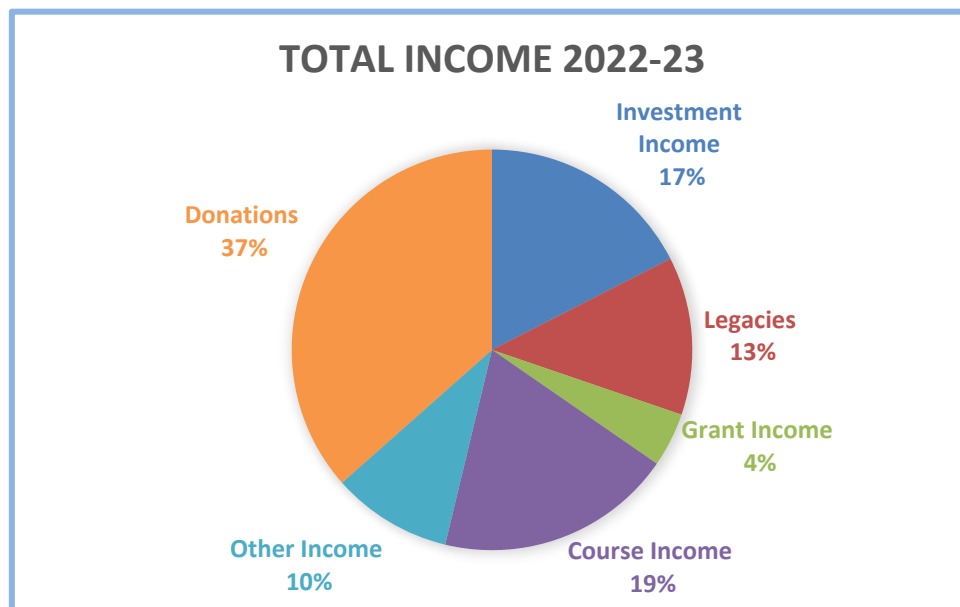
“Thanks to You “

Nicola Prygodzicz
Chief Executive

Snapshot of 2022-23

INCOME – How we received our money

This year we received £1,144,000.



Donations £418,000

The donations we received is 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.

Courses and Other Income £330,000

Fees and sponsorship for courses which are almost back to pre-pandemic levels. These are run mainly through our Postgraduate department.

Income from Investments £200,000

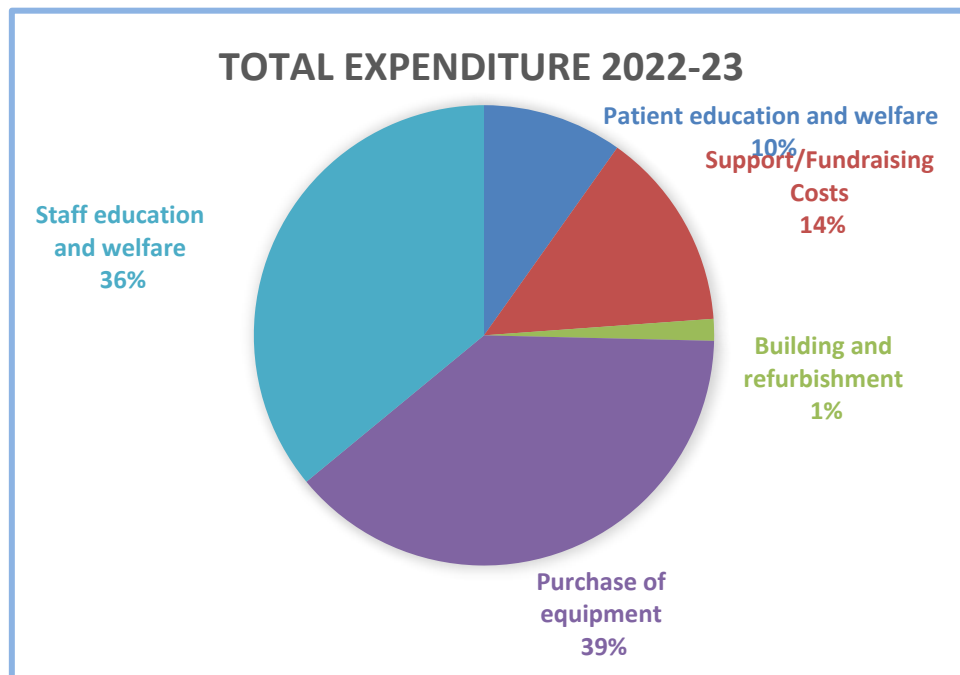
We received this from our investment portfolio. This was up £13,000 on last financial year.

Grant Income £50,000

This money is received from external organisations to fund specific schemes / projects. Some of this funding was received from NHS Charities Together – monies raised by Captain Sir Tom Moore and others.

EXPENDITURE – How we spent our money

This year we spent £1,048,000.



Patient Education and Welfare £103,000

This year we have used this money towards a project providing psychological support for patients, continued our volunteer End-of-Life Companion service which enables trained volunteers to sit with patients who may be at risk of dying alone and purchasing Christmas gifts for those patients in hospital during the festive season.

Building and Refurbishment £16,000

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

Staff Education and Welfare £377,000

This was spent on continued support for training and education to develop our staff and various services focused on staff wellbeing.

Support Costs £147,000

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

Equipment £405,000

You have made it possible for us to purchase numerous items of much needed equipment for various wards and departments across the Health Board.

This includes defibrillators and cabinets for the community, ECG machines, MacBooks for students, laptops for staff, furniture and equipment for the new Sexual Health Clinic, upgrade to the audio/visual equipment throughout our postgraduate departments.

A list of key purchases follows.

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.

Thanks to you

.... we were able to provide these key purchases

- **Intra Oral Scanner for Orthodontics, Nevill Hall Hospital**



Intra oral scanner scans, analyses and reconstructs the patient's oral cavity in 3D without the need for dated conventional impressions using moulds and impression materials. It allows for visualisation of treatment, disease and potential outcomes.

There are many benefits to the patient:

- No airway or gag risk due to eliminating the need for conventional impressions.
- Digital reconstruction of oral cavity allows the clinician to explain treatment to patients in an interactive and engaging format, therefore increasing patient understanding of their treatment.
- Quicker turnaround time for construction of appliances and therefore shorter waiting times for patients.
- Space saving as no plaster cast models need storing.

This item was purchased from a donation received from Nevill Hall League of Friends.

Bladder scanner for Ysbyty Aneurin Bevan

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 an additional bladder scanner enables the nursing staff to use them at the patient's bedside which is beneficial to both patients and staff.



- **DR.VR Virtual Reality Therapy Kit for Critical Care Unit, Grange University Hospital**



DR.VR is a virtual reality (VR) distraction therapy product that is being used successfully in a range of clinical settings. It creates a simulated world which immerses the viewer.

Within the critical care unit, this VR headset is used to give patients experience of being outside or used for the long-term patient as a distraction therapy with various programmes built into it.

- **Billicocoon Bag System for Paediatrics, Grange University Hospital**

The Billicocoon bag system is a medical device targeted at treating neonatal jaundice without compromising the relationship between mother and baby.



- **ECG Machine for Ward B2, Cardiology, Grange University 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.

Thanks to you

...our Charitable Funds Committee gave grants

The Charitable Funds Committee approved several small grants from general funds as follows:

- **In Tune with Parent and Infant Mental Health Conference**



This conference will raise the awareness and good practice focusing on Parent and infant Mental Health and its importance in promoting life-long wellbeing and good mental health, in line with current developments and emphasis on the importance of the first 1000 days and wellbeing across Wales.

Organised by Gwent Parent & Infant Mental Health Service in conjunction with Monmouthshire Early Years Service.



It will also demonstrate and recognise some excellent examples of good practice being undertaken within our teams, thus promoting a more confident, motivated, and skilled workforce. Throughout the day formal presentations and workshops will be delivered by experts in the field across the UK and locally within Wales and ABUHB. These will encompass music therapy, early developmental trauma, supporting parent infant bonding, using video to work with parents and infants, diversity in families, group work, wellbeing, and voices from families.

The conference will include current research and reflections on services offering support and examples of good evidence-based practice and incorporate the importance of Staff Wellbeing to promote staff resilience.

- **Staff Recognition Event**

On Friday 24th March 2023, the Health Board held our annual Staff Recognition Awards. It is always a pleasure to welcome everyone to this special event and this is especially true this year as it was the first in person event since before the pandemic in 2019.

Colleagues from across the Health Board gathered 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, funded by general charitable funds was hosted by Chief Executive, Nicola Prygodzicz CEO and saw performance from Coleg Gwent students and local band The Verge.

Nicola said; *"There is no doubt that 2022/23 has been an exciting and challenging year. 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 patients and the community we serve."*



Claire Jordan, Winner-Welsh Champion



The YYFM Radio Station, Winner – Partnership Working

"We see the challenges we face as opportunities for innovation, collaboration, integration and longer term thinking not as barriers to improvement, and this is evident in all those who won awards and were nominated for the awards this evening."

- **Llanfrechfa Grange Walled Garden Path**

Since the garden opened to the public in April 2022, it regularly welcomes many visitors walking over from the Grange University Hospital or the offices in Grange House. This includes staff, hospital visitors and occasionally even patients. The garden is also enjoyed by members of the local community.

A good quality top dressing of self-binding gravel has already been laid to the main paths and some of the smaller inter-connecting paths in the southern half of the garden. Extending this surface to the other paths on the west side of the garden, particularly those in the Reflective quadrant, will improve the accessibility of the garden as there will be a smoother and safer surface for wheelchair users and other visitors with impaired mobility. It will improve the aesthetic appearance and it will make paths easier to keep drained and weed free.

- **Muslim Prayer Mats**

We have two new Muslim prayer rooms at the RGH.

The Brothers (Male) prayer room is on level 4 near Anaesthetics, upstairs from the canteen.

The Sisters (Female) prayer room is now on level 5 between C & D block, behind the lifts.

Our Muslim colleagues now have their own dedicated prayer rooms in addition to the Ecumenical Chapel on D3 East.



- **Care After Death Team Provisions**

The Integrated Care After Death Team provides families with practical support including co-ordination of paperwork when a patient dies, signposting families to bereavement support and ensuring we care for patients who have passed.



As a team we would love to be able to offer to take handprints and locks of hair for all families' loved ones at their request. Currently we can only do so for children and suicide deaths with thanks to external charities that provide us with these resources. However, we would like to offer this wider, to all families and give these families treasured memories that mean so much.

84-year-old Roy sadly passed away in April 2022 at Nevill Hall Hospital. Due to the rapid and unexpected nature of Roy's decline in health, not all family members were able to say goodbye in time.

Roy's wife said "I never expected when he left the house a few days earlier that he was never coming back again. I could never express my gratitude at being able to come and say goodbye to Roy after he passed."

Granddaughters were soon in touch with the service that accommodated a viewing the next day. The family were invited to write on cards and take their time to say goodbye in their own way. The team went out of their way to make sure Roy held a red rose and lowered him to a level that wife, Marion could see him in her wheelchair.

"A lot of our Nanny's memories and comfort with Roy, was from holding his hand, always warm, keeping her safe. Handprints are such a simple thing, but it means so much to us that handprints were done without us even asking. At those times, it can be a struggle to think clearly, so to have that keep sake provided without us having to request it is extremely appreciated," said granddaughter Gemma.

Alongside the Charitable Funds grant, passionate team members also raised funds to help support the creation of memory boxes. These boxes can contain handprints or locks of hair of loved ones and purple hearts upon family requests.

"It's not a body to us, they are still a patient, even when deceased and it's the little bits that help support the families of deceased patients even more. The deceased patients and the relatives are at the centre of what we do" said the Care After Death Manager.

Thanks to you

...we can hold the hand of a stranger

'Could you hold the hand of a stranger'?

Introducing our new End of Life Companion Service in Hospitals

Some people who come into hospital may not have anyone to visit them. It may be because they have no family or may have friends or family who live many miles away from them or who can't be with them all the time. Sadly, this means that some people may die without anyone to hold their hand.

We are all acutely aware that visiting restrictions during the pandemic has significantly increased the number of people at risk of dying alone. Even though relatives are now allowed to visit loved ones at the end of life, not all patients will have visitors.

Prior to the Pandemic, the Health Board secured funding through the Community Lottery Fund to pilot an end-of-life Companion Service. This service would see trained Volunteer Companions supporting those patients who are identified as being at risk of dying alone. Where patients have families who cannot always be there, the Companions will also offer 'respite' for visitors and sit with patients whilst their families attend to other everyday matters.



We are delighted to advise that we now have 33 Companions who are fully trained and ready to offer companionship to patients identified as being at risk of dying alone. Additionally, we have another 30 who are going through training.

Holding hands is a small gesture but it holds much meaning.

When we hold hands, we are reminded that we are not alone in this world.

Thanks to you

...we can support others

Maternity services alongside our service user group BABI have been lucky enough to secure funding for a volunteer project from Safer Beginnings (incorporating the White Ribbon Alliance and Best Beginnings).



This is essentially to reach more women in our diverse community and encourage feedback and involvement from families who are currently underrepresented where English is not the first language in the household; families who are homeless, refugees etc.

We are also seeing health inequalities and disparity in care which are usually related to people who do not speak English. Not knowing where to find the information and resources available or able to access them in their first language.



- HAVE YOU HAD A BABY IN THE LAST 5 YEARS?
- DO YOU SPEAK ENGLISH AS AN ADDITIONAL LANGUAGE?
- IF SO, WOULD YOU BE INTERESTED IN VOLUNTEERING TO SUPPORT OTHER NEW PARENTS IN YOUR COMMUNITY?

If you would any further information please get in touch by contacting Emma or Kerry
Emma.Mills@wales.nhs.uk Kerry.jeffries@wales.nhs.uk

at



Emma Milne (left)
Kerry Jefferies (right)

Runners up – Partnership Working Staff Recognition Awards for this project.

Thanks to you

...our Hospital Radio Service continues



The hospital radio service launched in 2020/2021 at Ysbyty Ystrad Fawr, to help combat loneliness, boredom and the feeling of isolation that some patients face when staying in hospital, is thriving.

YYFM can be accessed by visiting [itsyyfm.com](https://www.ysbytyfm.com)

Meet The Teapots – Diana Parsons

“78 Year’s young, a Scottish lassie, shorthand writer, nurse, wife, mum, pastoral worker, actor, and devoted nanny.

Passionate about people and the God who created them, pasta, chilled wine, silver earrings, reading and tap dancing. Pursues breathing, laughing and loving as often and as much as possible. Member of ‘Tales Around the Teapots’ since September 2019. On 5th January 2022, our first story was broadcast and this has been followed on by one story each week to date.

I was originally tasked with doing the recording of the stories as I has been involved in drama projects/ I was however very keen to encourage my fellow writers to have a go at recording their stories. Different voices would be more interesting for the listeners. Joan Warburton was the first to do so and we tackled the mysteries of recording! It has been such a joy for me to see Joan embrace her storytelling and for us both to welcome Ange and Rhian to the expanding recording team of Teapots. As we call ourselves. We are all learning so much we are eager to serve the community in this way!”

The ABUHB Awards – March 2023

On 24th March 2023, members of YYFM past and present were invited to the Aneurin Bevan University health Board Awards as guests and nominees for the ‘Partnership Working Category’. Attendees were Steven Davies, Cassie Moreland, Lauren Evans, Ayisha Lippiett, Diana Parsons and Joan Warburton. This was a great honour and was an incredible evening full of celebration for staff at the health board. We were lucky enough to be considered for the award, but we were thrilled when we won! The night was then celebrated with some beverages, a lovely variety of food and deserts, brilliant entertainment from the students of Coleg Gwent and tremendous laughs and praises for staff during the ceremony. We are now an award-winning radio station and are forever grateful to have been recognised amongst others in the category. This is our greatest achievement to date, and we are all so proud of ourselves and the radios success. Celebrating and dancing were therefore the only viable options, which is exactly what we did! The best dancer awards of the night go to the dancing Teapots – Diana and Joan.

Thanks to you

...we can look after our staff's wellbeing



NEXT STOP

Chepstow Hospital

CHEPSTOW HOSPITAL CHEPSTOW, WALES

Thursday 14th December - Friday 16th December 10:00 - 16:00

Pop over for a free hot drink and a chat!

Project Wingman is a charity operating well-being lounges manned entirely by volunteer aircrew in support of you, our Health and Social Care Heroes!

Equipped with our big blue care bus *Wingbee* we will be ready to provide you a well deserved drink, snack, chat or just a different setting for you to take five. We can't wait to welcome you on board. Please bring along your staff ID with you.

www.projectwingman.co.uk

 projectwingman2020  project_wingman2020  _projectwingman



Wellbeing Pop-Up Sessions

Chaplaincy is working alongside Senior Managers in Mental Health to facilitate 'Wellbeing and Relaxation Sessions' for different staff groups. The first of these planned sessions took place at the Maindiff Court Hospital site to support our local community staff teams.

The sessions were very well received and hopefully provided a brief but well-deserved bit of support and chill out time.

The Chaplaincy service have a "Chill Out" Charitable Fund that they have used to purchase massage chairs, aromatherapy sessions and equipment and refreshments.



Alan Tyler
Senior Chaplain



Supporting our Wellbeing Service

Funds are being used to support the Employee Wellbeing Service's ambitions to improve the employee experience of work as well as reduce waste and avoid or mitigate potential harm. A short-term post to develop the existing and highly effective Avoidable Employee Harm Programme with new training that focuses on the importance of looking after both the process and the people involved.



Thanks to you

...we can help refurbish new units

The Sexual & Reproductive Health Team have made strides in the last year to future-proof sexual health services for our communities, and for young people with a recent award-winning Communications and Engagement redesign campaign.

To celebrate the next milestone, the Health Board welcomed the opening of a new Sexual Health Clinic which was officially opened by Aneurin Bevan University Health Board's Chief Executive Officer, Nicola Prygodzicz on Thursday 25th May 2023- with a very special nod to a much-loved individual.



Julia Frances Maynard, a former member of the Health Board Sexual Health Team, was an inspiration in both her professional and personal life, who sadly lost her battle with metastatic ovarian cancer. Many of her colleagues commented on how she was passionate about the Sexual & Reproductive Health Service; working as clinic lead, she always strived to offer the best care to everyone who attended the Cordell Centre. Julia led by example and was happiest when seeing patients face to face in clinic and never gave less than 100%. Her work ethic, along with the respect she showed her colleagues, was compelling and always brought out the best in all who worked with her.

Clinical Director for Sexual & Reproductive Health at Aneurin Bevan University Health Board, Dr Jane Dickson, said:

"I'm so delighted that we've been able to open our brand-new sexual health unit, which we named after Julia Frances Maynard. Julia was an

incredible lead nurse at our previous clinic, The Cordell centre, but tragically died of metastatic cancer in 2018.

"Our new clinic, which can be found on Ward B6 West of the Royal Gwent hospital, is bright, modern and designed for full accessibility and inclusivity. The clinic is the pinnacle of our new service model, offering a sexual health hub in every borough of our health board area, with B6 West being the focus for our most specialised services. We hope that everyone passing through the doors of our new centre will feel welcomed, dignified and free from stigma."



Funds to purchase various items of equipment and furniture for the new unit were purchased through charitable funds from a donation from the Royal Gwent Hospital League of Friends. The League received most of its income from the buffet bar they operated in main outpatients at the hospital before closing due to the pandemic.

Thanks to you

...we can buy Christmas gifts for our patients

Donations are used to purchase small gifts for patients who are in hospital over the festive period.



Thanks to you

.... we can continue supporting students to become doctors



In partnership with the Shaw Foundation, our Care Fund Project 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. The project looks at innovative ways to encourage and train these individuals with the necessary skills and knowledge to obtain a place in medical school and support them through the training process to hopefully lead to them becoming active doctors within the Health Board locality.

We are delighted to announce that one of these students has qualified this year and is staying in South Wales completing their foundation training.

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

Student A

I was kindly awarded a generous bursary for my final year at medical school. Following from that, I thought I would provide an update as to how this year has gone.

I travelled to The Philippines for my medical elective and had the most incredible time. I spent four weeks in the local government hospital across a range of departments including internal medicine, family medicine, emergency medicine and obstetrics and gynaecology. I have gained so much from this experience, skills and knowledge which I am excited to take further into my career; an opportunity that would not have been possible without your support.



In addition, whilst away I found out I had successfully passed all examinations and will be graduating as a doctor in July 23! I also secured my first choice of job and so will be staying in South Wales for my foundation training. My rotations will be acute internal medicine, urology,

anaesthetics with one day a week in a local GP surgery, followed by ENT, acute internal medicine and emergency medicine.

At present I am still very keen on emergency medicine and GP for my future career, however I am excited to explore all opportunities. I have also been grateful to become involved with a charity called The Care Collective which looks at supporting young unpaid carers and have been invited to attend and speak at some local events to raise awareness of young carers in higher education. As you may remember I care for both grandparents, who I am pleased to update you are doing very well!

I would just like to express once again how grateful I am. Without the support you have provided, I may not be in this position. The work you do is incredible, and I am honoured to be a part of it. If there's anything I can help with at all going further, please let me know.

Student B

I have successfully passed my final exam (ISCE) recently and finished in the top quartile of my year group. This was such a relief and means graduation from medical school is getting ever closer as I enter my 5th year. This year marks the end of everything I have been working towards and marks the integration and beginning of becoming a doctor. I will be studying at Aneurin Bevan University Health Board for my first placement and then will be going to Bangor for my second placement.



I also have some great news about my research paper from my intercalation degree I conducted last year. It has been published in a peer-reviewed journal and I am very grateful for the opportunity to share my work with others.

None of this would be possible without your continuous support throughout my journey. You have been so generous and kind to me and I cannot thank you enough. Your bursary has made a massive difference in my life and education. It has allowed me to continually focus on my studies and pursue my passions without worrying about the financial burdens which act as a barrier to many students like me. I cannot express my gratitude to you all enough, thank you.



Thanks to you

As part of the fundraising led by Captain Sir Tom Moore, NHS Charities Together (NHS CT) allocated money for supporting Covid-19 projects across the NHS in the UK to be accessed through individual bodies' charitable funds; we successfully obtained a grant of £308,000 to be used as described below:

During the pandemic, Aneurin Bevan University Health Board identified a significant unmet need for psychological support for people accessing cancer services. Limited psychological support negatively impacted on people pre-diagnosis (waiting for results), when navigating the system and post treatment. We have also identified that people who are Deaf/hard of hearing are unable to access supportive counselling and people from the LGBTQI+ community are reluctant to attend screening services that could potentially identify a cancer.

The Corridor Walk & Talk

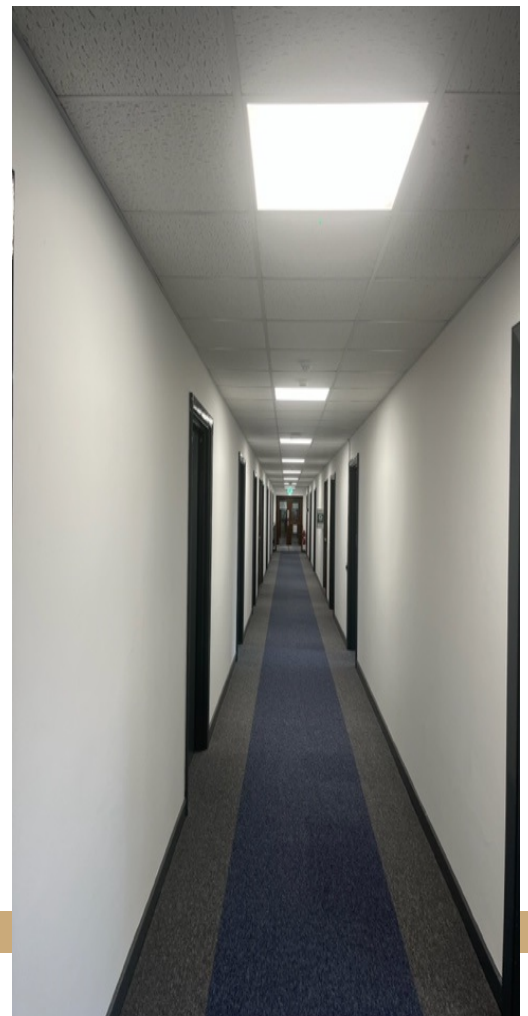
Many nurses and other staff will recognise the "Corridor Walk & Talk". It is that time when the patient leaves their consultation appointment to go home and while being escorted down the corridor by a member of staff, they ask the questions they were unable to ask during their appointment.

This will be for a number of reasons and it has nothing to do with our levels of education and intelligence; we are unable to process what was heard and recall it due to the stress of the appointment. Sometimes, it is because we are too embarrassed to ask someone to repeat information because we can't hear or understand what we are being told.

The staff are always on hand to answer the patients concerns and to reassure them, but since the pandemic this corridor walk and talk has been lost. This "service by-product" has encouraged us into talking about the long-term health, psychological recovery and wellbeing of patients, relatives. NHS staff.

have been impacted by COVID-19, leading us to this project.

Our grant supports this project which primarily focusses on psychological recovery in cancer and screening services through a model of enhanced



psychological support (including peer support), patient and staff education, digital inclusion and improved accessibility for vulnerable groups.

This psychological support proposal contains new, exciting and innovative service developments to improve people's experience (particularly vulnerable groups) and accessibility to both healthcare and psychological support services across primary, community and secondary care. The proposal is aligned to the Aneurin Bevan University Health Boards 3 year Integrated Medium Term Plan which takes a life course approach to population health and wellbeing. The proposal focuses on psychological wellbeing improvements needed following direct patient, relative and staff feedback throughout the COVID 19 pandemic. Predominately, the proposal focuses on cancer and screening services and improved access to psychological support for people who are waiting for a diagnosis / accessing cancer service, people who are Deaf, people who identify as LGBTQI+ and Black and Asian minority ethnic groups.

Thanks to you

for fundraising for the new Breast Care Unit

Breast Unit at Ysbyty Ystrad Fawr

Our new Breast Unit is now under construction at Ysbyty Ystrad Fawr, due to be completed in December 2023 with the unit opening early in 2024.

The Unit will bring together diagnostic, treatment and surgical services that are currently spread across three hospitals.



Fundraising has continued especially in the local community. The Mayor of Caerphilly County Borough Council, Elizabeth Aldworth, made the Breast Unit her Charity of the Year.

The balance of the fund is £261,000 at 31st March 2023. All money raised will go towards improving the experiences of our patients, both male and female, to ensure they are provided with a calm and dignified environment where they and their families can come to terms with their diagnosis and treatment.

Thanks to you...

...we can enhance parents accommodation

Dedicated accommodation for parents of Neonatal Intensive Care Unit (NICU) babies at The Grange University Hospital was officially opened this year to help provide added support to families with very poorly babies.



Thanks to you...

...we can enhance the new Oncology Unit at Nevill Hall Hospital

Due to open in early 2025, the Satellite Radiotherapy Centre at Nevill Hall Hospital, Abergavenny is part of a long-term programme to transform cancer services in South Wales by improving access to treatment for those living in the north and east catchment area of Velindre Cancer Centre in Cardiff.



The centre has started to take shape with the construction of the main steel frame, providing a glimpse of the size and scale of the new unit.

Several existing charitable funds will be used to enhance the inside of the unit.

The Charitable Funds Team

Alison Griffiths – Charitable Funds Manager



Linda Proudman – Charitable Funds Officer

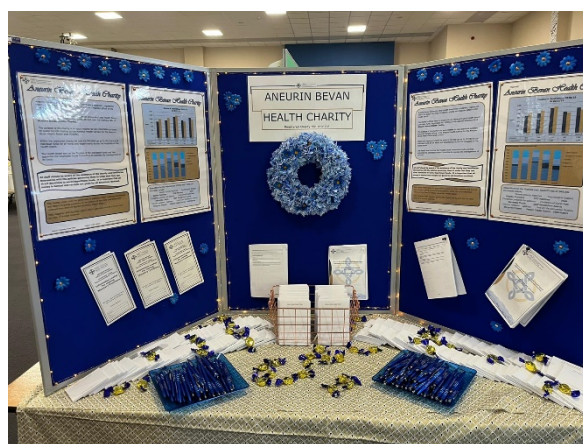
Wendy Keyte – Charitable Funds Officer



Sue Turley – Charitable Funds Officer

The Charitable Funds Team continue to promote charitable funds across the Health Board attending face to face conferences and visiting Charitable Fundholders as well as by Teams.

The Charitable Funds Stand at the Aneurin Bevan University Health Board Dementia Conference at the Christchurch Centre in Newport.



We were delighted to be joined by our Welsh NHS Charities Together representative, Lynne Carney (left) who was shown around by Tanya Strange (right) Head of the Person-Centred Care Team.

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
Block C, Mamhilad House
Mamhilad Park Estate
Pontypool, Torfaen
South Wales NP4 0YP

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 For T P Price Estate	Douglas-Jones Mercer Solicitors Axis Court 16 Mallard Way Swansea Vale Llansamlet Swansea SA7 0AJ
Estate Management For TP Price Estate:	NHS Wales Shared Services Partnership Specialist Estate Services 3 rd Floor, Companies House Crown Way Cardiff CF14 3UB Savills 2 Kingsway Cardiff CF10 3FD

**Valuations for
13 Clytha Square:**

The District Valuer
District Valuer Services
Ty Rhodfa
Ty Glas Road
Llanishen
Cardiff
CF14 5GR

Valuations for Painting:

Bonhams
7-8 Park Place
Cardiff
CF10 3DP

2. Structure, Governance and Management of Charitable Funds

Objects of the Charity

The objects of the charity are as follows:

The trustees shall hold the trust funds upon trust to apply income and at their discretion, so far as permissible, capital, for any charitable purpose or purposes relating to the National Health Service.

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 2023 were as follows:

Name	Designation	Dates (if less than full year)
Executive Directors		
Nicola Prygodzicz *	Chief Executive	From 05/09/2022
Nicola Prygodzicz	Director of Planning, Performance, Digital and IT/ Interim Deputy Chief Executive	Until 04/09/2022

Glyn Jones *	Interim Chief Executive	Until 04/09/2022
Glyn Jones	Deputy Chief Executive	From 05/09/2022 to 23/09/2022
Christopher Dawson-Morris	Interim Director of Planning and Performance	From 05/09/2022
Rob Holcombe *	Interim Director of Finance, Procurement and Value Based Healthcare	Until 13/11/2022
Rob Holcombe *	Director of Finance and Procurement	From 14/11/2022
Dr James Calvert	Medical Director	Until 23/09/2022
Dr James Calvert	Medical Director / Deputy Chief Executive	From 24/09/2022
Sarah Simmonds	Director of Workforce and OD	Full Year
Rhiannon Jones	Director of Nursing	Until 05/07/2022
Jennifer Winslade	Director of Nursing	From 08/08/2022
Linda Alexander	Interim Director of Nursing	From 25/06/22 to 14/08/2022
Peter Carr	Director of Therapies and Health Sciences	Full Year
Dr Sarah Aitken	Director of Public Health and Strategic Partnerships	Until 05/01/2023
Dr Chris O'Connor	Interim Director of Primary, Community and Mental Health Services	Full Year
Independent Members		
Ann Lloyd	Chair	Full Year
Pippa Britton	Interim Vice Chair	Full Year
Katija Dew *	Independent Member (Third Sector)	Full Year
Shelley Bosson	Independent Member (Community)	Full Year
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)	From 04/04/2022
Dafydd Vaughan	Independent Member (Digital)	From 09/05/2022
Vacant (Pippa Britton's Substantive position)	Independent Member (Community)	Full Year

Directors in Attendance		
Leanne Watkins	Director of Operations	Full Year
Special Advisors to the Board		
Phil Robson	Special Advisor to the Board	Full Year
Associate Members		
Keith Sutcliffe *	Chair, Stakeholder Reference Group	Until 30/11/2022 and vacant thereafter
Vacant	Chair, Health Professionals Forum	Full Year
Vacant	Director of Social Services	Full Year
Director of Corporate Governance		
Rani Dash (nee Mallison)	Director of Corporate Governance	Full Year

* Members of the Charitable Funds Committee.

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		
Katija Dew	Independent Member (Third Sector) Chair	Full Year
Louise Wright	Independent Member (Trade Union)	Full Year
Keith Sutcliffe	Chair, Stakeholder Reference Group	Until 01/11/2022

Iwan Jones	Independent Member (Finance)	From 01/11/2022
Glyn Jones	Interim Chief Executive	Until 04/09/2022
Nicola Prygodzicz	Chief Executive	From 05/09/2022
Rob Holcombe	Interim Director of Finance, Procurement and Value Based Healthcare	Until 13/11/2022
Rob Holcombe	Director of Finance and Procurement	From 14/11/2022

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		
Gwen Kohler	Assistant Director of Finance, Financial Systems & Services	Until 30/06/2022
Mark Ross	Assistant Director of Finance, Financial Systems & Services	From 01/07/2022
Estelle Evans	Head of Financial Services and Accounting	Full Year
Rani Dash (nee Mallison)	Director of Corporate Governance	Full Year
Bryony Codd	Head 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 415 internal funds which are delegated to authorised fund holders to approve expenditure within predefined limits. All expenditure requests exceeding £25,000 are subject to Committee approval. A further 4 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 355 unrestricted and designated funds and 64 restricted funds as at 31st March 2023. 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 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 Committees 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 this year and 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, usually attend the Charitable Funds Committee annually to present and discuss investment performance and strategy.

5. Reserves Policy

The Charitable Funds Committee reviewed the Charity's reserve policy, 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.

Due to the unrealised loss on investments in 2022/23 the reserves held were utilised to mitigate the loss incurred.

The corporate trustee recognises 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.

The charitable funds reserve value is reviewed 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 £106,000. There are also fixed asset valuations totalling £355,500 which includes 2 investment properties (£330,500) and 1 painting (£25,000).

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 £4.069 million.

Restricted Funds

These consist of legacies and grants where a legal document and signed agreement restricts the use to the terms of the bequest/agreement. The value of restricted funds held is £1.239 million.

During the year the charity made grants of £901,000 representing 86% 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 2022-23 are presented at the end of this report.

The net assets of the Charity as at 31st March 2023 were £5.770 million (2022 £6.044 million). Overall net assets decreased by £274,000.

Incoming Resources

Incoming resources when comparing against the 2021/22 position were £163,000 higher than the previous year. Donations increased

by £19,000, legacies decreased by £24,000, investment income increased by £13,000, grant income decreased by £49,000 and income from charitable activities increased by £204,000.

The charity received five legacies during the year, total value £146,000 (2021-2022 seven legacies, value £170,000).

The charity received four new grants in 2022-2023 totalling £130,000 (2021-2022 no new grants received) of which £94,000 has been carried forward to 2023-2024. Income of £14,000 brought forward from prior years has been released to meet expenditure in the current year.

Expended Resources

Charity expenditure for the year totalled £1,048,000, an increase of £118,000 from the previous year. Expenditure for the year was across several categories as follows:

I. Medical Research

There was no expenditure on medical research in 2022-23.

II. Purchase of Equipment

Total expenditure on equipment was £405,000. This was on a range of varied equipment across the Health Board.

III. Building and Refurbishment

Total expenditure on building and refurbishment was £16,000.

IV. Patients Education and Welfare

Total expenditure on patients' welfare and amenities was £103,000. This consists of various therapies, seasonal activities, support groups and other items of expenditure to benefit patients.

V. Staff Education and Welfare

Total expenditure on staff education and welfare was £377,000. The main items consist of seminars, training course fees, textbooks, professional journals and related travelling, subsistence and accommodation expenditure.

VI. Fundraising Costs

There was only a small amount of expenditure on fundraising costs for the purchase of fundraising buckets and collection boxes for "Dinky Dragons" which is the name of the fundraising group for our Neonatal Intensive Care Unit.



VII. Support Costs

Total expenditure on support costs was £147,000. This includes the audit fee of £19,000 and costs of the charitable funds office and corporate support.

Investment Properties

Investment properties owned by the charity are the T P Price Estate £80,500 and 13, Clytha Square, Newport £250,000.

The T P Price Estate comprises a leasehold property and a small parcel of land.

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.

Income from the investment properties was £16,000 (2021-2022 - £16,000).

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.

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.

Details of the investments (including cash held as part of the investment portfolio) and investment performance for 2022-2023 are shown in the table below:

Investment Performance 2022-23

	CCLA
	£000
Balance 1 April 2022	5,484
Acquisitions	0
Disposals	0
Movement of Cash	0
Realised Gains/(Loss)	0
Unrealised Gains/(Loss)	(382)
Balance 31 March 2023	5,102
Income	173
Gains/(Loss) %	-7.22%
Returns %	3.27%

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

The charity supported many bids from across the organisation from its general funds and via the 415 delegated charitable fund accounts. This support significantly enhanced services for the patients and staff in the Aneurin Bevan University Local Health Board.

Charitable Funds Strategy

Progress on streamlining funds has continued throughout the year.

Fundraising

Our fundraising campaign to supplement a new Breast Care Centre due to be opened in December 2023 in Ysbyty Ystrad Fawr continues.

Investment Management

CCLA continue to provide investment management services to the charity following a competitive retendering exercise in year. We continue to invest in their ethical investment fund.

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. The charity will continue to use its funds to improve patient experience.

Other objectives for the forthcoming year are to:

- Consider the effectiveness of support to staff in working with partners to obtain grants from companies, external organisations and charities for identified equipment and projects.
- Explore the objectives of the charity to ensure they remain relevant and appropriate for the Health Board.
- Ensure that all accounting or charity regulatory requirements are fully complied with.
- Continue to review funds for the redesign of service, in line with Clinical Futures Strategy.

10. Events since the Year End

- The latest information from our investment company suggests most long-term investors have seen a modest increase in portfolio values, in addition to income returns, over the course of the quarter.

Equity markets made progress overall during the period. However, these gains have been very narrowly based with a handful of names, mainly in information technology, enjoying exceptionally strong returns for the first half of the calendar year while the majority of stocks and sectors have struggled to maintain earnings in the face of inflationary pressures.

Bond markets, meanwhile, fell back slightly as central banks continued to tighten monetary policy.

In alternative sectors such as property and infrastructure, the higher yield environment continued to suppress asset valuations although income returns have generally remained sound.

- The NHS was 75 on 5th July 2023. As a Health Board we are privileged to be named after its founder. To mark the 75th anniversary of the NHS, staff across our services held celebrations, events and parties to mark this special birthday.



- In October 2023 we sold the last remaining ground lease held within the T P Price Estate at auction.
- As part of the fundraising led by Captain Sir Tom Moore, NHS Charities Together (NHS CT) have allocated money for supporting Covid-19 projects across the NHS in the UK to be accessed through individual bodies' charitable funds; we have obtained a development grant of £30,000 to develop and implement a policy for identifying and applying for external grants so that all staff across the Health Board can follow this system.
- We have also been successful in applying to NHS CT for a grant of £263,405 for a project - **Person Centred Meaningful Activities and Engagement** which is to develop and rollout a meaningful activity strategy to a range of care homes in Gwent, HM Prison Usk, the hospital wards within ABUHB and dementia patients from across the HB area, with a suite of meaningful activity resources and learning opportunities. It will be supported by a practitioner's forum to help staff, volunteers and carers gain skills, knowledge and confidence to deliver non-pharmacological interventions and embed person-centred meaningful activity.

Approved on behalf of the Corporate Trustee

Ann Lloyd CBE

Chair

Aneurin Bevan University Local Health Board

Date:



Aneurin Bevan University Health Board Charitable Funds – Detailed Audit Plan 2023

Audit year: 2022-23

Date issued: December 2023



This document has been prepared as part of work performed in accordance with statutory functions. Further information can be found in our [Statement of Responsibilities](#).

Audit Wales is the non-statutory collective name for the Auditor General for Wales and the Wales Audit Office, which are separate legal entities each with their own legal functions as described above. Audit Wales is not a legal entity and itself does not have any functions.

No responsibility is taken by the Auditor General, the staff of the Wales Audit Office or, where applicable, the appointed auditor in relation to any member, director, officer or other employee in their individual capacity, or to any third party.


In the event of receiving a request for information to which this document may be relevant, attention is drawn to the Code of Practice issued under section 45 of the Freedom of Information Act 2000. The section 45 Code sets out the practice in the handling of requests that is expected of public authorities, including consultation with relevant third parties. In relation to this document, the Auditor General for Wales, the Wales Audit Office and, where applicable, the appointed auditor are relevant third parties. Any enquiries regarding disclosure or re-use of this document should be sent to the Wales Audit Office at infoofficer@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.

About Audit Wales


Our aims and ambitions

Assure




the people of Wales that public money is well managed

Explain




how public money is being used to meet people's needs


Inspire




and empower the Welsh public sector to improve




Fully exploit our unique perspective, expertise and depth of insight



Strengthen our position as an authoritative, trusted and independent voice



Increase our visibility, influence and relevance



Be a model organisation for the public sector in Wales and beyond

Contents

Introduction	5
Your audit at a glance	6
Financial statements materiality	7
Significant financial statements risks	8
Other areas of focus	9
Financial statements audit timetable	10
Fee and audit team	11
Staff secondment	12
Audit quality	13
Appendices	
Appendix 1 – key ISA315 changes and impact	14

Introduction

I have now largely completed my planning work.

This Detailed Audit Plan specifies my statutory responsibilities as your external auditor and to fulfil my obligations under the Code of Audit Practice.

It sets out the work my team intends undertaking to address the audit risks identified and other key areas of focus during 2023.

It also sets out my estimated audit fee, details of my audit team and key dates for delivering my audit team's activities and planned outputs.



Adrian Crompton

Auditor General for
Wales


Audit of financial statements

I am required to issue a report on your financial statements which includes an opinion on their 'truth and fairness' and assess whether the Trustee's Annual Report is prepared in line with guidance and is consistent with the financial statements. I will also report by exception on a number of matters which are set out in more detail in our Statement of Responsibilities.

I do not seek to obtain absolute assurance on the truth and fairness of the financial statements and related notes but adopt a concept of materiality. My aim is to identify material misstatements, that is, those that might result in a reader of the accounts being misled. The levels at which I judge such misstatements to be material is set out later in this plan.

There have been no limitations imposed on me in planning the scope of this audit.

Your audit at a glance



My financial statements audit will concentrate on your risks and other areas of focus


My audit planning identified the following risks:

Significant financial statement risk

- Risk of management override

Other areas of audit focus

- Apportionment of Support Costs



Materiality

Materiality	£64,000
Reporting threshold	£3,000

Financial statements materiality



Materiality £64,000

My aim is to identify and correct material misstatements, that is, those that might otherwise cause the user of the accounts to be misled.

Materiality is calculated using:

- 2022-23 gross assets of £6.4 million
- Materiality percentage of 1%

I report to those charged with governance any misstatements above a trivial level (set at 5% of materiality).



Areas of specific interest

There are some areas of the accounts that may be of more importance to the user of the accounts and we have set a lower materiality level for these:

- Senior Employee Costs - £1,000
- Related party disclosures - £1,000 for individuals

Significant financial statements risks

Significant risks are identified risks of material misstatement for which the assessment of inherent risk is close to the upper end of the spectrum of inherent risk or those which are to be treated as a significant risk in accordance with the requirements of other ISAs. The ISAs require us to focus more attention on these significant risks.

Exhibit 1: significant financial statement risks

Significant risk	Our planned response
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].	<div>The audit team will:</div> <ul style="list-style-type: none">• test the appropriateness of journal entries and other adjustments made in preparing the financial statements;• review accounting estimates for bias;• evaluate the rationale for any significant transactions outside the normal course of business;

Other areas of focus

I set out other identified risks of material misstatement which, whilst not determined to be significant risks as above, I would like to bring to your attention.

Exhibit 2: other areas of focus

Audit risk	Our planned response
Apportionment of Support Costs – It was highlighted in the 2021-22 audit that the method of apportioning support costs between different expenditure groups was to be changed for the 2022-23 financial year.	<p>My audit team will</p> <ul style="list-style-type: none">- Enquire to managements on the reasoning for the change and assess the reasonableness of the new method for apportioning support costs.- Ensure the new method of apportionment has been applied consistently.- Undertake substantive testing of support cost expenditure including its classification.

Financial statements audit timetable

I set out below key dates for delivery of my accounts audit work and planned outputs.

Exhibit 3: key dates for delivery of planned outputs

Planned output	Work undertaken	Report finalised
2023 Detailed Audit Plan	December 2023	December 2023
Audit of financial statements work: <ul style="list-style-type: none">• Audit of Financial Statements Report• Opinion on the Financial Statements	December 2023 to January 2024	January 2024

Fee and audit team

In January 2023 I published the [fee scheme](#) for the 2023-24 year as approved by the Senedd Finance Committee. My fee rates for 2023-24 have increased by 4.8% for inflationary pressures. In addition, my financial audit fee has a further increase of 5.2% for the impact of the revised auditing standard ISA 315 on my financial audit approach. More details of the revised auditing standard and what it means for the audit I undertake is set out in **Appendix 1**.

I estimate your total audit fee will be £18,575 (2022 - £16,314)¹.

Planning will be ongoing, and changes to my programme of audit work, and therefore my fee, may be required if any key new risks emerge. I shall make no changes without first discussing them with the Executive Director of Finance & Procurement.

Our financial audit fee is based on the following assumptions:

- The agreed audit deliverables sets out the expected working paper requirements to support the financial statements and includes timescales and responsibilities.
- No matters of significance, other than as summarised in this plan, are identified during the audit.

The main members of my team, together with their contact details, are summarised in **Exhibit 4**.

Exhibit 4: my local audit team

Name	Role	Contact number	E-mail address
Richard Harries	Engagement Director	029 2032 0640	Richard.Harries@audit.wales
Cai Hale	Audit Lead	029 2032 0703	Cai.Hale@audit.wales

We can confirm that team members are all independent of you and your officers.

¹ The fees are exclusive of VAT, which is not charged to you.

Staff secondment

An Audit Trainee was seconded to Aneurin Bevan University Health Board for the period, December 2022 to June 2023.

In order to safeguard against any potential threats to auditor independence and objectivity, the following restrictions apply in line with the FRC's Revised Ethical Standard 2019:

- the secondee will not undertake any line management or management responsibilities; and
- the secondment will be for a maximum of six months [trainees]/three months [non-trainees]

Audit quality

Our commitment to audit quality in Audit Wales is absolute. We believe that audit quality is about getting things right first time.

We use a three lines of assurance model to demonstrate how we achieve this. We have established an Audit Quality Committee to co-ordinate and oversee those arrangements. We subject our work to independent scrutiny by QAD* and our Chair, acts as a link to our Board on audit quality. For more information see our [Audit Quality Report 2022](#).

Our People



The first line of assurance is formed by our staff and management who are individually and collectively responsible for achieving the standards of audit quality to which we aspire.

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

Arrangements for achieving audit quality



The second line of assurance is formed by the policies, tools, learning & development, guidance, and leadership we provide to our staff to support them in achieving those standards of audit quality.

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

Independent assurance



The third line of assurance is formed by those activities that provide independent assurance over the effectiveness of the first two lines of assurance.

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

* QAD is the quality monitoring arm of ICAEW.

Appendix 1

The key changes to ISA315 and the potential impact on your organisation

Key change	Potential impact on your organisation
More detailed and extensive risk identification and assessment procedures	<p>Your finance team and others in your organisation may receive a greater number of enquiries from our audit teams at the planning stage of the audit. Requests for information may include:</p> <ul style="list-style-type: none">• information on your organisation's business model and how it integrates the use of information technology (IT);• information about your organisation's risk assessment process and how your organisation monitors the system of internal control;• more detailed information on how transactions are initiated, recorded, processed, and reported. This may include access to supporting documentation such as policy and procedure manuals; and• more detailed discussions with your organisation to support the audit team's assessment of inherent risk.
Obtaining an enhanced understanding of your organisation's environment, particularly in relation to IT	<p>Your organisation may receive more enquiries to assist the audit team in understanding the IT environment. This may include information on:</p> <ul style="list-style-type: none">• IT applications relevant to financial reporting;• the supporting IT infrastructure (e.g. the network, databases);• IT processes (e.g. managing program changes, IT operations); and• the IT personnel involved in the IT processes. <p>Audit teams may need to test the general IT controls and this may require obtaining more detailed audit evidence on the operation of IT controls within your organisation.</p> <p>On some audits, our audit teams may involve IT audit specialists to assist with their work. Our IT auditors may need to engage with members of your IT team who have not previously been involved in the audit process.</p>

Key change	Potential impact on your organisation
Enhanced requirements relating to exercising professional scepticism	Our audit teams may make additional inquiries if they identify information which appears to contradict what they have already learned in the audit.
Risk assessments are scalable depending on the nature and complexity of the audited body	The audit team's expectations regarding the formality of your organisation's policies, procedures, processes, and systems will depend on the complexity of your organisation.
Audit teams may make greater use of technology in the performance of their audit	Our audit teams may make use of automated tools and techniques such as data analytics when performing their audit. Our teams may request different information or information in a different format from previous audits so that they can perform their audit procedures.

Through our Good Practice work we share emerging practice and insights from our audit work in support of our objectives to assure, to explain and to inspire. Our newsletter provides you with regular updates on our public service audit work, good practice and events, which can be tailored to your preferences. For more information about our Good Practice work click [here](#). Sign up to our newsletter [here](#).



Audit Wales
1 Capital Quarter
Tyndall Street
Cardiff CF10 4BZ

Tel: 029 2032 0500
Fax: 029 2032 0600
Textphone: 029 2032 0660

E-mail: info@audit.wales

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.

Audit of Accounts Report – Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities

Audit year: 2022-23

Date issued: January 2024

Document reference: [\[the Publishing team assigns this\]](#)

Purpose of this document

This document is a draft supplied in confidence solely for the purpose of verifying the accuracy and completeness of the information contained in it and to obtain views on the conclusions reached.

Handling prior to publication

This document and the copyright comprised therein is and remains the property of the Auditor General for Wales. It contains information which has been obtained by the Auditor General and the Wales Audit Office under statutory functions solely to discharge statutory functions and has been prepared as the basis for an official document that may be issued or published in due course. It may also contain information the unauthorised disclosure of which may be an offence under section 54 of the Public Audit (Wales) Act 2004. Except as expressly permitted by law, neither the document nor any of its content may be reproduced, stored in a retrieval system and/or transmitted in any form or by any means, or disclosed to any person other than the original recipient without the prior written permission of the Wales Audit Office. It must be safeguarded at all times to prevent publication or other improper use of its content. Unauthorised use or disclosure may result in legal proceedings. Any enquiries regarding disclosure or re-use of this document should be sent to the Wales Audit Office at infoofficer@audit.wales.

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

In the event of receiving a request for information to which this document may be relevant, attention is drawn to the Code of Practice issued under section 45 of the Freedom of Information Act 2000. The section 45 code sets out the practice in the handling of requests that is expected of public authorities, including consultation with relevant third parties. In relation to this document, the Auditor General for Wales and the Wales Audit Office are relevant third parties. Any enquiries regarding disclosure or re-use of this document should be sent to the Wales Audit Office at infoofficer@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.

Contents

We intend to issue an unqualified audit report on your Accounts and there are some issues to report to you prior to their approval.

Audit of Accounts Report

Introduction	4
Proposed audit opinion	4
Significant issues arising from the audit	4
Recommendations	5
Appendices	
Appendix 1 – Final Letter of Representation	6
Appendix 2 – Proposed Audit Report	9
Appendix 3 – Summary of Corrections Made	13

Audit of Accounts Report

Introduction

- 1 We summarise the main findings from our audit of your 2022-23 Annual Report and accounts in this report.
- 2 We have already discussed these issues with Assistant Director of Finance (Financial Systems & Services), the Head of Financial Services and Accounting and their team.
- 3 Auditors can never give complete assurance that accounts are correctly stated. Instead, we work to a level of 'materiality'. This level of materiality is set to try to identify and correct misstatements that might otherwise cause a user of the accounts into being misled.
- 4 We set this level at £64,000 for this year's audit.
- 5 There are some areas of the accounts that may be of more importance to the reader and we have set a lower materiality level for these, as follows:
 - Related Party Transactions
 - Senior Employee Costs
- 6 We have now substantially completed this year's audit subject to a final review.
- 7 In our professional view, we have complied with the ethical standards that apply to our work; remain independent of yourselves; and our objectivity has not been compromised in any way. There are no relationships between ourselves and yourselves that we believe could undermine our objectivity and independence.

Proposed audit opinion

- 8 We intend to issue an unqualified audit opinion on this year's accounts once you have provided us with a Letter of Representation based on that set out in **Appendix 1**.
- 9 We issue a 'qualified' audit opinion where we have material concerns about some aspects of your accounts; otherwise, we issue an unqualified opinion.
- 10 The Letter of Representation contains certain confirmations we are required to obtain from you under auditing standards, along with confirmation of other specific information you have provided to us during our audit.
- 11 Our proposed audit report is set out in **Appendix 2**.

Significant issues arising from the audit

Uncorrected misstatements

- 12 There are no misstatements identified in the accounts, which remain uncorrected.

Corrected misstatements

- 13 There were initially misstatements in the accounts that have now been corrected by management. These are set out with explanations in **Appendix 3**.

Other significant issues arising from the audit

- 14 In the course of the audit, we consider a number of matters relating to the accounts and report any significant issues arising to you. There were no issues arising in these areas this year.

Recommendations

- 15 There were no recommendations arising from our audit this year.

Appendix 1

Final 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 2022-23 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 2023 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; and
- 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; and
- 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 [insert name of those charged with governance]

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 [insert date].

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 2

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 2023 under the Charities Act 2011. These comprise the Statement of Financial Activities, Balance Sheet, Statement of Cash Flows and related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In my opinion the financial statements:

- give a true and fair view of the state of affairs of the charity as at 31 March 2023 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 of 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. I am independent of the charity in accordance with the ethical requirements that are relevant to my audit of the financial statements in the UK including the Financial Reporting Council's Ethical Standard, and I have fulfilled my other ethical responsibilities in accordance with these requirements. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Conclusions relating to going concern

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.

Report on other requirements

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:

- the information given in the financial statements is inconsistent in any material respect with the trustee's report;
- 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
- I have not received all of the information and explanations I require for my audit.

Responsibilities

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; and
- 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, 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 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, posting of unusual journals and (add as appropriate to the audit).
- 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 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 Aneurin Bevan University Local Health Board Charitable Fund and Other Related Charities .

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;
- reading minutes of meetings of those charged with governance and the trustee; and
- 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.

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 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.

Adrian Crompton
Auditor General for Wales
[Date]

1 Capital Quarter
Tyndall Street
Cardiff
CF10 4BZ

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 due to their relevance to your responsibilities over the financial reporting process.

Exhibit 1: summary of corrections made

Value of correction	Nature of correction	Reason for correction
£100,000	Closing balance of Note 11. Movements in Funding Commitments to be reduced by £100,000.	Closing balance of funding commitment was overstated by £100,000.
£26,000	Opening balance of an unrestricted fund (ABUHB Person Centred Care Fund) to be increased by £26,000 and transfers for the fund to be decreased by £26,000. Other funds opening balance to be decreased by £26,000 and transfers to for other funds to be increased by £26,000.	Transfer between unrestricted funds was made but not disclosed in the Note 23b.
Various	Annual Report	Incorrect figures disclosed in the Annual Report for investment property values, designated unrestricted funds and support costs.



Audit Wales

Tel: 029 2032 0500

Fax: 029 2032 0600

Textphone: 029 2032 0660

E-mail: info@audit.wales

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:	22 January 2024
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Financial Report for Period Ending 30 November 2023
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Robert Holcombe, Director of Finance, Procurement and Value Based Healthcare
SWYDDOG ADRODD: REPORTING OFFICER:	Estelle Evans, Head of Financial Services & Accounting

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

Er Sicrwydd/For Assurance

To update the committee on a range of financial issues, including the following items:

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

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

This report provides a general financial update to the Committee and includes some standing items that were agreed as part of the annual work plan.

The Committee is asked to note the remainder of the report.

Cefndir / Background

1. Financial Position as at 30 November 2023

Table 1 below shows the financial position for the period to 30 November 2023 (month 08) compared to the previous reported month (month 06) and the draft 2022/23 Annual Accounts.

Table 1

Financial Statement to 30 November 2023	Draft Accounts 2022/23 £000	Month 06 2023/24 £000	Month 08 2023/24 £000
<u>Income & Expenditure</u>			
Income			
Donations	418	126	168
Legacies	146	34	40
Grants	50	204	235
Investment Income	200	110	143
Other Income	330	32	44
	1,144	506	630
Expenditure	1,048	600	813
Gains / (losses) on investment assets	-370	-61	80
Surplus / (Deficit)	-274	-155	-103
<u>Balance Sheet</u>			
Property	355	355	330
Investments	5,102	5,041	5,182
Debtors	228	111	87
Current Liabilities	-442	-298	-376
Cash at Bank	527	406	443
Cash on Deposit	0	0	0
Net Assets	5,770	5,615	5,666
Funds of the Charity	5,770	5,615	5,666
Total Charity Funds	5,770	5,615	5,666

The following commentary supports the figures in Table 1:

1.1 Income

Month 08 income totals £630K. This is £254K lower than the equivalent period in 2022/23, mainly due to a decrease in the value of donations, legacies and other income received to date in 2023/24. In 2022/23 Other Income included one-off monies received in respect of filming at St Cadocs Hospital together with an increase in income from courses post covid.

Donations, legacies, and grant income

The following table shows donations, legacies and grant income exceeding £1,000 received since the start of the year:

Fund Ref	Received From	Amount £	Location
Apr-23			
F703 ABUHB JACKS APPEAL	Crossford O&T Ltd	1,395.00	ABUHB
F831-LEGACY CALCRAFT J GRIFFITHS	Jacklyn Dawson - J G Jones legacy	9,634.19	ABUHB
F703 ABUHB JACKS APPEAL	Jack Thomas Celebra	2,000.00	ABUHB
F703 ABUHB JACKS APPEAL	Glantwymth Council	1,122.00	ABUHB
F322 GUH A0 T&O WARD	Mr G R & Mrs R King	2,000.00	GUH
F703 ABUHB JACKS APPEAL	Nentlodge CC	1,150.00	ABUHB
F303-ABUHB BREAST CENTRE	Breast Care	1,676.00	ABUHB
		18,977.19	
May-23			
F436 ABUHB SCUF SPECIAL CHILDREN'S UNIT FUND	Mrs L Morling & Mr P Osbourne	1,076.73	ABUHB
F003 ABUHB HOLDING ACCOUNT INT & ADMIN	Scheduled Care Fundraiser	2,044.51	ABUHB
		3,121.24	
Jun-23			
F436 ABUHB SCUF SPECIAL CHILDREN'S UNIT FUND	Cefn Crafters Group	1,200.00	ABUHB
F303-ABUHB BREAST CENTRE	Just Giving	1,254.69	ABUHB
F703 ABUHB JACKS APPEAL	Centrica Management	1,320.00	ABUHB
F703 ABUHB JACKS APPEAL	N Griffiths	1,200.00	ABUHB
F436 ABUHB SCUF SPECIAL CHILDREN'S UNIT FUND	Cefn Crafters Group	2,400.00	ABUHB
F436 ABUHB SCUF SPECIAL CHILDREN'S UNIT FUND	The Brecon Group	6,000.00	ABUHB
F003 ABUHB HOLDING ACCOUNT INT & ADMIN	Eventbrite	2,460.00	ABUHB
F703 ABUHB JACKS APPEAL	R Burston	1,394.00	ABUHB
F277 NHH WINDSOR SUITE	R A Shore	2,100.00	Nevill Hall
		19,328.69	
Jul-23			
F703 ABUHB JACKS APPEAL	Bedwas Trethomas	1,000.00	ABUHB
F703 ABUHB JACKS APPEAL	St Gwladys Private Fund	2,500.00	ABUHB
F231 ABUHB DINKY DRAGONS	Sabrina Moore	5,000.00	ABUHB
F638 STW SYCAMORE WARD EMI	Mr C Mander	2,000.00	St Woolos
		10,500.00	
Aug-23			
F003 ABUHB HOLDING ACCOUNT INT & ADMIN	Everett & Tomlin Legacy - Pamela Manning	34,247.67	ABUHB
F826 RGH ENDOSCOPY EQUIPMENT	Mr R C Butcher	10,000.00	Royal Gwent
F393 RGH URO-ONCOLOGY	Unknown	1,000.00	Royal Gwent
F231 ABUHB DINKY DRAGONS	GMB Newport Branch	1,000.00	ABUHB
F003 ABUHB HOLDING ACCOUNT INT & ADMIN	Reginald Watson	5,000.00	ABUHB
		51,247.67	
Sep-23			
F285 GUH SURGICAL ASSESSMENT UNIT SAU	Valerie Hartshome	1,000.00	ABUHB
		1,000.00	
Oct-23			
F003 ABUHB HOLDING ACCOUNT INT & ADMIN	Health Foundation	31,500.00	ABUHB
F003 ABUHB HOLDING ACCOUNT INT & ADMIN	McGill Brown Legacy - RGH League of Friends	5,854.88	Royal Gwent
		37,354.88	
Nov-23			
F703 ABUHB JACKS APPEAL	Jack Thomas Celebration	1,200.00	ABUHB
F703 ABUHB JACKS APPEAL	Van Comm CNC	1,396.00	ABUHB
F703 ABUHB JACKS APPEAL	Llantwit Fardre Community Council	1,403.00	ABUHB
F703 ABUHB JACKS APPEAL	Plas Mawr Community	1,396.00	ABUHB
F231 ABUHB DINKY DRAGONS	Boots Canteen	1,070.00	ABUHB
F857 STW SLEEP CENTRE	Welsh SAS Balance	4,770.64	St Woolos
		11,235.64	
Overall Total		152,765.31	

1.2 Expenditure

The year-to-date expenditure totals £813K which is £141K higher than M08 in 2022/23. The profile of expenditure throughout the year can vary significantly from year to year. In the first eight months of 2023/24 there has been increased expenditure on equipment, specifically in Ophthalmology & Urology and defibrillators in the community. In addition, the staffing costs in relation to grant funded schemes is significantly higher this year.

1.3 Gains / Losses on Investment Assets

At 30 November 2023, the CCLA Investment is presenting an unrealised gain of £80K against the 2022/23 year end value.

1.4 Overall Position

The overall position for the period is a decrease in funds of £103K. Excluding investment gains there would be an underlying decrease of £183K, indicating that expenditure has exceeded income during the first half of the year.

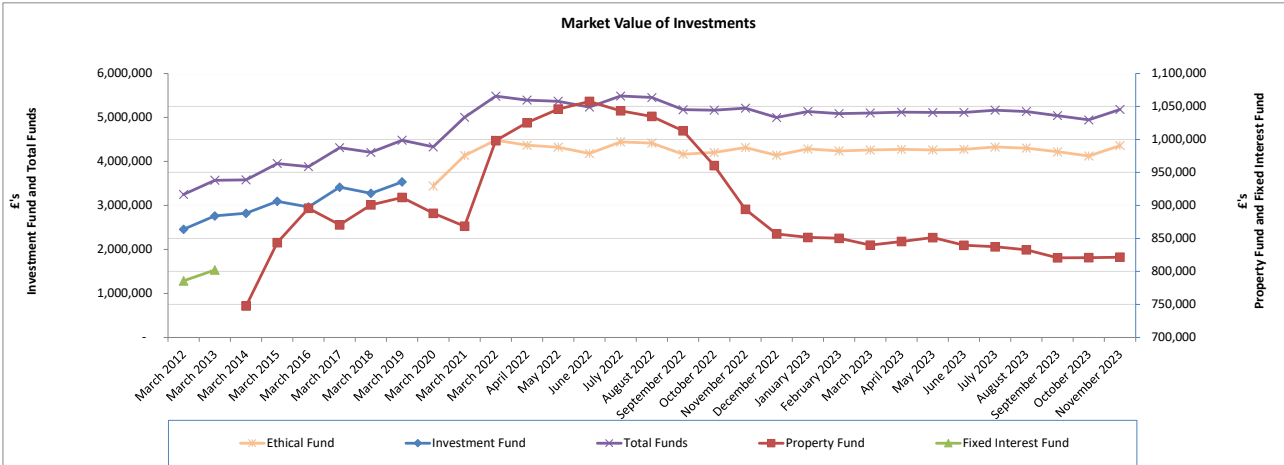
1.5 Balance Sheet

Value of Investments

The investments valuation for CCLA as of 30 November 2023 is as follows:

Investment Valuation	No of Units	Valuation / Unit as at 30/11/23	Total Valuation
		Pence/Unit	£000
Property Fund	769,509	106.77	822
Ethical Fund	1,511,068	288.56	4,360
Total			5,182

The following chart shows the movement in the market value of the CCLA funds since March 2012.



Cash Balances

Overall cash balances have decreased since the start of the year. At the end of November, we held £443K in current / bonus accounts.

2. Overdrawn Accounts

There are no overdrawn accounts as of 30 November 2023.

3. Streamlining of funds and Closed funds

The following 5 funds have been merged / closed:

- F866 ABUHB EVIDENCE RESOURCES SPENT
- F475 YYF PHARMACY MERGED TO F477
- F476 NHH PHARMACY EDUCATION MERGED TO F477

- F415 YYF THEATRE
- F416 NHH THEATRE AMENITY

MERGED TO F420
MERGED TO F420

4. New Funds

There are no requests for new funds.

5. Key Performance Indicators (KPIs)

Setting Key Performance Indicators (KPIs) allows the Committee to measure the performance of the Charity across a range of objectives over a set period.

Following discussions, the following KPIs have been identified to report to the Committee. The KPIs are split between those that are measured quarterly, year to date & annually:

Charitable Funds Key Performance Indicators	Measurement		YTD Indicators					
			2021/22 M01 - M12	2022/23 M01 - M12	2023/24 M01-M03	2023/24 M01-M06	2023/24 M01-M08	2023/24 M01-M08
Number of merged funds	Number of funds closed as a result of merger	No	8	12	-	1	5	
Expenditure expressed as a percentage of the overall fund balance	Expenditure excludes admin charge to reflect 'true' spend	%	13.29	15.65	4.24	9.37	12.53	
Donations received in the year	Number of Donations Received	No	1,145	855	240	455	609	
	Value of Donations Received	£	399,434	417,866	54,920	125,683	167,729	

Charitable Funds Key Performance Indicators	Measurement		Quarterly Indicators				
			2021/22 Q4	2022/23 Q4	2023/24 Q1	2023/24 Q2	2023/24 Q3
Number of funds	Number of funds	No	430	419	424	418	
Number of static funds	A static fund is classed as any fund where the cumulative expenditure is less than 10% of the average fund balance over a 2 year period	No	32	30	28	25	

The KPIs in relation to the number of funds and number of static funds will be updated for Q3 when December information is available and reported at the next committee.

There have been 5 funds merged since the start of the year.

Expenditure as a percentage of the overall fund balance should increase as the year progresses and as more expenditure is incurred. At month 08 this measure is showing a higher value than at the same time in 2022/23 indicating that the level of expenditure has increased this year.

The number and value of donations received to date in the current year are also detailed above, with the 2021/22 & 2022/23 values shown as comparators.

The table below will be completed at the year-end & will reflect the average time between the receipt of legacy / grant income and the corresponding expenditure being incurred and the monies spent in full.

Charitable Funds Key Performance Indicators	Measurement		Annual Indicators		
			2021/22 M12	2022/23 M12	2023/24 M12
Time between receipt of income and expenditure incurred	Legacies	Mths	79	98	To be updated for year end report
	Grants	Mths	23	32	

6. Update on Grants from NHS Charities Together (NHS CT)

In September 2023, we submitted an Expression of Interest (EOI) application for £200K to the Greener Communities Fund but unfortunately, we were unsuccessful. As was the case with the first round, NHS CT received strong levels of interest from across their membership, with **106** EOIs received and an indicative grant request of **over £14million** against an available budget of up to £1million. On that basis, the panel were only able to progress those projects that they considered to have the most potential to deliver the Fund’s outcomes strongly.

Asesiad / Assessment

This report provides a financial update for the Charitable Funds Committee for the period ending 30 November 2023.

Argymhelliad / Recommendation

The Charitable Funds Committee is asked to note the report.

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.

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	
Rhestr Termau: Glossary of Terms:	KPIs – Key Performance Indicators
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

<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>
--	--

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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	22 January 2024
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Available Funding & Small Grants Scheme
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Robert Holcombe, Director of Finance, Procurement and Value Based Healthcare
SWYDDOG ADRODD: REPORTING OFFICER:	Estelle Evans, 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 31.12.2023 and includes one small grant for consideration.

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.

The Committee is asked to note the funds available to them and consider the request.

Cefndir / Background

Funds Available to the Charitable Funds Committee

The following table shows the discretionary funding currently available to the Committee:



Table 1

Charitable Funds Committee - General Fund	ABUHB F002 £000's
Fund Balances as at 31.03.2023	106
23/24	
CFC-234 Radio Station YYF	0.0
SGS-003 In Tune with Parent & Infant Mental Health Conference	-0.8
SGS-005 Scheduled Care - Gas Cylinder Trolleys	-2.4
SGS-007 Finance Conference	-4.2
SGS-008 Llwyn Onn Improvements	-3.0
Legal Costs	0.5
SCS 010 Clinical Supervision Programme	0.8
Unknown/General Donations	2.5
Total 23/24	-7
Balance as at 31.12.23	99
Less Commitments	
CFC-234 Radio YYF	-1.0
CFC-243 Volunteer Event (06.06.23)	-15.0
CFC-259 – Occupational Therapy Support for Staff	-22.0
SGS-005 Scheduled Care - Gas Cylinder Trolleys	-0.6
SGS-007 Finance Conference	-0.7
SGS-008 Llwyn Onn Improvements	-2.0
SGS 009 Person Centred Value Based Health Care Education Prog	-4.5
SGS 010 Clinical Supervision Programme	-4.2
SGS 011 Advanced Communication Skills Training, Cancer Services	-3.0
SGS 012 Well Being Pop up Events across ABUHB	-5.00
SGS 013 Mental Health & Learning Disabilities Wellbeing Space	-3.00
CFC 264 Televisions for Bedwas Ward, Ysbyty Ystrad Fawr	-23.00
Total Commitments	-84
Remaining available funds after commitments	15

Asesiad / Assessment**Requests Received**

One request has been received as identified in the table below. A copy of the application is attached.



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
• 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	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 Funds

Small Grants Scheme Application – £1,045

CFC/SGS 014

1. Name of ward or department and hospital:
Clinical Futures – Decarbonisation Programme Board
2. Description of item/service required:
<p>The Decarbonisation agenda is a Welsh Government priority for Health Boards across Wales become 'net zero' for carbon emissions by 2030.</p> <p>To support the Programme Board in getting the message out to our colleagues we are seeking funding for promotional materials. Whilst the majority of communication to colleagues is being done via the Intranet, not all of our colleagues have access to this and having visuals placed around the health board sites promoting work which is being rolled out will educate staff, patients, families and visitors. It is hoped the visual prompts and promotions of net zero will get people to think about their actions and make changes and also accept changes from management, which will both help the environment and the health board reach net zero whilst also generating financial savings.</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>Stand up promotional banners £90 each x 4, with 2 x designs - £360 from Harlequin</p> <p>100 x reusable coffee cups skbu: PP-MD51f Universal Vending Cup – Full Colour – Get Yourself Noticed with carriage £426</p> <p>500 Colour posters on uncoated paper consisting of both A4 and A3 to be placed in public areas, including wards £85.00 + VAT</p> <p>Total £1045.20</p>
4. How will this item/service benefit patients and staff:
<p>This will help staff and patients understand the significance of us achieving net zero and the changes we are making in order to achieve this.</p> <p>For example, the Gloves R Off campaign, is to be rolled out in 2024 across all</p>

clinical areas and it is important for staff to partake in this and for patients and visitors to understand that gloves do not need to be worn for much of the patients care and that good hand hygiene is what is needed, as supported by Infection Control.

The message will also include the carbon savings by reducing the number of gloves worn.

The HB are currently spending double on non-sterile gloves as opposed to 2019, equating to approximately £600k.

We would use these banners at engagement events across GUH, RGH, YYF and NHH. They could also be left in places for periods of time before being moved to a new location to ensure visibility.

We desperately need to get the message out of the necessity to reduce climate change and encourage people to change what they do and massively reduce unnecessary waste. The posters can act as a reminder for staff to stop and think before they use something.

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. The Charitable Funds Manager advised there were no suitable existing charitable funds available for this purpose and asked us to submit a small grants request.

6. Other supporting information:

7. Submitted by:

Name:
Francine Phillips (Aneurin Bevan UHB - Planning)

Job title:
Service Improvement Manager

Telephone:

Email: Francine.phillips@wales.nhs.uk

8. Supported by:

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

Name:
Chris Dawson-Morris
Job title:
Deputy Director Strategy Planning and Partnerships

Date: 20/12/2023



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Signature:

For Charitable Funds Committee Use

Approved

Next Action:

Not Approved

Reason:



Managing your investment portfolio

Aneurin Bevan UHB Charitable Funds

22 January 2024

Heather Lamont, Client Investment Director

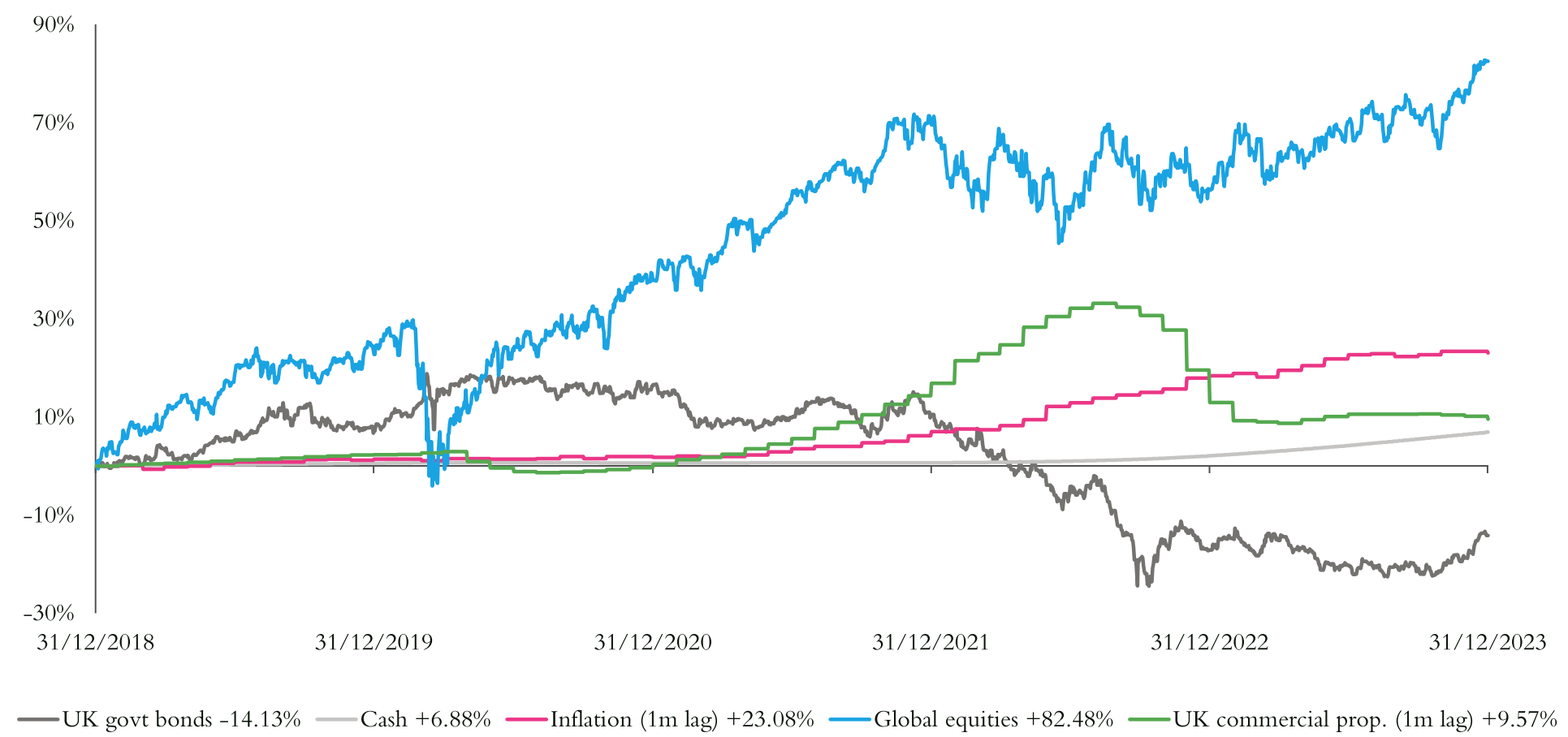


- Your portfolio valuation and income forecast
- Investment markets review
- COIF Charities Ethical Investment Fund:
 - Objectives
 - Performance
 - Portfolio activity and positioning
- Reference material including:
 - Our approach to sustainable investment
 - More on Ethical Fund portfolio components and characteristics
 - COIF Charities Property Fund performance and positioning

Holdings	Market value 16 Feb 2023	Income 2023	Market value 31 Dec 2023	Forecast income 2024
COIF Charities Ethical Investment Fund	£4,395,394	£130,103	£4,548,314	£132,672
COIF Charities Property Fund	£851,539	£43,093	£803,368	£43,939
Total portfolio	£5,246,933	£173,196	£5,351,682	£176,611

Source CCLA as at 31 December 2023.
Annual income figures are based on current fund unit holdings and forecast distributions per fund unit for calendar year 2023.

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.



Source: Bloomberg, as at 31 December 2023. Inflation and UK commercial property performance are on a one-month lag.
Past performance is not a reliable indicator of future results.

Equities

- The worst damage from rising yields is past
 - But markets will remain volatile
- Some companies will struggle to grow earnings
 - Especially those which are capital intensive, heavily indebted or have limited pricing power.

Bonds and cash

- Markets now present more attractive opportunities:
 - Meaningful yield from lower-risk asset classes
 - As interest rates peak, there is less risk to bond valuations.

Alternatives

- Valuations in alternative sectors like property and infrastructure are still under pressure from higher bond yields
 - Though for many assets, underlying cash flows and fundamentals remain strong.

Source: CCLA, as at September 2023. Infrastructure and operating assets refers to investments that facilitate the functioning of society with the potential for steady cash flows (e.g. energy related and social). The market review, analysis, and any projections contained in this document represent the current house view and should not be relied upon to form the basis of any investment decisions.

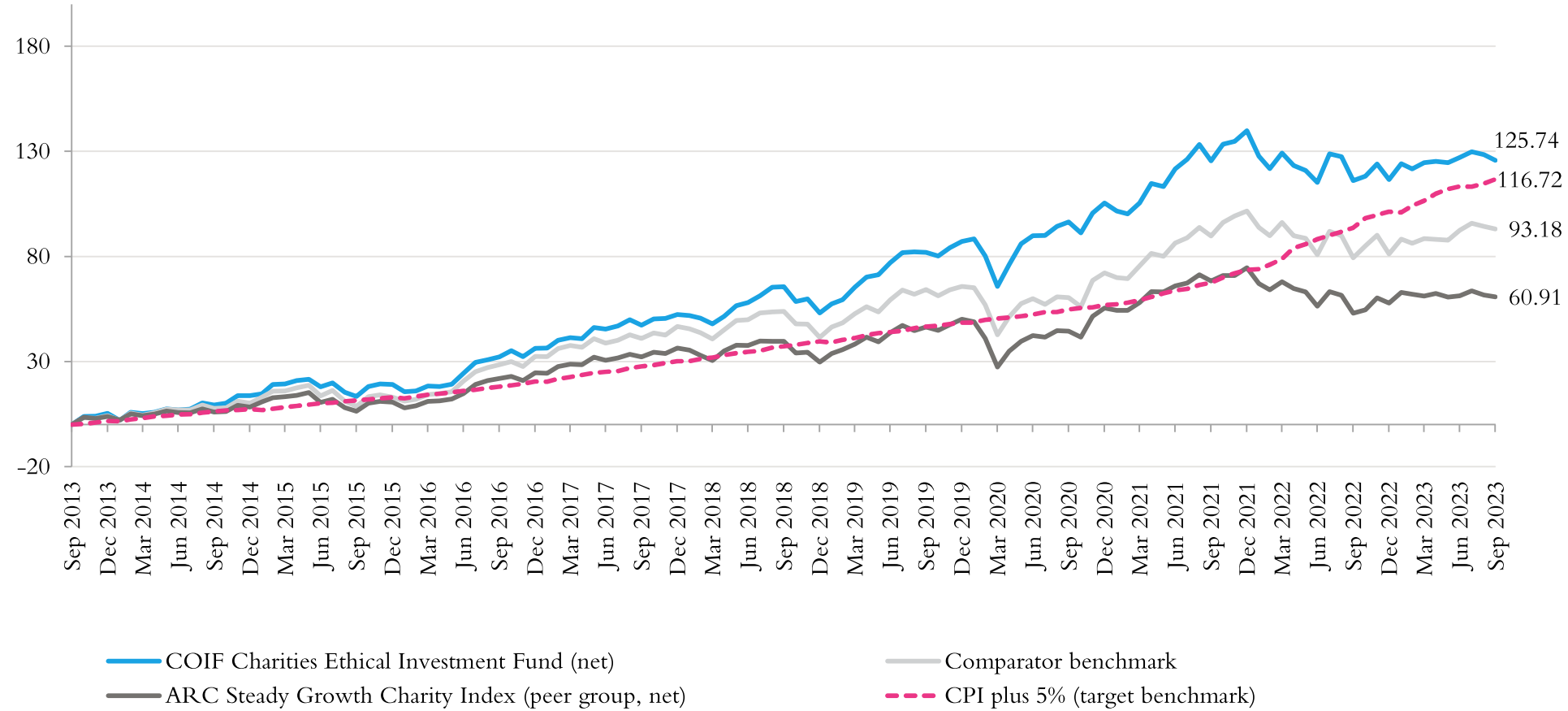
Long-term investment objective

- To provide total return comprising growth in both capital and income
 - Benchmark: long-term total return of inflation (CPI) plus 5% per annum, before costs

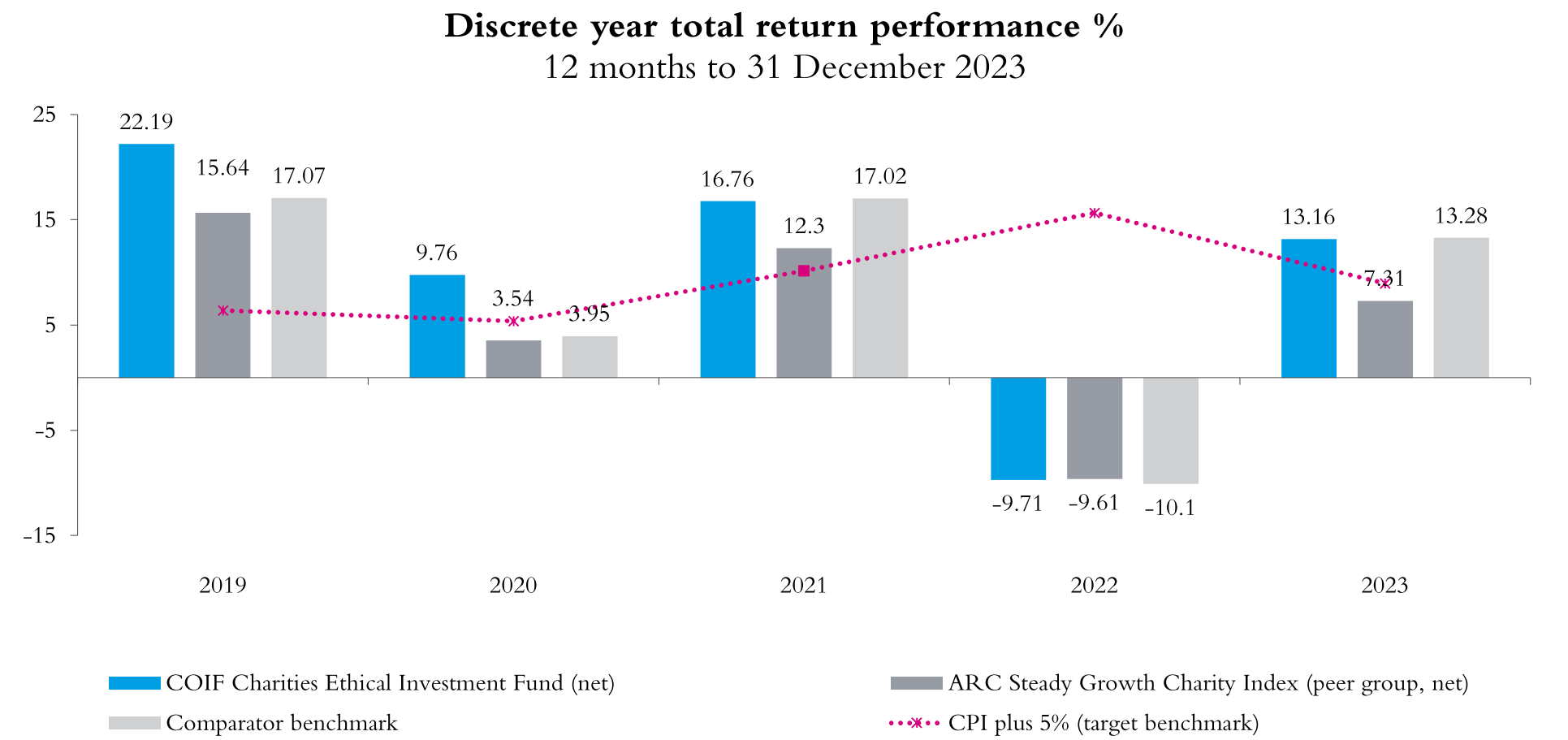
We also aim to deliver:

- Controlled volatility ('risk')
 - Comparator benchmark equity allocation of 75%; range 50-85%
- From within total return, an income distribution (dividend) which is reliable from year to year and rises progressively over time

CUMULATIVE PERFORMANCE (%)

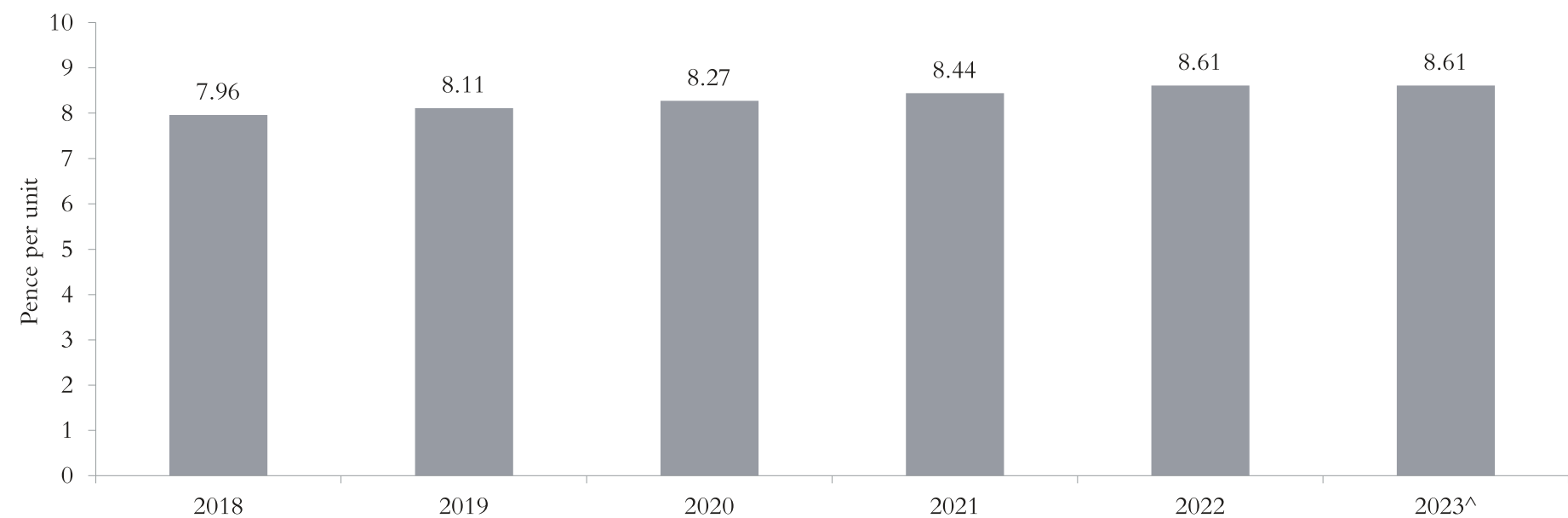


Source: CCLA as at 30 September 2023. Comparator benchmark: MSCI World Index (75%), Markit iBoxx £ Gilts Index (15%), MSCI UK Monthly Property Index (5%) and SONIA (5%). The comparator benchmark is subject to change. Please refer to detailed description in the appendix. Total return performance is shown net of management fees and expenses on a mid-price basis with gross income reinvested. Past performance is not a reliable indicator of future returns.



Source: CCLA, discrete year performance for 12 months to 31 December 2023 (*provisional performance and benchmark data*). 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. Total return performance is shown net of management fees and expenses on a mid-price basis with gross income reinvested. Past performance is not a reliable indicator of future returns.

Historical and Projected Annual Distribution

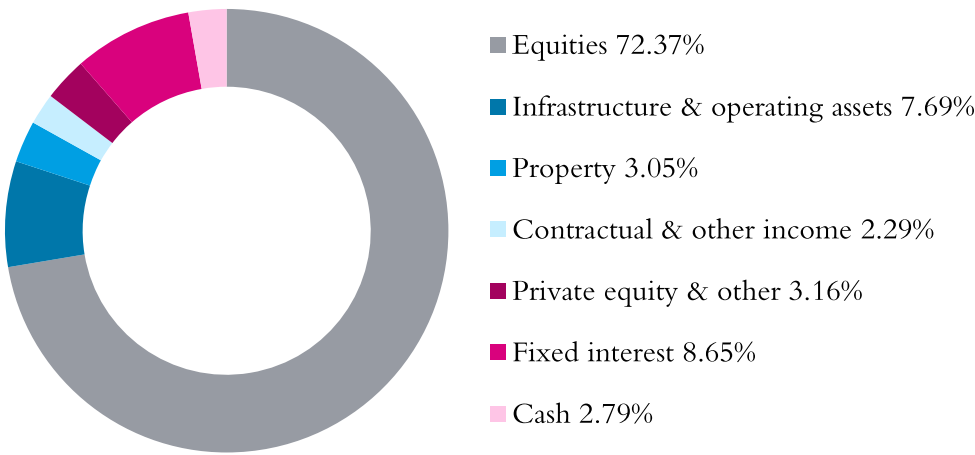


Current yield 3.08%★

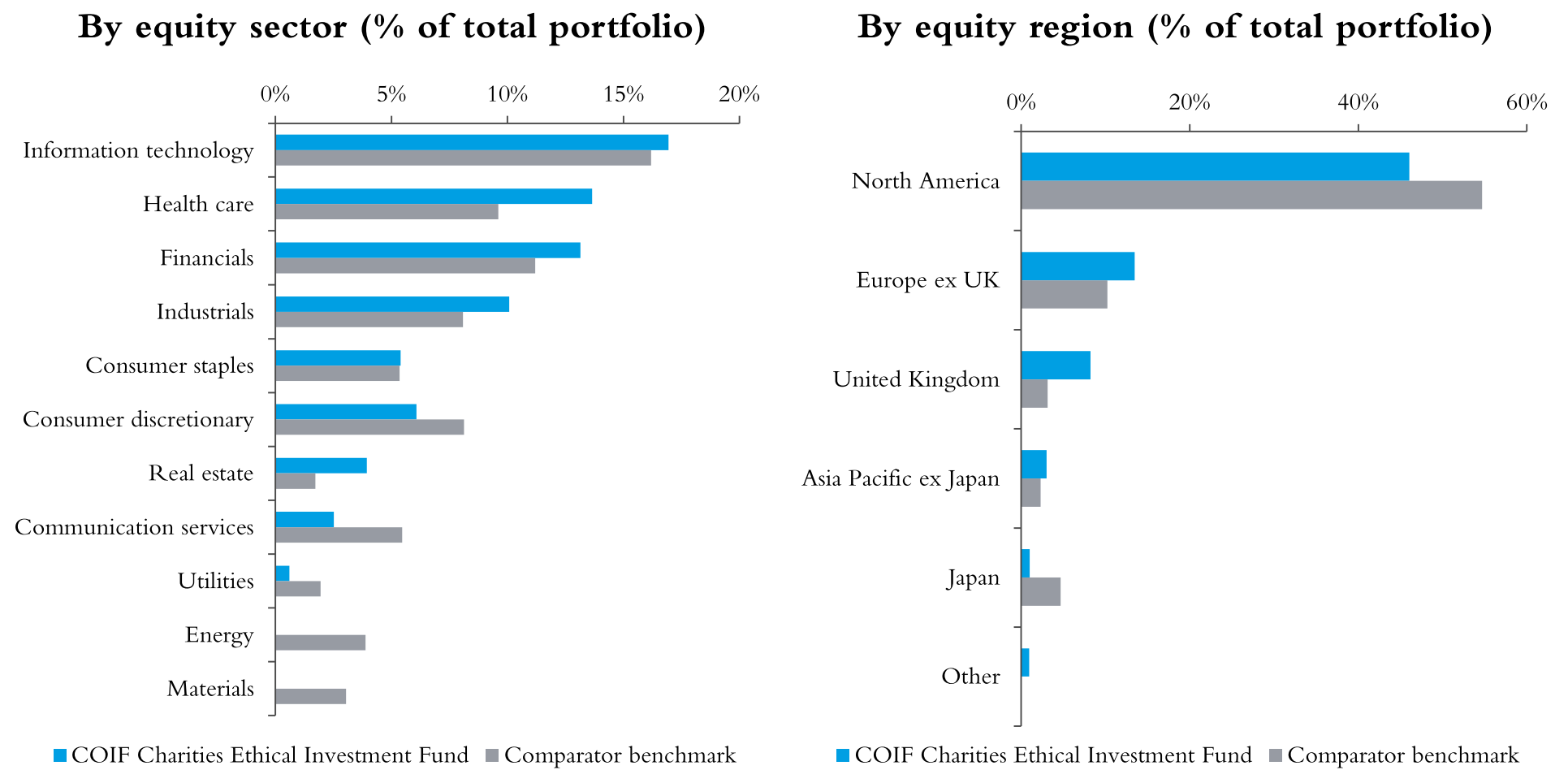
Source: CCLA as at 30 September 2023. ^Projected annual distribution. Projections for annual distribution is subject to change. ★Based upon mid-market price as at 30 September 2023 and a projected annual distribution of 8.61p per unit. Forecast income yields are not guaranteed. Past distribution is not a reliable indicator of future results.

- 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 clear ethical and responsible investment standards
- Use of alternative asset types providing contractual cashflows
- Fund size: £2,054m

Asset allocation

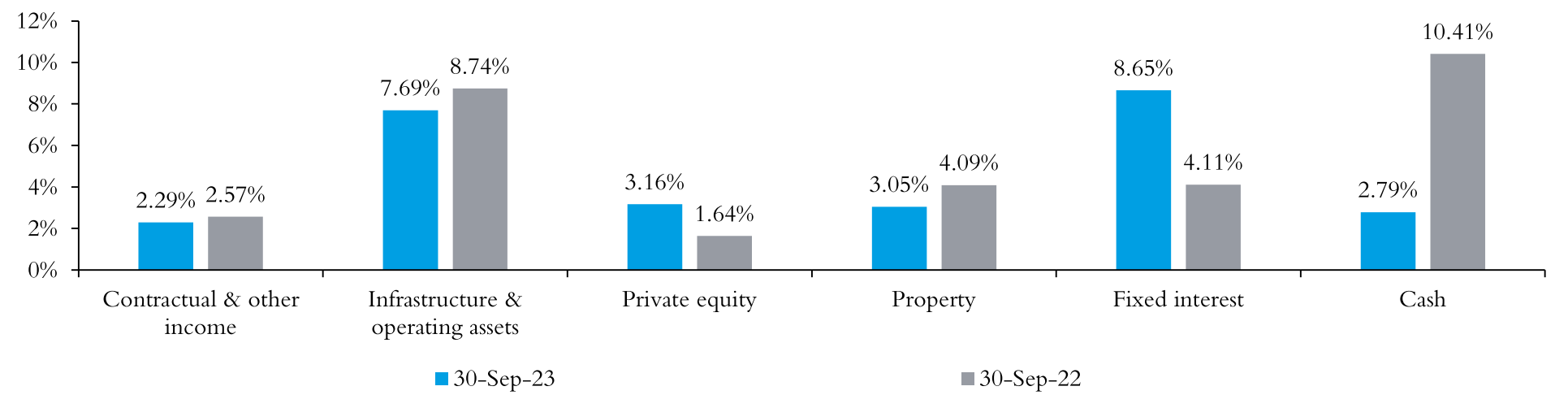


Source: CCLA, as at 30 September 2023. Asset allocation is subject to change.
Infrastructure and operating assets refers to investments that facilitate the functioning of society with the potential for steady cash flows (e.g. energy-related and social). Contractual assets refers to investments that generate contracted cash flows over a specific period and are typically secured against assets.



Source CCLA as at 30 September 2023.
*Equity comparator – MSCI World Index, 75%.
Sector and regional allocation are subject to change.

Changes in non-equity asset allocation



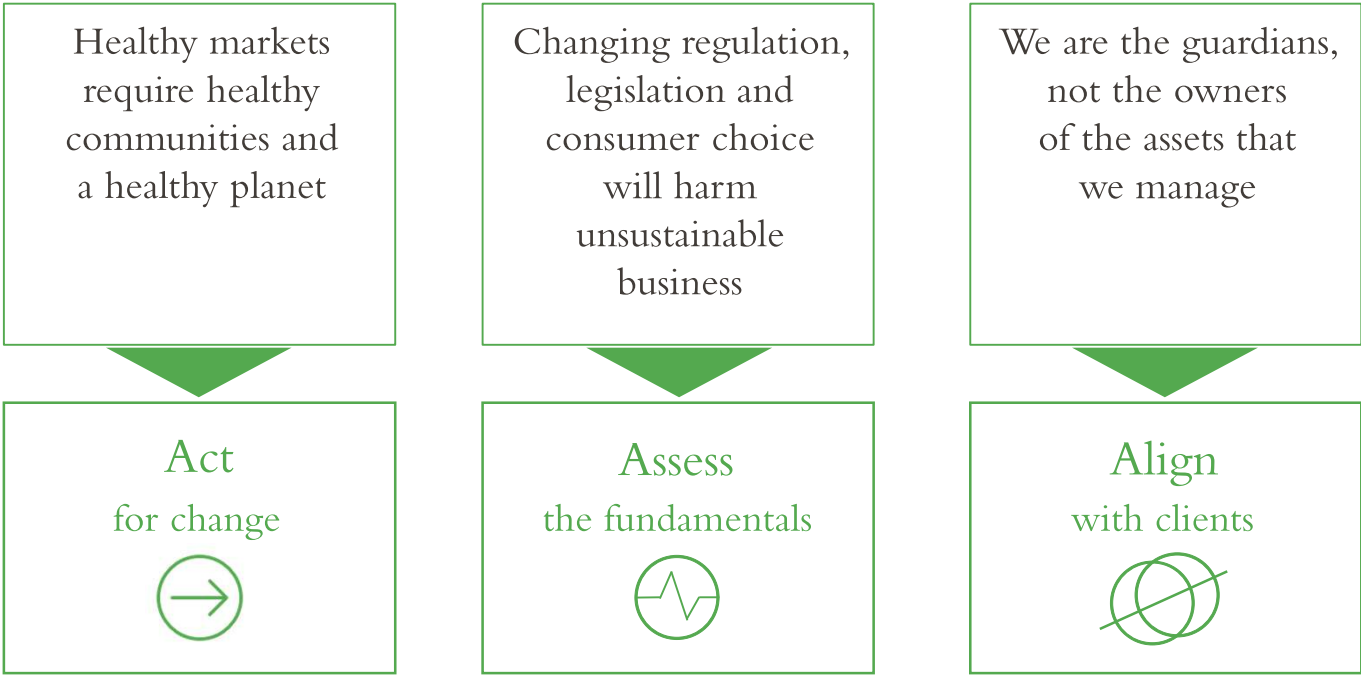
- Allocation to infrastructure decreased as we trimmed alternatives to increase exposure to fixed interest. Within infrastructure, we are biased towards funds with high-inflation linkage (i.e., underlying contracted cashflows that increase with inflation) and an active approach to generating value from projects (e.g., improving operational cashflows).
- Overall exposure to Contractual Income exposure was maintained at the same level.
- Allocation to property fell slightly, reflecting weakness across the logistic focused REITs (i.e., those REITs which have high exposure to industrial warehouses) due to concerns around higher borrowing costs. We also trimmed the COIF Charities Property Fund holding.
- Increased private equity exposure over the period in response to attractive valuation opportunities.
- Cash level was reduced to increase exposure to both equities and fixed interest investments.

Source: CCLA, as at 30 September 2023. 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 (e.g., energy-related and social). Contractual assets refers to investments that generate contracted cash flows over a specific period and are typically secured against assets.

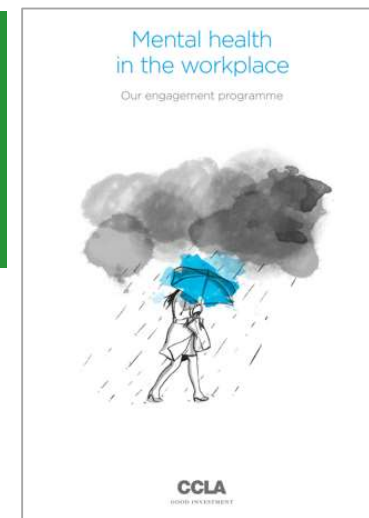
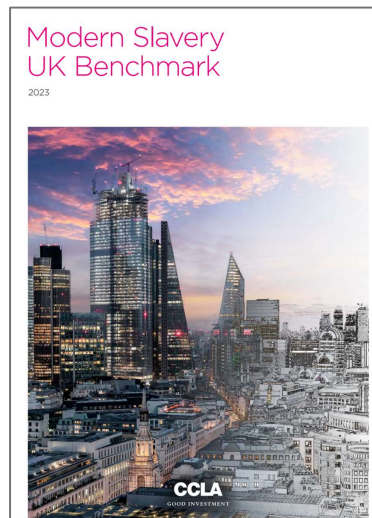
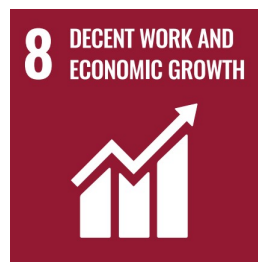
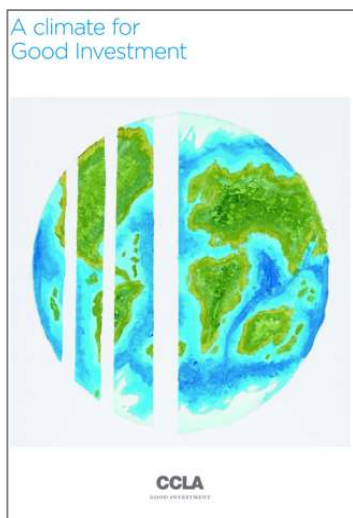
Reference material

Good Investment at CCLA means building long-term financial security, sustainably.

Our framework is built on over 60 years’ experience of investing on behalf of our charity, church and local authority clients.



Beyond portfolio composition, focused on catalysing lasting, real-world, systemic change



Delivering net-zero portfolios through real-world action

- Founder signatory to the Net Zero Asset Manager's Initiative
- Created the 'Aiming for A' initiative, a pre-cursor to Climate Action 100+
- Co-created the Powering Past Coal Alliance Finance Principles

Increasing the effectiveness of business in the fight against modern slavery

- Created 'Find it, Fix it, Prevent it', now supported by £14.6trn AUM
- Engagement that has led to direct action by hospitality and construction companies
- Hired Dame Sara Thornton the ex-Independent Modern Slavery Commissioner

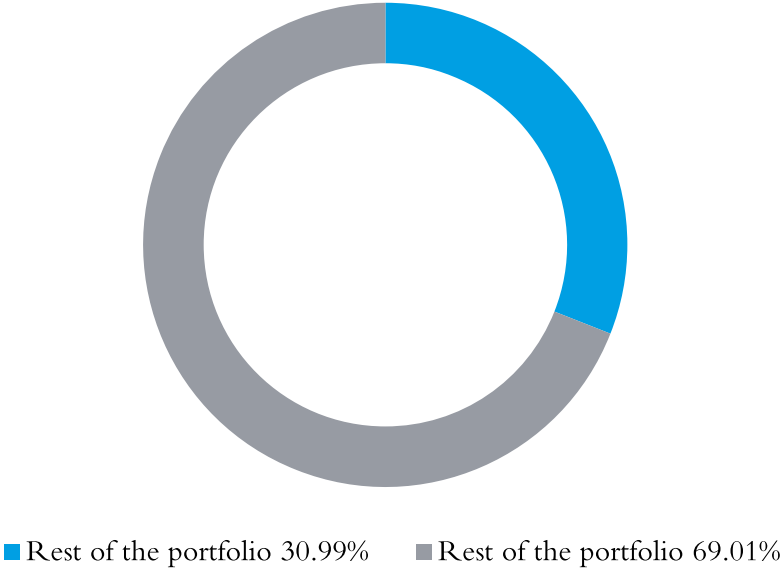
Pushing for better workforce mental health

- Created the CCLA Corporate Mental Health Benchmark
- First public ranking of large companies' approach to protecting mental health
- Early impact includes board discussions, new policies and commitments to act

Annualised returns % as at 31 December 2023	1 year	3 years	5 years	10 years
COIF Charities Ethical Investment Fund (net)	13.16	6.06	9.85	8.80
ARC Steady Growth Charity Index (peer group, net)	7.31	2.89	5.46	5.01
Comparator benchmark	13.28	6.02	7.72	7.01
CPI plus 5% (target benchmark)	8.95	11.54	9.24	7.87

Source: CCLA as at 31 December 2023 (provisional performance and benchmark data). 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. Total return performance is shown net of management fees and expenses on a mid-price basis with gross income reinvested. Past performance is not a reliable indicator of future returns.

COIF Charities Ethical Investment Fund		
Security		Portfolio weight %
UK Treasury 4.5% 07/12/2042		2.90
UK Treasury Gilt 3.25% 22/01/2044		2.86
COIF Charities Property Fund		2.72
Microsoft		2.11
COIF Charities Fixed Interest Fund		1.97
Amazon		1.38
Alphabet		1.37
Unitedhealth		1.35
Relx		1.33
IntercontinentalExchange Group		1.26
Intuit		1.26
Humana		1.24
Partners Group		1.19
Visa		1.17
ICON		1.17
Universal Music Group		1.16
Adobe Inc Com		1.15
Roper Technologies Inc Com		1.14
S&P Global		1.14
TransUnion		1.13



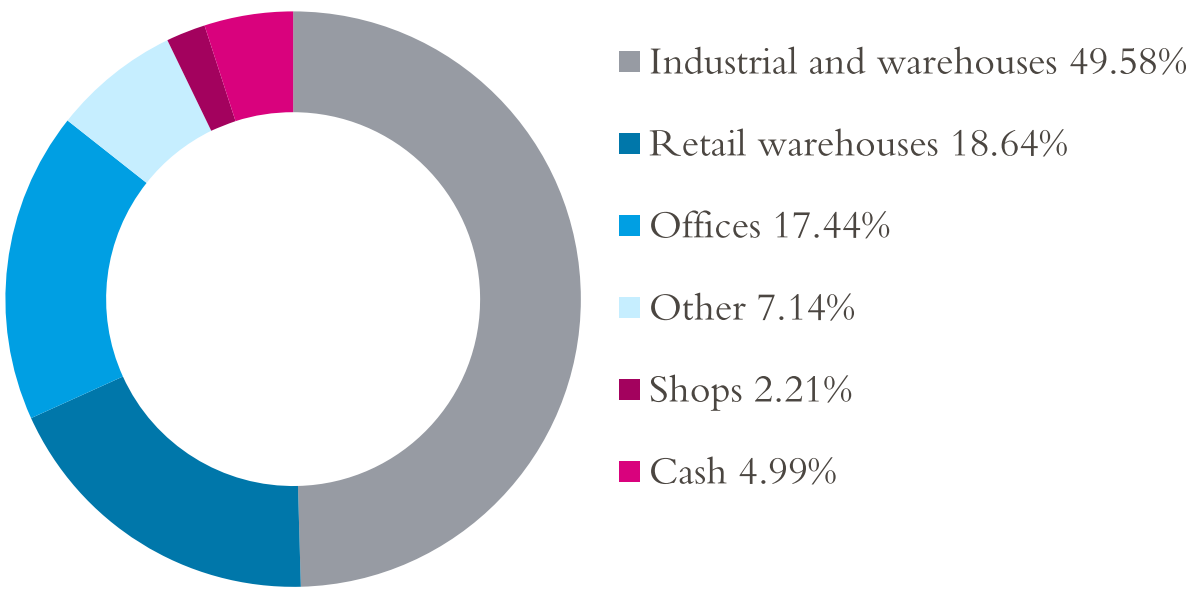
Source: CCLA, as at 30 September 2023. Holdings are subject to change.

The COIF Charities Ethical Investment Fund portfolio is diversified across a broad range of alternative sectors and individual holdings

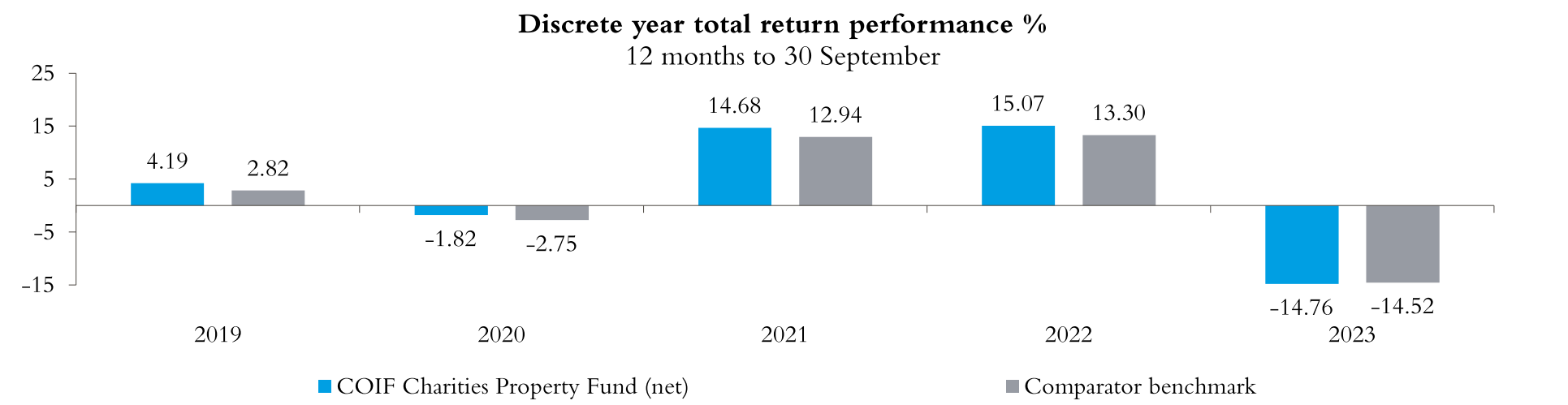
Asset class	Sub-asset class	Portfolio weight %
Contractual and other income	Alternative credit	1.27
	Royalties	1.02
Infrastructure and operating assets	Agriculture and forestry	0.01
	Care home property	0.05
	Energy efficiency	0.52
	General infrastructure	2.40
	Renewable assets	4.40
	Social infrastructure	0.24
	Student accommodation	0.08
	Private equity	3.16
Private equity and other		
Property	Generalist commercial	2.72
	Logistics warehouses	0.33
Total		

Source: CCLA, as at 30 September 2023. 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 (e.g. energy-related and social). Contractual assets refers to investments that generate contracted cash flows over a specific period and are typically secured against assets.

- Seeks to provide high quality, well-diversified commercial property portfolio
- Actively managed to add value
- Focus on delivering an attractive income and capital appreciation
- Fund size £531 million

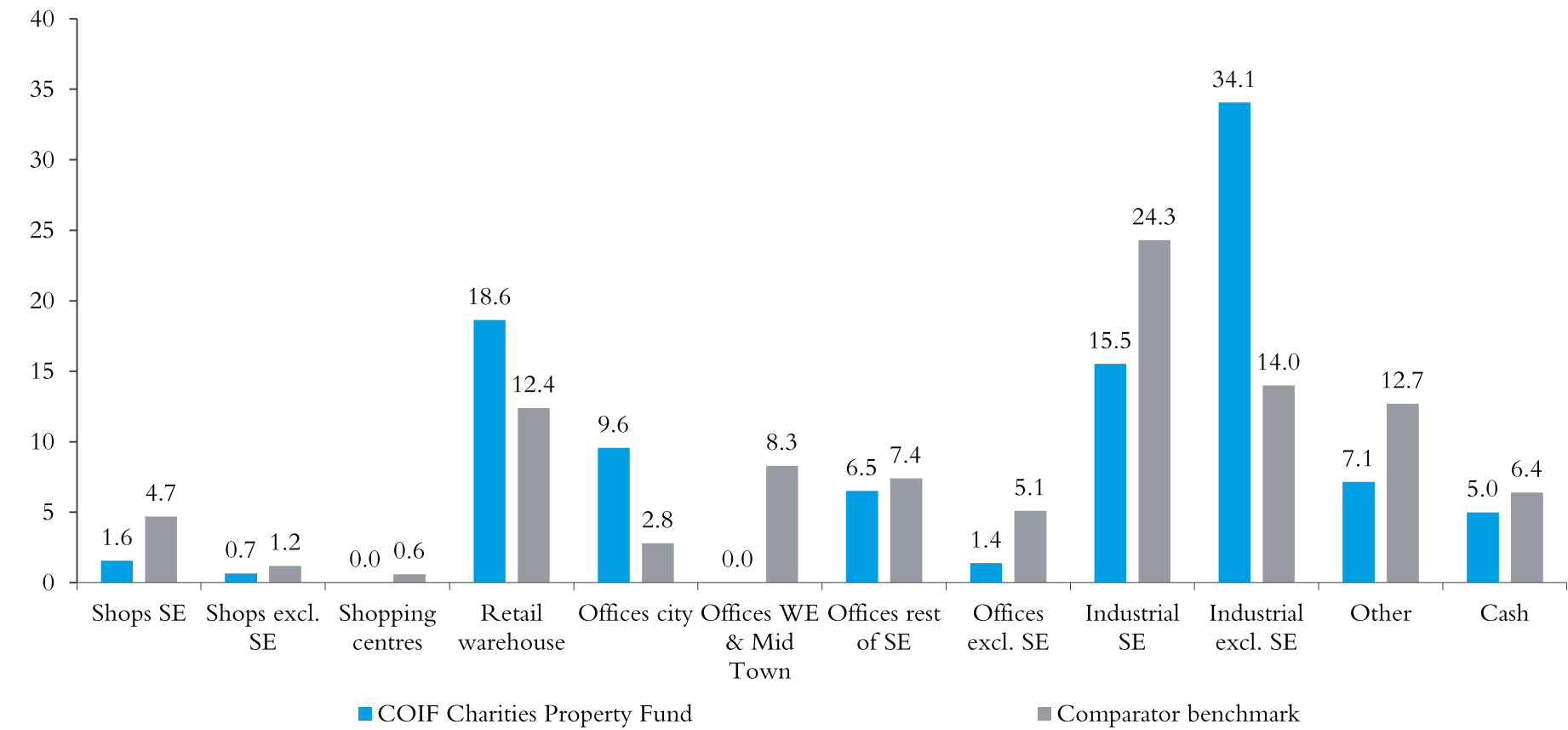


Source: CCLA, as at 30 September 2023. Allocations are subject to change.



Annualised returns % as at 30 September 2023	1 year	3 years	5 years	10 years
COIF Charities Property Fund (net)	-14.76	4.00	2.85	6.87
Comparator benchmark	-14.52	3.03	1.81	6.29

Source: CCLA as at 30 September 2023. Comparator benchmark: MSCI/AREF UK Other Balanced Quarterly Property Fund Index. 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.



Source: CCLA, as at 30 September 2023. Comparator benchmark: MSCI/AREF UK Other Balanced Quarterly Property Fund Index. Asset allocation is subject to change.

CCLA house restrictions:

Climate change	Thermal coal	Thermal coal extraction; ≥5% revenue restriction
		Mining companies that generate >5% of their revenue from the extraction of energy coal, produce more than 10 million metric tonnes of coal, or have plans to expand their coal production
		Electrical utility and infrastructure companies that intend to expand their coal-fired generation capacity
	Tar sands	Tar sands extraction; ≥5% revenue restriction
	Oil and gas	Oil and gas extraction, production, refining; ≥10% revenue restriction
	Any high carbon businesses	Where CCLA does not believe meaningful engagement is possible
	Electrical utilities	Electricity generators that have not demonstrated the ability to align their business with the Paris Climate Change Agreement (as determined by CCLA)
Tobacco		Tobacco production, distribution, retail and licensing of; ≥5% revenue restriction
Cannabis		≥10% of revenue (excluding wholly medical)
Indiscriminate weaponry		Involvement in production of landmines, cluster munitions, chemical and biological weapons
Oppressive regimes★		CCLA will not purchase sovereign debt issued by countries identified as being among the world’s most oppressive★

Require approval by the Investment Committee and may lead to engagement or divestment

Controversy process	ESG ratings	
Investment Committee approval is required for companies that have been involved (whether or not of their own fault) in controversies that are assessed as a ‘fail’ against the UN Global Compact and/or UN Guiding Principles on Business and Human Rights ; companies on the Norges Bank exclusion list for conduct related activities; or companies that have been awarded an MSCI Controversy Score of 0 . Existing holdings that subsequently trigger the rule can be entered into a time-limited engagement or divestment.	MSCI	Securities rated ESG B or below
	CCLA governance score	E or F rating

Source: CCLA. ★Corruption Perception Index from Transparency International, the Freedom in the World 2019 from the Freedom House, the Stockholm International Peace Research Institute for data on UN and EU embargoes, and the Global Restriction Index from the PEW Institute.

The COIF Charities Ethical Investment Fund is managed in accordance with an ethical investment policy that is set through consultation with unitholders. This requires CCLA to dedicate capital to positive investments, engage with companies to achieve positive changes in business practice and implement the following ethical restrictions.

Theme	Further details	COIF Charities Ethical Investment Fund
Climate change	Oil and gas	≥10% revenue from oil and gas extraction, refining or production
	Thermal coal	≥5% revenue from thermal coal extraction
	Oil/tar sands	≥5% revenue from oil/tar sands extraction
	Any high carbon business	Where CCLA does not believe meaningful engagement is possible
	Electrical utilities	Electricity generators that have not demonstrated the ability to align their business with the Paris Climate Change Agreement (as determined by CCLA)
Armaments	Strategic military sales	≥10% revenue from strategic military sales
	Civilian firearms	≥10% revenue from civilian firearms
	Nuclear weapons	Production of whole systems and all strategic parts
	Indiscriminate weaponry	Production of landmines, cluster munitions, chemical or biological weapons
Tobacco		≥10% revenue from production, distribution, retail and licensing of tobacco
Alcohol		≥10% revenue from production, distribution, retail and licensing of alcohol
Adult entertainment		≥10% revenue from production, distribution and retail of adult entertainment
Gambling		≥10% revenue from gambling operations, licensing and servicing
High interest rate lending		≥10% revenue from high interest rate lending
Sanctity of life		Producers of single use abortifacients
Animal testing		Companies involved in animal testing without positive indicators (specific sectors)
Breast milk substitutes (BMS)		Does not meet CCLA’s minimum standard using Access to Nutrition Initiative BMS/CF index scores
ESG minimum standards		All securities rated ESG ‘B’ or below by MSCI require Investment Committee approval
Oppressive regimes		The fund will not purchase sovereign debt from countries identified by CCLA and the Advisory Committee as being among the world’s most oppressive★
Controversies		Companies in breach of the UN Global Compact and MSCI most severe controversies (Investment Committee approval and/or time limited engagement)

Source: CCLA. The majority of ethical restrictions are applied through standard and bespoke data feeds provided by MSCI. ★Corruption Perception Index from Transparency International, the Freedom in the World 2019 from the Freedom House, the Stockholm International Peace Research Institute for data on UN and EU embargoes, and the Global Restriction Index from the PEW Institute.

Investment Leadership Group								
<div>Ben Funnell</div> <div>Head of Investment Solutions</div>			<div>Charlotte Ryland</div> <div>Head of Investments</div>			<div>James Corah</div> <div>Head of Sustainability</div>		
Investment Solutions			Investments			Sustainability		
<div>Stuart Freeman</div> <div>Director, Investments (Cash)</div>	<div>Paul Hannam</div> <div>Head of Property</div>	<div>Tim Matthews</div> <div>COO, Investments</div>	<div>Joseph Hawkes</div> <div>Deputy Head of Investments</div>	<div>Helen Luong</div> <div>Portfolio Manager</div>	<div>Michael Ekaette</div> <div>Director, Investments</div>	<div>David Ellis</div> <div>Director, Governance</div>	<div>Martin Buttle</div> <div>Better Work Lead</div>	<div>Helen Wildsmith</div> <div>Director (Climate Change)</div>
<div>Robert Evans</div> <div>Portfolio Manager (Cash)</div>	<div>Gerard Williams</div> <div>Fund Manager (Property)</div>	<div>Solomon Nevins</div> <div>Portfolio Manager (Alternatives)</div>	<div>Romain Mouquet</div> <div>Portfolio Manager</div>	<div>Gabriel Antonie</div> <div>Global Equity Analyst</div>	<div>Bradley McLean</div> <div>Investment Implementation</div>	<div>Clémence Chatelin</div> <div>Manager, ESG Integration</div>	<div>Josephine Carlsson</div> <div>Church Ethics Lead</div>	<div>Amy Browne</div> <div>Stewardship Lead</div>
<div>Sidhant Mehta</div> <div>Portfolio Manager (Cash)</div>	<div>Matthew Meaden</div> <div>Fund Manager (Property)</div>	<div>Tom Furlong</div> <div>Analyst (Alternatives)</div>	<div>Rob Lapsley</div> <div>Portfolio Manager</div>	<div>Richard Killoran</div> <div>Global Equity Analyst</div>	<div>Michael Fowler</div> <div>Quant Analyst</div>	<div>Sara Thornton</div> <div>Director, Modern Slavery</div>	<div>Andrew Adams</div> <div>ESG Analyst</div>	<div>Sacha Davies</div> <div>Collaborative Engagement Support</div>
<div>Max Burl</div> <div>Investment Support Analyst</div>	<div>Jamie Munday</div> <div>Fund Manager (Property)</div>	<div>Catherine Lett</div> <div>Investment Team Administration</div>	<div>Sean Harper</div> <div>Global Equity Analyst</div>			<div>Tessa Younger</div> <div>Better Environment Lead</div>		

Source: CCLA, as at November 2023.

	Fund management fee (% p.a.)			Ongoing charges figure (% p.a.)	
COIF charity funds	AMC	Other expenses	Total	Cost of underlying investments	Total
Investment Fund	0.60	0.08	0.68	0.22	0.90
Ethical Fund	0.60	0.08	0.68	0.22	0.90
Global Equity Fund	0.75	0.04	0.79	—	0.79
Short Duration Bond Fund	0.22	0.07	0.29	—	0.29
Property Fund	0.65	0.10	0.75	—	0.75
Deposit Fund	0.20	0.05	0.25	—	0.25

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.

CCLA’s multi-asset funds are actively managed to achieve their target benchmark (over time, they aim to achieve an average total return before costs of inflation, as measured by the Consumer Price Index, plus 5%).

To give our clients insight into the progress of their investments over shorter periods we have created the market comparator. This is not a formal target or a constraining benchmark but is intended as a reasonable guide to how the total return of the actively managed funds differs from that of more passive portfolios. It is based on established investment market indices, weighted in proportions which reflect the return objectives of the fund.

To keep the information relevant the comparator benchmark is adjusted from time to time to reflect changes in long term return expectations and any structural changes in the fund. These alterations are reviewed and approved by the COIF board before they are implemented.

- Comparator benchmark: MSCI World Index (75%), Markit iBoxx £ Gilts Index (15%), MSCI UK Monthly Property Index (5%) and Sterling Overnight Index Average (5%).
- 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%.

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. 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 Fixed Interest 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.

Issued by CCLA Investment Management Limited (registered in England & Wales, No. 02183088, at One Angel Lane, London, EC4R 3AB) is authorised and regulated by the Financial Conduct Authority.

CCLA Fund Managers Limited (registered in England & Wales, No. 8735639, at One Angel Lane, London, EC4R 3AB) is authorised and regulated by the Financial Conduct Authority and is the manager of the COIF Charities funds (registered charity numbers 218873, 803610, 1093084, 1121433 and 1132054).

All names, logos and brands shown in this document are the property of their respective owners and do not imply endorsement. These have been used for the purposes of this presentation only and its intended audience. This document is not for wider distribution.

For information about how we obtain and use your personal data please see our privacy policy at www.ccla.co.uk/privacy-notice.



www.ccla.co.uk

CCLA Investment Management Limited (registered in England & Wales, No. 2183088) and CCLA Fund Managers Limited (registered in England & Wales, No. 8735639) are authorised and regulated by the Financial Conduct Authority.
Registered address: One Angel Lane, London, EC4R 3AB.



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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	22 January 2024
CYFARFOD O: MEETING OF:	Charitable Funds Committee
TEITL YR ADRODDIAD: TITLE OF REPORT:	Committee Self-Assessment 2023
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Director of Corporate Governance
SWYDDOG ADRODD: REPORTING OFFICER:	Head of Board Business

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

The purpose of this report is to discuss the findings from the annual self-assessment process in respect of the Charitable Funds Committee.

Cefndir / Background

As part of the Health Board's statutory requirements, each Committee of the Board is required to conduct an annual self-evaluation of committee effectiveness. All Board Members are required to complete a self-assessment for each Committee on which they are a member, to determine its effectiveness and ability to carry out its responsibilities.

The outcome of the assessment will enable the Committee to identify areas of development and focus for the coming year, well as any development of a comprehensive Board Business Improvement Plan.

At the meeting held on 9th November 2023 the Committee agreed to undertake the self- assessment.

Asesiad / Assessment

The self-assessment for the Charitable Funds Committee was completed throughout November 2023 by both Committee members and those individuals who regularly support the work of the Committee. The self-assessment template is included in Appendix A, and the completed response are included in Appendix B

Following completion of the self-assessments, the sections were analysed to provide a summary of the response and recommendation for improvements for each section. The suggestion will help the development of a comprehensive Board Improvement Plan.

The questionnaire was distributed to both committee members and those who regularly support the work of this committee. Seven responses were received to the questionnaire.

Summary of Individual Sections

Section 1 Committee Processes: Composition, Establishment, and Ways of Working

The majority of respondents agreed that committee processes are well executed, and that the overall co-ordination and management of the meeting is consistent and well managed to allow the Committee to conduct its responsibilities.

There were some opportunities for strengthening in particular these included:

- Better communication to members between meetings to be considered
- Induction training for new members before/ at the time of joining the Committee and the development of a comprehensive professional learning offer
- Members to have a greater balance of view between wellbeing of staff and patients and finances.
- Improve transition arrangements when Chairs of committees change.
- Inclusion of a standard agenda item to facilitate Committee Members reflection of the meeting held.

Specific Responses for Charitable Funds Committee Improvement

The table below details the specific areas where suggestions for improving the Committee's effectiveness were made.

Specific Actions to deliver improvements in the Committee's effectiveness			
Section	Area of Focus requiring attention	How & by When	Action Holder
1. Committee Processes: Composition, Establishment, and Ways of Working	<ul style="list-style-type: none"> A programme of training for independent members to be developed Agendas to include an item on reflection upon the meeting Improved transition arrangements when the chairing of the committee changes 	All actions to inform the development of an overarching Board Business Improvement Plan – March 2024 for Board approval	Director of Corporate Governance with Head of Board Business

Overall Assessment of Effectiveness

To determine the overall effectiveness of the Committee, a standardised scoring matrix has been used to assess each Committee; this is in accordance with the Well-Led Framework for Leadership and Governance Developmental Reviews and is shown below.

Overall Assessment		
Score	Definition	Description
1	Room for improvement	The Charitable Funds Committee is falling short of requirements and should consider how it can work towards becoming more effective in this area
2	Meeting standards	The Charitable Funds Committee is performing to the required standard in this area. There may be room for improvement, but the Charitable Funds Committee can be seen to be discharging its responsibilities effectively.
3	Excelling	This is an area where the Charitable Funds Committee is performing beyond the standard expectations and is a real area of strength when it comes to exercising its responsibilities.

The majority of respondents (6 (86%)) confirmed that the Committee was meeting the standard for effectiveness and one respondent stated that the Committee's was performing beyond the standard expectations. No bespoke comments were made by respondents explaining their personal perspective for providing these judgements.

Overall Assurance Rating

The table below provides a breakdown of the responses to each section, as well as an overall assurance rating against the committee's effectiveness.

Section	No of Questions	Number of Possible Responses	Number of responses 'Yes'	Number of responses 'No'	Number that 'Didn't Answer'	Overall Assurance Rating
1	23	161	150	8	3	
Total	23	161	150	8	3	

In conclusion, the results of the individual self-assessment, combined with the analysis of the seven self-assessments and 86% determined that the Committee is effective and meeting the standards.

Rating	Definition	Evidence
2	Meeting standards	The Charitable Funds Committee is performing to the required standard in this area. There may be room for improvement, but the Charitable Funds Committee can be seen to be discharging its responsibilities effectively.

These findings will be used to inform a comprehensive annual assessment of the Board's effectiveness. An overarching Board Business Improvement Plan will be developed, informed by the assessment of the Board and its Committees and other feedback such as Structured Assessment, for delivery in 2024/25. The effectiveness of the Board's Business function is reported through the Annual Governance Statement, enabling a focus on the work undertaken with the Board's Committees, interconnectedness of the committees and escalation to the Board, as well as the culture between the Health Board and its auditors, regulators and partners.

Argymhelliad / Recommendation

The Committee is asked to:

- **NOTE** the performance information contained within the report,
- **CONSIDER** the proposed actions to address those areas as requiring further improvement, and;
- **NOTE** the proposed improvement actions to be taken forward within the Committee Forward Plan for 2024/25 or the wider Board Business Improvement Plan.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Corfforaethol a Sgôr Cyfredol: Corporate Risk Register Reference and Score:	The self-assessment of committee effectiveness ensures risk is appropriately monitored and managed.
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	Not Applicable 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	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
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	None

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

<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>Collaboration - Acting in collaboration with any other person (or different parts of the body itself) that could help the body to meet its well-being objectives</p> <p>Choose an item.</p>
--	--

Charitable Funds Committee Self-Assessment Checklist

Introduction

The self-assessment tool is a way for our Charitable Funds Committee (CFC) to develop its effectiveness. The Board and its sub-Committees should aim to assess their effectiveness against these questions on an annual basis.

To gain an overall view of CFC effectiveness, it is important that the individual views of all members are considered as a whole, therefore, each area of the effectiveness tool allows space for comments. This provides an important opportunity to expand on any considerations relating to that section of the effectiveness tool and to highlight any concerns about the Committee's performance.

At the end of the self-assessment there is an opportunity for you to provide an overall score on the Committee's effectiveness using the scoring scale below.

Score	Measure	Description
1	Room for improvement	The CFC is falling short of requirements and should consider how it can work towards becoming more effective in this area
2	Meeting standards	The CFC is performing to the required standard in this area. There may be room for improvement, but the CFC can be seen to be discharging its responsibilities effectively.
3	Excelling	This is an area where the CFC is performing beyond the standard expectations and is a real area of strength when it comes to exercising its responsibilities.

The completed self-assessments will enable the Corporate Governance Team to: -

1. generate an overall view of CFC effectiveness; and
2. drill down and analyse specific areas of strength or improvement on a section, sub-section, and individual question level.

The results of which will be reported to the Committee in January 2024 and used to inform the Annual Accountability Report and Governance Statement.

Section 1 - Committee Processes: Composition, Establishment, and Ways of Working

Question		Response Yes / No	Comments	Suggested Improvement Actions
1	Does the Committee have written terms of reference and have they been approved by the Board?			
2	Are the terms of reference reviewed annually?			
3	The number of meetings held during the year is sufficient to allow the Committee to perform as effectively as possible?			
4	Has the Committee been quorate for each meeting this year?			
5	In terms of numbers, membership of the Committee is sufficient to discharge its responsibilities?			
6	Committee members understand the role of the Board as a Trustee and the responsibilities discharged to the committee?			
7	Members who have recently joined the CFC have been provided with induction training to help them understand their role and the organisation?			
8	Committee members understand their responsibilities regarding identifying, declaring, and resolving conflicts of interest?			
9	The Committee has an established a plan of matters to be dealt with across the year?			
10	Does the Committee consider issues at the right time and in the right level of detail?			

11	The Committee ensures that the relevant executive director attends meetings to enable it to understand the reports and information it receives?			
12	Are the Committee's papers distributed in sufficient time for members to give them due consideration?			
13	The quality of the Committee's papers received allows Committee members to perform their roles effectively?			
14	Committee meetings are chaired effectively?			
15	The Committee chair allows debate to flow freely and does not assert his/her own view too strongly?			
16	The Committee environment enables people to express their views, doubts, and opinions?			
17	Each agenda item is 'closed off' appropriately so that the Committee is clear on the conclusion; who is doing what, when and how and how it is being monitored?			
18	At the end of each meeting the Committee discuss the outcomes and reflect on decisions made and what worked well, not so well etc?			
19	Decisions and actions are implemented in line with the timescale agreed?			
20	Are the outcomes of each meeting and any issues of concern reported to the next Board meeting?			

21	Does the Committee prepare an annual report on its work and performance for the Board?			
22	The results of the annual self-assessment are used to inform and influence succession planning and improve effectiveness.			
23	The self-assessment is objective and rigorous enough for meaningful conclusions to be drawn?			

Overall Assessment		
Score	Measure	Description
1	Room for improvement	The CFC is falling short of requirements and should consider how it can work towards becoming more effective in this area
2	Meeting standards	The CFC is performing to the required standard in this area. There may be room for improvement, but the CFC can be seen to be discharging its responsibilities effectively.
3	Excelling	This is an area where the CFC is performing beyond the standard expectations and is a real area of strength when it comes to exercising its responsibilities.

Comments:

Section 1								
ID	Start time	Completion time	Email	Name	Last modified time	1. Does the Committee have writt 1a. Comments	1b. Suggested Improvement Actio	
1	11/13/23 14:03:05	11/13/23 14:08:56	anonymous			Yes		
2	11/14/23 10:26:31	11/14/23 10:33:46	anonymous			Yes		
3	11/28/23 22:42:13	11/28/23 22:48:01	anonymous			Yes		
4	11/29/23 1:02:41	11/29/23 9:38:25	anonymous			Yes	The Charitable Funds Teams checks this against Healthcare Financial Management Association (HFMA) guidelines.	None
5	12/7/23 9:47:23	12/7/23 9:49:51	anonymous			Yes		
6	12/8/23 14:11:15	12/8/23 14:17:00	anonymous			Yes	As far as I'm aware there are ToR	
7	12/8/23 15:59:03	12/8/23 16:19:14	anonymous			Yes		
Yes							7	
No							0	
Didn't Answer							0	

2. Are the terms of reference reviewed annually?		2a. Comments	2b. Suggested Improvement Action	3. The number of meetings held during the year	3a. Comments	3b. Suggested Improvement Action	4. Has the Committee been quorate at all meetings?
Yes				Yes			Yes
Yes				Yes			Yes
Yes				Yes			Yes
Yes	In line with the Committee's Workplan	None		Yes	4 meetings are planned each year, but sometimes only 3 have gone ahead	An agreed plan could be put in place as to the type of items that could be considered for circulation to members between meetings.	Yes
Yes				Yes			Yes
Yes				Yes			Yes
Yes	I think these are included on the annual workplan?			Yes			Yes
Yes				Yes			Yes
	7				7		7
	0				0		0
	0				0		0

4a. Comments	4b. Suggested Improvement Actio	5. In terms of numbers, members	5a. Comments	5b. Suggested Improvement Actio	6. Committee members understar	6a. Comments
		Yes		Yes		
		Yes		Yes		
		Yes		Yes		
None	None	Yes	None	None	Yes	None
		Yes		Yes		
		Yes		Yes		
		7		7		
		0		0		
		0		0		
						I feel that some members consider finance over the wellbeing of staff and pts sometimes and this makes for some unnecessary time wasting during the meeting.

6b. Suggested Improvement Action		7. Members who have recently joined	7a. Comments	7b. Suggested improvement action	8. Committee members understand	8a. Comments	8b. Suggested improvement action
		Yes	New chair met with the charitable funds team and a pack of information was provided to him.		Yes		
		No	Having joined recently, I've not received any specific formal training as such but sufficient handover to enable effective contribution		Yes		
		Yes			Yes		
I am not sure when new non Executives are appointed to the Board or when the position is advertised if the existence of the charity is mentioned.	Yes		The Chair - definitely, provided by Charitable Funds - not sure of others.	A formal process should be put in place recording who is providing this training and when it is provided.	Yes	None	None
		Yes			Yes		
		Yes	As far as I'm aware, this has occurred		Yes		
New members should understand their role on this committee before sitting on it.	No		I am not aware that training is provided for this committee.		Yes		
			5			7	
			2			0	
			0			0	

9. The Committee has an established	9a. Comments	9b. Suggested improvement action	10. Does the Committee consider	10a. Comments	10b. Suggested improvement action	11. The Committee ensures that the
Yes			Yes			Yes
Yes			Yes			Yes
Yes			Yes			Yes
Yes	Annual workplan	None	Yes	None	None	No
Yes			Yes			Yes
Yes	There is an annual workplan		Yes			Yes
Yes			Yes			Yes
7			7			6
0			0			1
0			0			0

13b. Suggested improvement activity 14. Committee meetings are chaired by 14a. Comments		14b. Suggested improvement activity 15. The Committee chair allows discussion of 15a. Comments		15b. Suggested improvement activity	
Yes	Focussed and good timekeeping yet still allowing adequate debate	Yes			
Yes		Yes			
Yes	As the new chair of this committee, I do my best to ensure inclusive decision making. Feedback to date has been positive.	Yes			
None	Yes	None	None	Yes	None
Yes		Yes			
Yes		Yes			
Yes	The handover from chair to chair could be smoother. I don't believe they discuss future plans before handing over to a new chair.	Yes			
Yes	7	Yes	7		
	0		0		
	0		0		

16. The Committee environment € 16a. Comments			16b. Suggested improvement acti			17. Each agenda item is 'closed off17a. Comments			17b. Suggested improvement acti			18. At the end of each meeting th			
Yes						Yes									
Yes						Yes						Yes			
Yes						Yes						Yes			
Yes			None	None		Yes			None	None		No			
Yes						Yes						No			
Yes						Yes						Yes			
Yes						Yes						No			
7						7						3			
0						0						3			
0						0						1			

18a. Comments	18b. Suggested improvement acti	19. Decisions and actions are impl	19a. Comments	19b. Suggested improvement acti	20. Are the outcomes of each mee	20a. Comments
Not aware if this happens		Yes				Don't know
Informally yes (but no formal slot on agenda)- but space always given within meeting to discuss any matters arising		Yes			Yes	
		Yes			Yes	
A recap yes but I dont believe they reflect on what worked well etc	None	Yes	Reasons are given to members if something has not been achieved.	None	Yes	None
		Yes			Yes	
		Yes			Yes	As far as I'm aware this occurs
Not sure time would allow this to happen.		Yes			Yes	
		7			6	
		0			0	
		0			1	

20b. Suggested improvement activity	21. Does the Committee prepare a report on the annual self-review?	21a. Comments	21b. Suggested improvement activity	22. The results of the annual self-review	22a. Comments	22b. Suggested improvement activity
Yes		Annual report prepared along with the accounts and considered in detail by the Committee			First one	
Yes			Yes			
Yes			Yes			
None	No	There is an Annual Report produced for the Charity but not an annual report for the Committee on its own.	None	Yes	None	None
Yes			Yes			
Yes		As far as I'm aware this happens	Yes		As far as I'm aware	
Yes			No		I am not sure if this is the case due to the nature of this committee.	
	6			5		
	1			1		
	0			1		

23. The self-assessment is objective			23a. Comments	23b. Suggested improvement actions	Question	Score
			Yes			Meeting standards - The CFC is performing to the required standard in this area. There may be room for improvement, but the CFC can be seen to be discharging its responsibilities effectively.
					Meeting standards - The CFC is performing to the required standard in this area. There may be room for improvement, but the CFC can be seen to be discharging its responsibilities effectively.	
					Meeting standards - The CFC is performing to the required standard in this area. There may be room for improvement, but the CFC can be seen to be discharging its responsibilities effectively.	
			Yes	None	None	Meeting standards - The CFC is performing to the required standard in this area. There may be room for improvement, but the CFC can be seen to be discharging its responsibilities effectively.
			Yes			Excelling - This is an area where the CFC is performing beyond the standard expectations and is a real area of strength when it comes to exercising its responsibilities.
					Meeting standards - The CFC is performing to the required standard in this area. There may be room for improvement, but the CFC can be seen to be discharging its responsibilities effectively.	
					Meeting standards - The CFC is performing to the required standard in this area. There may be room for improvement, but the CFC can be seen to be discharging its responsibilities effectively.	
				7		
				0		
				0		



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Continence Promotion for inpatients living with Dementia Improvement Programme

Project Charter

August 2023 v1

Project charter

Continence Promotion for inpatients living with Dementia programme 2023.

Aneurin Bevan University Health Board

1. Project description (defines what)

Research has shown that continence care for patients living with dementia in hospitals does not always lead to a positive patient experience or can even lead to risk of deconditioning. Existing 'Pad Cultures' often exist in ward settings for older people and those living with dementia, where patients are asked to use incontinence pads inappropriately, rather than being encouraged and supported to use the toilet. Not only does this practice compromise patient dignity leading to a poor patient experience but furthermore may contribute to reduced continence and reduced mobility.

Continence Promotion is considered best practice for Inpatients Living with Dementia Programme, and it aims to address the shortfalls in continence care. Clinical staff are committed to ensuring that patients receive effective and dignified continence care, but current systems in place may often make this difficult. This programme will employ a Quality Improvement Approach which will involve understanding the current problems and barriers and finding solutions.

2. Background – What is the rationale for conducting the project?

The acute hospital setting has become a key site of care for people living with dementia. People living with dementia are one of the largest populations in our hospitals, with the Department of Health and Social Care recognising that 25–50% of all acute hospital admissions are people who are also living with dementia. However, people living with dementia are a highly vulnerable group in the hospital setting and, following an acute admission, their functional abilities can deteriorate quickly and significantly. Another term is deconditioning this problem identified constitutes loss of continence status and mobility and impact on dignity for the individual. The research below was conducted to explore what is happening and what constitutes 'good continence care'.

This recent research study (Understanding approaches to continence care for people living with dementia in acute hospital settings, (*Katie Featherstone, Andy Northcott, Paula Boddington, Deborah Edwards, Sofia Vougioukalou, Sue Bale, Karen Harrison Dening, Karen Logan, Rosie Tope, Daniel Kelly, Aled Jones, Jackie Askey, Jane Harden*), has identified that a pad culture exists on wards within ABUHB.

The study's focus was continence care, a common, but poorly understood, aspect of everyday care for people living with dementia during an acute admission. The study explored: what caring practices are observable when interacting with this patient group? How do ward teams respond to and manage continence needs? What informs these approaches? What are staff doing and why?

This ethnography study involved in-depth evidence-based analysis of everyday care to examine how ward staff responded to the continence care needs of people living with dementia and to follow the consequences of their actions.

This ethnography was carried out for 180 days, across 12 months, in six wards in three hospitals across England and Wales (ABUHB) that were purposefully selected to represent a range of hospital types, geographies and socioeconomic catchments.

In addition to general observations, 108 individuals participated directly in this study, contributing to 562 ethnographic interviews. Ten detailed case studies were also undertaken with people living with dementia.

This study identified ‘pad cultures’ as an embedded practice on these acute wards. There was routine use of continence pads among people living with dementia (regardless of continence status).

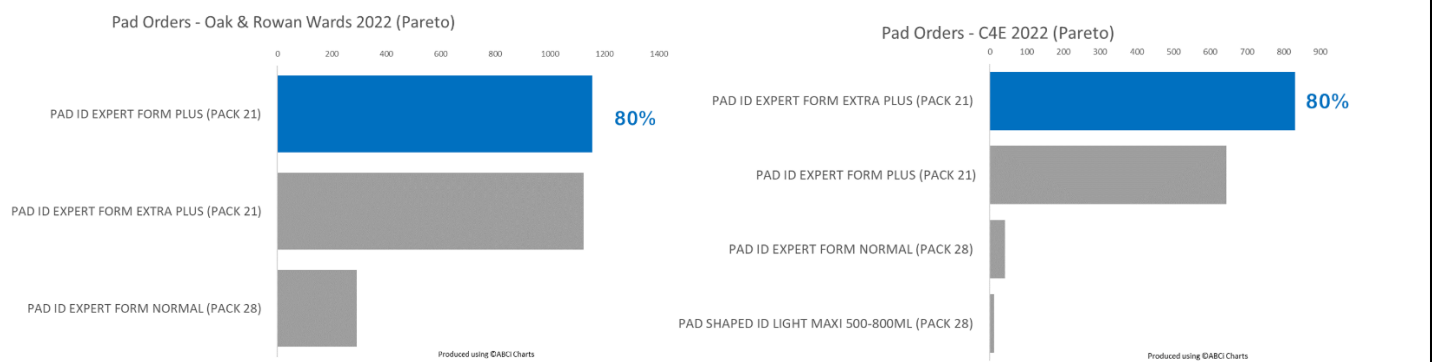
The use of continence pads should be a precautionary strategy, the rationale being to provide safeguards, ensure containment and prevent ‘accidents or incontinence episodes, understanding that patients living with dementia not only will wear pads, but will use them only when required.

Future work: The findings of the study will inform the development of education and training and the necessary improvements that need to be made at the interactional and organisational level.

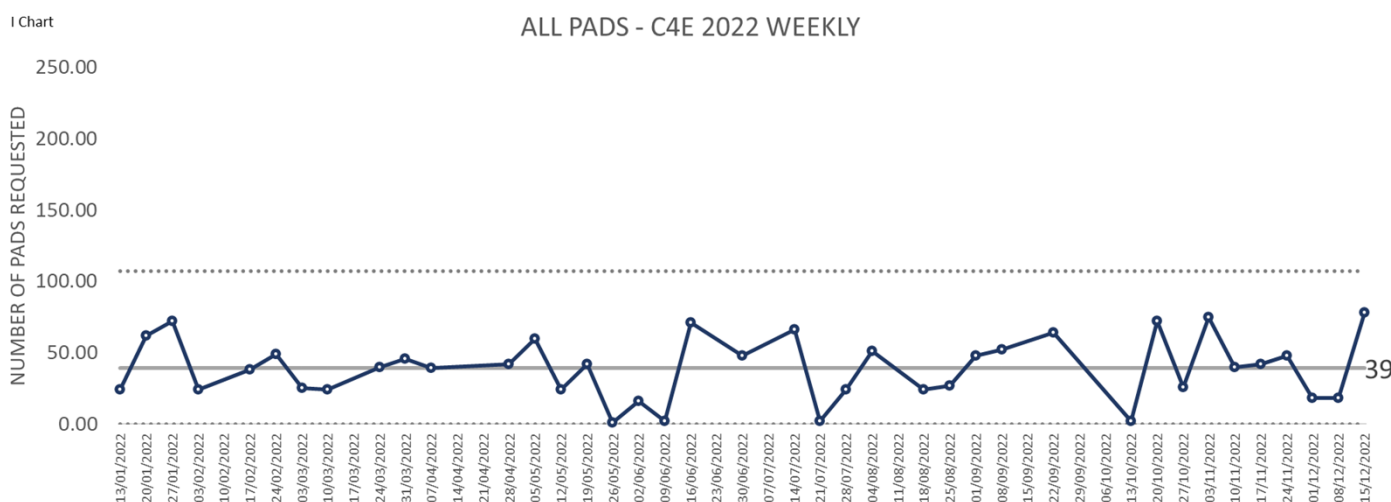
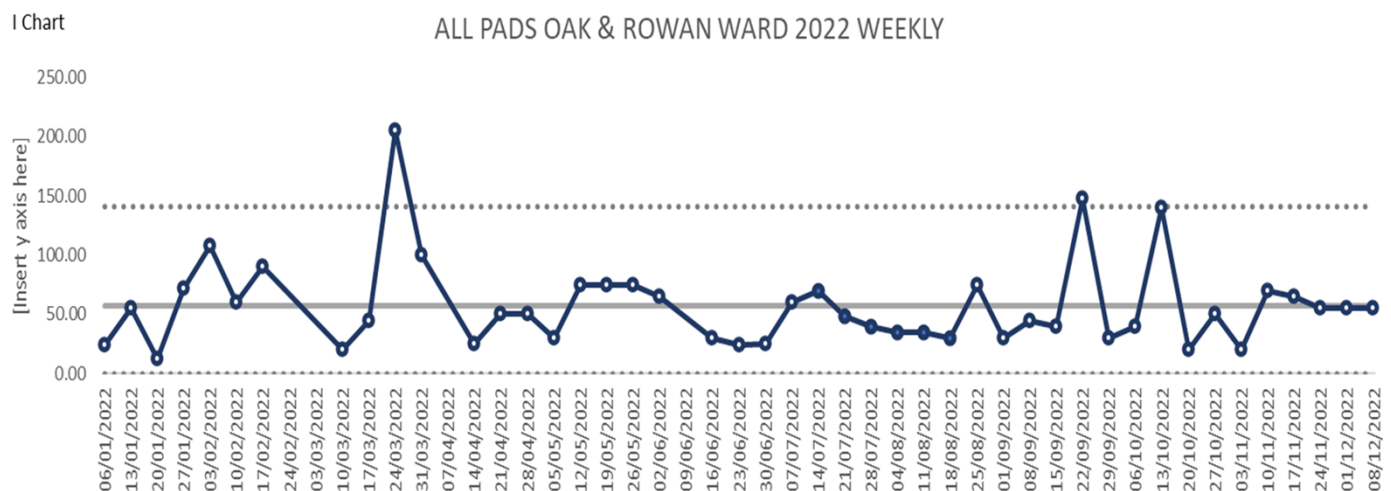
3. Problem statement – defining your problem

The conclusion of the study above helps us to articulate the problem that the improvement programme is aiming to address. Whilst ‘pad cultures’ reduced the number of unscheduled interruptions to the timetabled work on wards, it has had significant impacts on people living with dementia and, in turn, wider consequences for these individuals and their identities. Ward staff described feeling abandoned with the responsibility of caring for large numbers of people living with dementia, believing that it was impossible to work in other ways to support their patient’s continence. This study provides important evidence that undignified continence care of people living with dementia now needs to be challenged and addressed as a priority within ABUHB.

The pareto charts below demonstrate that pad usage on wards at ABUHB default to using the largest pads when a smaller pad or no pad may be more appropriate for certain patients.



The data below is based around procurement of pads on each ward. This shows that pad usage is relatively stable across wards, but could be reduced.

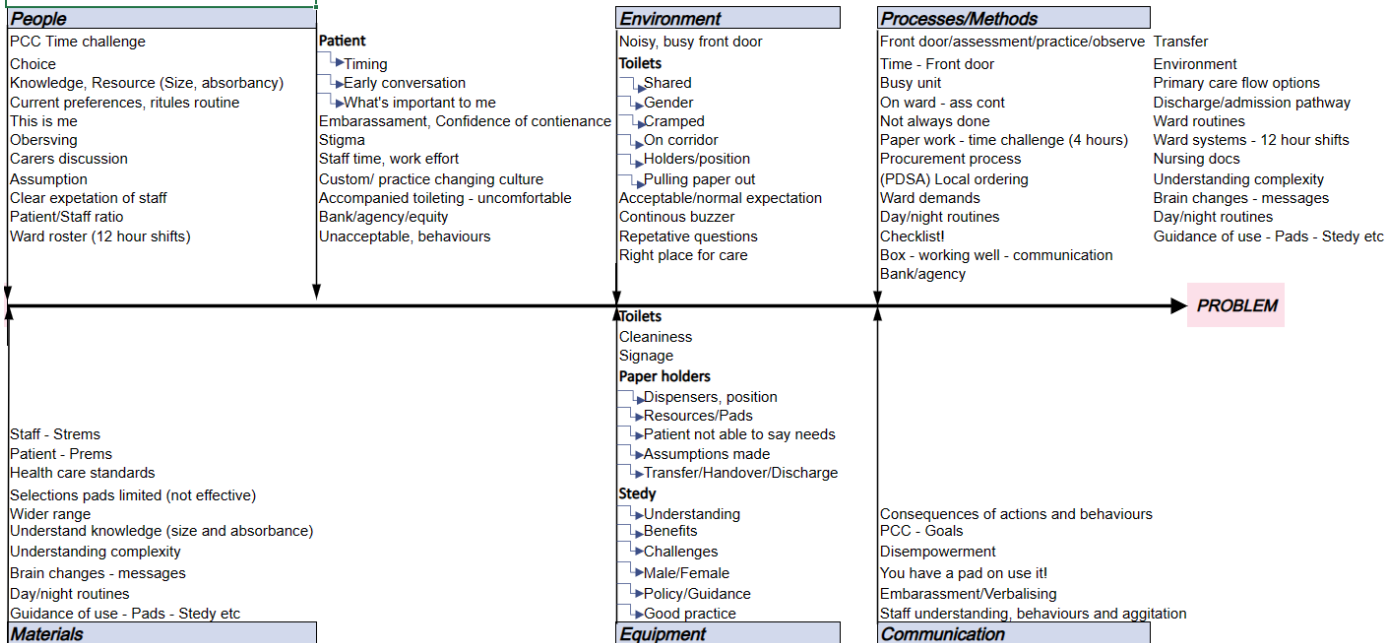


Whilst the common practice of using incontinence pads inappropriately is part of this improvement programme, the issues faced by ward staff are wider than reducing the use of incontinence pads. A session was held with staff across community and acute wards at ABUHB to understand the problems that staff are facing and generate ideas for change. The fishbone below highlights the issues that staff are facing in providing effective and person-centred continence care for inpatients living with dementia.

The predominant problems that were highlighted through this exercise were:

- Staff knowledge around the use of appropriate pads.
- Effective continence assessment on admission.
- Enabling patients to use the toilets and dementia friendly toilet facilities.
- Effects of medication/nutrition on continence.
- Understanding patient preferences and habits around continence.
- Recognition of a patient's need to use the toilet.
- Effective communication of continence status, especially at handover.

Delivery of Dignified Continence Care and Toileting



4. Involving others – Stakeholders and improvement team

A small Faculty oversees the Continence Promotion for inpatients living with Dementia programme and is structured as seen below. The Faculty is responsible for setting the direction of the programme, setting up a measurement strategy, change package and supporting teams in terms of coaching and any training needs.

Three wards are taking part in the pilot phase of the programme:

- C4E – Acute ward in Royal Gwent Hospital
- Oak Ward – Community Ward in County Hospital
- Rowan Ward – Community Ward in County Hospital

Executive Sponsor	Jennifer Winslade (Nurse Director)
Project Lead/Content Specialist (Bladder and Bowel)	Karen Logan (Consultant Nurse), Victoria Coughlin (ANP)
Content Specialist (Dementia)	Amanda Whent (Lead Nurse), Donna Wigmore
Senior Nurses	Helen Price, Alison Jenkins
Ward Managers/Teams	Kate Ceretti (Rowan), Rebecca Davies (Oak), Louise Dyer (C4E)
Person Centred Care Team	Tanya Strange (Head), Joanne Hook (Senior Nurse)
PROMS/PREMS	Daniel Davies (Value Based Health Care)
Improvement Advisor/Coach	Rachel Trask (Improvement Lead)
Data support	Mandy Jeffries (Service Improvement Manager)
Research Link	Professor Katie Featherstone (University of West London)

5. Aim – What are you trying to accomplish?

The aim of the programme is to improve patient experience & effectiveness of continence promotion strategies for people living with dementia in hospital settings, with specific objectives to:

- Reduce the inappropriate use of incontinence pads.
- Enable patients to use the toilet facilities.
- Provide person-centred support around continence.
- Effective communication of continence status.
- Maintenance of continence during admission.

6. Expected outcomes and benefits

This is a project that will benefit all older patients, but especially elderly patients living with dementia in the long term. This type of service development sits outside of core business. KL has been appointed to lead and support the pilot project. There is also potential for further research.

- This project will improve the patient experience and quality of life, maintain bladder/bowel function/ normality of continence status during a hospital stay, help restore dignity.
- Reduce harm and bias towards elderly patients: rendering them incontinent by expecting them to use pads and preventing them from using the toilet as normal, causes distress and is a breach of human rights.
- There is potential to prevent the deconditioning of elderly people that can occur during an acute and sometimes lengthy stay to hospital.
- Preventing deconditioning and enable people to return to their own home on discharge.
- It may help to relieve the pressure faced by acute wards by expediting the discharge.
- There is potential to realise significant cost savings by reduction in use of pads in all wards across ABUHB.
- There is potential to reduce contaminated waste /CO2 emissions due to excessive pad usage.
- This project will facilitate nursing leadership supporting a quality improvement project to challenge the pad culture that currently exists on wards at the same time supporting nurses.
- Improving patient experience and effectiveness of continence promotion strategies for people living with dementia in hospital settings.
- Sharing best practice across the corporate and clinical nursing teams.
- Support and guidance to nursing staff on wards who care for this group of patients- valuing staff and their role in this is essential /fundamental work to challenge aspects of care delivery.
- Recognizing /acknowledging and raising the profile of this important but hidden aspect of nursing care could help to improve staff morale.
- This project will mean that ABUHB will become a vanguard site leading the way and becoming a benchmark for the other health boards in Wales and the rest of the UK – regular reporting to the CNO at WAG throughout implementation.
- This project has potential to raise the profile of nursing in ABUHB, through dissemination and sharing of best practice. Delivering conference papers and publication.

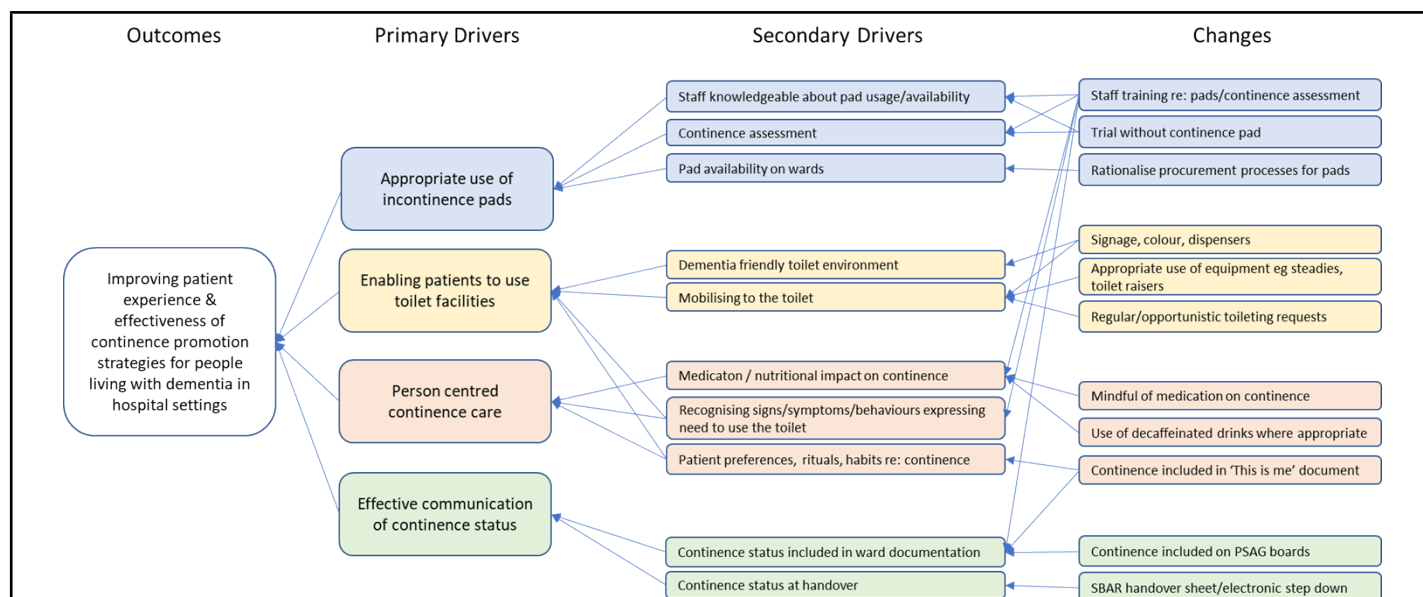
7. Measures – How will you know that a change is an improvement?

The table below outlines the measurement strategy for the programme:

Type	Measure	Operational Definition	Data Collection Guidance / Source of data	Target
Outcome (measure of patient experience)	Experience going to the toilet or using continence pads on ward	Do you feel you were treated with dignity and respect when going to the toilet or using continence pads on the ward? (Average score) 1 2 3 4 5 Very Poor Excellent	Average Score taken from question 15 in the ABUHB Continence and Dementia patient/carer survey. (to mirror question in survey) PREMS survey	Increase average score

Outcome (measure of effective care)	Maintaining continence status during admission	% patients maintaining the level of continence between admission and discharge from ward OR	No. of patients discharged who maintained continence status <i>divided by</i> the Total number of patients discharged x 100%	Target 100%
		Number of days between date of patient discharge, for patients whose continence status has reduced between admission and discharge	Take note of discharge date for each patient whose continence has deteriorated during admission. Count the number of days between each patient discharge date.	Increase days between
Balancing	Staff experience providing continence care	Do you feel that you are able to carry out responsive and respectful continence care for patients? 1 2 3 4 5 Never Always	Continence and dementia improvement project staff survey (to mirror question in survey) Staff survey	
Process	Continence status at handover	% patients who had accurate continence status documented at handover	No. of patients with accurate continence status at handover <i>divided by</i> the Total number of patients admitted x 100%	Target 95%
Process	Continence training	% staff on ward who have undergone continence assessment/pad training	No. of staff who have received training <i>divided by</i> Total number ward staff x 100%	Target 95%
Process	Continence assessment	% patients receiving continence assessment documented on admission	No. of patients receiving continence assessment <i>divided by</i> the Total number of patients admitted x 100%	Target 95%
Process	Pad usage each week	Number of packs of pads ordered each week for each ward, split by: 0-500 mls / 500-700 mls / 700-1000 mls	Data each month from Procurement team	Reduce
Balancing	Pad cost each week	Total Cost of pads ordered each week for each ward	Data each month from Procurement team	
Balancing	Carbon footprint of pad usage	CO ₂ emissions each week per ward due to pad usage	Data each month from Procurement team x CO ₂ emissions per pad	

8. Theories of change – What changes can you make that will lead to improvement?



Improvement Strategies will involve the following (please see driver diagram above):

- Training around person centred care, continence assessment, dementia, appropriate use of pads/pad types /absorbencies and correct fitting.
- Working with procurement to monitor patterns in pad ordering usage and costs of pads.
- Testing 'Trial without Pads' with patients in ward settings.
- Enabling patients to mobilise to toilet and ensure privacy.
- Teaching staff to recognize the signs/behaviours in dementia patients expressing need to use toilet and to react appropriately.
- Encouraging appropriate use of equipment, steadies /toilet raisers/dementia friendly ward/toilet environments.
- Ensuring effective communication between teams on continence status at step down /transfers and SBAR handovers.
- Seek and share patient and family stories. Obtain case studies including mapping an elderly patients journey from admission to discharge.
- Working in collaboration with Prof Katie Featherstone Lead researcher and author of the research study.

9. What initial activities do you have planned?

- Establish a faculty with monthly meetings and work streams.
- Engagement meetings and exercises with the ward-based staff.
- Develop patient/carer survey.
- Develop staff survey.
- Deliver Staff training programmes – pad usage, dementia, continence assessment.
- Develop continence assessment tool.
- Gathering base line data with the help of ABCI and VBH team.
- Work with Procurement to gather regular data.

10. Barriers

- Staffing issues on wards.
- Staff turnover.
- Leave /Holiday periods.
- Non-attendance at faculty and working group meetings.
- Resistance to change.
- Access to trainers.
- Retirement of project lead.
- Time.
- QI Coaching support when the programme spreads to other areas.

11. Boundaries

This programme will initially test the driver diagram within three wards. C4E is an acute ward and Oak & Rowan wards as community wards.

Signature (Project owner)	Name	Date.....
----------------------------------	-------------	------------------

Signature (Sponsor)	Name	Date.....
----------------------------	-------------	------------------

References

Adapted from: Ihi.org. (2019). *QI Project Charter*. [online] Available at: <http://www.ihi.org/resources/Pages/Tools/QI-Project-Charter.aspx> [Accessed 25 Sep. 2019].

Saadeddin, D. (2019). *Project Charter | Continuous Improvement Toolkit*. [online] Citoolkit.com. Available at: <https://citoolkit.com/articles/project-charter/> [Accessed 3. May.2019]

Scottish Improvement Leader SCiL Project Charter [Accessed Sep 2019]