

- 1.0.0 10:00 - VIEW FROM A FUNDRAISER
Led by Gavin Bennett, Charity Fundraiser
- 2.0.0 10:15 - STANDARD BUSINESS
Led by Professor Donna Mead OBE, Chair
- 2.1.0 Apologies
Led by Professor Donna Mead OBE, Chair
- 2.2.0 In Attendance
Led by Professor Donna Mead OBE, Chair
- 2.3.0 Declarations of Interest
Led by Professor Donna Mead OBE, Chair
- 2.4.0 10:20 - Action Points
Led by Professor Donna Mead OBE, Chair
 - 2.4.0 Public Charitable Funds Committee Action log_Updated 13.05.2022.docx
- 3.0.0 10:35 - CONSENT AGENDA
Led by Professor Donna Mead OBE, Chair
- 3.1.1 Draft Minutes from the meeting of the Public Charitable Funds Committee held on the 03 February 2022
Led by Professor Donna Mead OBE, Chair
 - 3.1.1 Draft Charitable Funds Committee Public Part A Minutes _03 02 2022.docx
- 3.2.0 FOR NOTING
Led by Professor Donna Mead OBE, Chair
- 3.2.1 Charitable Funds Internal Audit Report April 2022
Led by Steve Coliandris, Financial Planning and Reporting Manager
 - 3.2.1a VT 2122-08 - Charitable Funds Final Internal Audit Report.pdf
- 4.0.0 10:40 - UPDATE FROM THE INTERIM CHARITY DIRECTOR
Led by Alaric Churchill, Interim Charity Director
 - 4.0.0 Majorca Overview Document 2022.pdf
- 4.1.0 10:55 - Operational Plan and Forecast for 2022/ 2023 (Annual Delivery Plan)
Led by Alaric Churchill, Interim Charity Director
 - 4.1.0 Annual Delivery Plan 2022-23 v4.docx
- 5.0.0 11:05 - MANAGEMENT OF PUBLIC HEALTH WALES CHARITABLE FUNDS
Led by Matthew Bunce, Executive Director of Finance
 - 5.0.0 PHW Charitable Fund Management 05.04.22 Final draft.docx
- 6.0.0 11:15 - CHARITY ANNUAL ACCOUNTS 2020-21 LESSONS LEARNED
Led by Matthew Bunce, Executive Director of Finance
 - 6.0.0 Updated Charity Annual Accounts 2020_21 Lessons Learned 11.04.22.docx
- 7.0.0 11:25 - BREAK
- 8.0.0 11:35 - FINANCE
Led by Steve Coliandris, Financial Planning and Reporting Manager
- 8.1.0 Financial Update Paper
Led by Steve Coliandris, Financial Planning and Reporting Manager
 - 8.1.0a CFC Financial Paper Cover Paper March 22 - CFC May 22.docx
 - 8.1.0b CFC Financial Paper March 22 - CFC May 22.docx
 - 8.1.0c Summary of Commitments March 22 - CFC May.docx
- 9.0.0 11:55 - CHARITABLE FUNDS FINANCE ADMINISTRATION ASSISTANT
Led by Steve Coliandris, Financial Planning and Reporting Manager
 - 9.0.0 CFC - Charitable Funds Finance Assistant - May 22.docx
- 10.0.0 BUSINESS CASE AND EXPENDITURE PROPOSALS
- 10.1.0 12:05 - Business case for Pearl Consultant Research Sessions

Led by Tom Rackley, Consultant Oncologist and PEARL Clinical Lead

10.1.0 2022-10 - FINAL - RDI BC PEARL Consultant Research Session 3-5-22.docx

10.1.0a Appendix 1 - Business case for PEARL consultant sessions.pdf

10.2.0 12:15 - Business case for Patient Engagement Strategy Funding (ORAL UPDATE)

Led by Cath O'Brien, Chief Operating Officer

11.0.0 12:25 - FUNDRAISING CASE STUDY (PLEASE REFER TO LINK SHARED SEPARATELY VIA EMAIL)

Led by Alaric Churchill, Interim Charity Director

12.0.0 12:35 - ANY OTHER BUSINESS

Prior Agreement by the Chair Required

13.0.0 HIGHLIGHT REPORT TO THE TRUST BOARD

Members to identify items to include in the Highlight Report to the Trust Board:

- *For Escalation*
- *For Assurance*
- *For Advising*
- *For Information*

14.0.0 DATE AND TIME OF NEXT MEETING

Tuesday 20 September 2022, 10:00-12:30

15.0.0 CLOSE

The Committee is asked to adopt the following resolution:

That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest in accordance with Section 1(2) Public Bodies (Admission to Meetings) Act 1960 (c.67).

PART A - CHARITABLE FUNDS COMMITTEE – ACTION LOG					
Minute ref	Action	Action Owner	Progress to Date	Target Completion Date	Status
Actions from the meeting 3 rd December 2019 Committee					
6.13.0	<p>Library, Knowledge and Information Services Explore external funding sources for the Library, Knowledge and Information Services via engagement with HEIW. Review internal costing recharging mechanisms and arrangements.</p> <p>Action updated 6 May 2021:</p> <ul style="list-style-type: none"> Mark Osland to discuss with Paul Wilkins the need to open and enter into a discussion with the Deanery in HEIW regarding a review of funding arrangements for the library at Velindre compared to other NHS libraries. <p>Action updated 14 September 2021:</p> <ul style="list-style-type: none"> Cath O'Brien to expedite review of use of the Library, Knowledge and Information Services and how Health Boards fund such facilities. Meeting to be held between Steve Ham and the Post Graduate Dean in HEIW to discuss the funding arrangements for the Trust Library, Knowledge and Information Services. 	<p>Mark Osland / Paul Wilkins</p> <p>Cath O'Brien</p> <p>Steve Ham</p>	<p>Discussions held with Paul Wilkins and Dave Osborne. Ref. later updates outlined below.</p> <p>Library Paper has been through Velindre Cancer Service Senior Leadership Team and will be taken to EMB in March 2022. Ref. later updates outlined below.</p> <p>Steve Ham has met with Tom Lawson, Post Graduate Dean in HEIW and they are completing a library review and have agreed to meet again when that has been published.</p> <p>Update 04/05/2022: Steve Ham has recently made contact with Dr Tom Lawson (Postgraduate Dean) to ascertain progress on their review.</p>	TBC	OPEN
Actions from the meeting 4 th November 2020 Committee					
6.2.0	<p>Clinical Nurse Specialists (review of core funding arrangements) This is an example of funding posts that roll on. The Chair and Mark Osland have discussed the appropriate time and need to draw this into discussions with our Commissioners; however this needs to be thought through very carefully.</p> <p>Action updated 14 September 2021:</p> <ul style="list-style-type: none"> This action has been broadened to include all posts that require review from core funding arrangements (i.e. not just Clinical Nurse Specialists) and maintain communication with our Commissioners on this point. <p>Action updated 03 February 2022:</p> <ul style="list-style-type: none"> Matthew Bunce needs to build up contact points with individuals and get more details from their reports to inform clear view of long term core funding requirements linked to the Charity. Matthew Bunce to then look at benchmarking during the next financial year. 	<p>Matthew Bunce</p> <p>Matthew Bunce</p>	<p>Matthew Bunce has met with the Trust Commissioners and raised this issue and will report back to the CFC in May 2022 following further discussions with the Commissioners via the Integrated Medium Term Planning Process.</p> <p>Update 13/04/2022: The issue was raised with commissioners during discussions in January. Whilst commissioners recognised the issue, they did not agree to include in their IMTPs as an area for investment in 2022-23. It was agreed to keep the matter under review.</p>	Ongoing	OPEN

	PART A - CHARITABLE FUNDS COMMITTEE – ACTION LOG				
Minute ref	Action	Action Owner	Progress to Date	Target Completion Date	Status
Actions from the meeting 6 th May 2021 Committee					
4.1.0	Summary of Reserve Policy: Fund Balance Movements – Public Health Wales Mark Osland to write to Huw George, Deputy CEO and Executive Director of Operations and Finance at Public Health Wales, to confirm timescale for extension is to the end of this financial year (March 2022) and request a clear spend plan for funds held. Action updated 04 November 2021: Matthew Bunce to meet with Huw George to discuss the ongoing relationship between Public Health Wales and Velindre and provide a report back to the Committee.	Mark Osland/Matthew Bunce	Response received from Huw George on 07/10/2021 acknowledged our request and stated that Public Health Wales consider it is still more appropriate to try to spend in accordance with the original local intentions. Public Health Wales have confirmed that they will expedite plans to spend as quickly as possible over the next few months. Ref. later update outlined below. Matthew Bunce met with Huw George on 03/12/2021 . NPHS are asking the CFC to consider providing PHW with ongoing management of their charitable funds.	03/02/2022	COMPLETE
		Matthew Bunce	Update 13/04/2022: Matthew Bunce provided an oral outline of a proposal to continue to manage PHW funds held by the Charity with a mixture of a fixed and variable fee structure. This was supported by the CFC in principle with a number of caveats. A paper has been prepared to present to the May CFC seeking agreement to continue management of PHW funds with a revised fee mechanism.	17/05/2022	COMPLETE
Actions agreed at the 14 th September 2021 Committee					
1.4.0	New Action arising from previous Action 6.4.0 Research Infrastructure Plan to be established for submission of a bid for research infrastructure support, to ensure ongoing support from Cancer Research Wales from 2022 onwards. Action Updated 04 November 2021: Meeting to be held between the Chair, Dr Jacinta Abraham and the Chief Executive of Cancer Research Wales, to discuss how Cancer Research Wales distribute funds so that a plan can be established for submission of a bid for research infrastructure support to ensure ongoing support from 2022 onwards.	Jacinta Abraham / Sarah Townsend Donna Mead/ Jacinta Abraham	Cancer Research Wales have advised that the timing of open grant call expected to be made during quarters 3 and 4 of financial year 2021/22 working towards call launch in April/May 2022 with awards made around Oct/Nov 2022. R&D office corresponding with Cancer Research Wales Head of Research to ensure timely application, prepared by the RD&I Senior Leadership team and reviewed by the RD&I OMG. Update 06/05/2022: Jacinta Abraham has made contact to enquire about arranging a discussion with the Cancer Research Wales Executive/Medical Lead and a meeting will be arranged involving the Cancer Research Wales Executive/Medical Lead, Donna Mead and Jacinta Abraham in due course.	30 May 2022	OPEN
Actions agreed at the 04 th November 2021 Committee					
2.0.0	Advanced International Fellowship Programme Medical Training Initiative The Chair and Executive Director of Finance to meet to discuss producing full economic costings for Business Case Expenditure Proposals.	Matthew Bunce / Donna Mead	Update 13/04/2022: Matthew Bunce and Donna Mead have discussed in 1:1 meeting and agreed that initial step was to ensure cases reflect all costs case is seeking funding for and where additional costs are assumed to be funded by Trust budgets they are identified in the case e.g. IT, travel expenses etc. Matthew Bunce agreed that a wider piece of work would be considered around		COMPLETE

PART A - CHARITABLE FUNDS COMMITTEE – ACTION LOG					
Minute ref	Action	Action Owner	Progress to Date	Target Completion Date	Status
			impact of Charity cases on wider Trust costs i.e. indirect and overheads to ensure the full economic impact is being considered.		
Actions agreed at the 03 rd February 2022 Committee					
2.0.0	Velindre University NHS Trust Charitable Funds Trustee Annual Report 2020-2021 Martin Veale to report on review / evaluation overseen by the Trust Audit Committee on any lessons that could be learnt from the process leading up to submission of the Velindre University NHS Trust Charitable Funds Trustee Annual Report 2020-2021.	Martin Veale / Matthew Bunce	<u>Update 03/05/2022:</u> Charity Annual Accounts 2020-21 Lessons Learned Paper has been produced and has been discussed and reviewed by the Audit Committee 03/05/2022 and will now be brought for noting to the Charitable Funds Committee 17/05/2022.	17/05/2022	COMPLETE
	Donna Mead and Alaric Churchill to have a discussion regarding leading a daily Comms message to celebrate the key achievements of the Charity with a link to the Velindre University NHS Trust Charitable Funds Trustee Annual Report 2020-2021.	Donna Mead / Alaric Churchill	<u>Update 05/05/2022:</u> Alaric Churchill has had a discussion with Non Gwilym and arrangements have been put in place to ensure weekly updates facilitated.		COMPLETE
	Cath O'Brien to put Alaric Churchill in touch with Stuart Buswell to discuss utilisation of the display screens in the Velindre Cancer Service to promote engagement with the Charity.	Cath O'Brien	<u>Update 05/05/2022:</u> Cath O'Brien has put Alaric Churchill in touch with Stuart Buswell.		COMPLETE
3.0.0	Update from the Interim Charity Director Alaric Churchill to look at sources of funding such as direct debits, and establish a clear process including how we procure this service.	Alaric Churchill	<u>Update 05/05/2022:</u> Alaric Churchill has reviewed bank and outsourcing and will arrange a contract with Procurement.		COMPLETE
4.1.0	Financial Update Paper Steve Coliandris and Team to have a look at what's already committed against the designated funds and whether we can utilise those.	Steve Coliandris	<u>Update 10/05/2022:</u> When business cases are submitted to the committee for funding a review is taken as to whether the designated funds can be utilised before allocating the funding against the unrestricted fund. A task for the forthcoming Charitable funds finance manager will be to engage with both the service and fund holders to ensure that any funds being held by the designated funds is utilised in an appropriate and timely manner. It is proposed to close this action for the CFC.		COMPLETE
5.2.0	Innovation Project Manager Steve Coliandris and Jonathan Patmore to discuss the source of funding for the Innovation Project Manager Business Case outside of Committee.	Steve Coliandris / Jonathan Patmore	<u>Update 04/05/2022:</u> Matter discussed and Research Fund balances reviewed. Agreed that, after FAKTION ring-fence & other commitments, there was not an alternative to General Fund 6000 for this Business Case.		COMPLETE
5.3.0	ESOL Business Case Cath O'Brien to review Page 5, second paragraph, of ESOL Business Case Proposal to add missing detail currently ending mid-sentence.	Cath O'Brien	<u>Update 04/05/2022:</u> The relevant changes have now been made to the ESOL Business Case, as requested by the Committee. This will now be included with the papers to be published on the Trust Website.		COMPLETE

PART A - CHARITABLE FUNDS COMMITTEE – ACTION LOG					
Minute ref	Action	Action Owner	Progress to Date	Target Completion Date	Status
7.1.0	Chaplaincy Annual Evaluation Cath O'Brien to look into the points raised on the Chaplaincy Annual Evaluation report regarding the effect of the number of hours being reduced and the out of working hours questions and provide an update at the next Committee meeting.	Cath O'Brien	Update 13/05/2022: We have a partnership arrangement with Cardiff and Vale UHB to provide chaplaincy division as a wrap around the hours provision being provided in Velindre Cancer Centre.		COMPLETE
7.3.0	Psychology for Staff Annual Evaluation Cath O'Brien to link with the team to update the Psychology for Staff 2nd year Evaluation report to include data currently available via a supporting appendix to support evaluation of the Psychology for Staff service. Further data to be captured to support more robust assessment at end of Year 3 evaluation report.	Caroline Coffey / Cath O'Brien		17/05/2022	OPEN
10.0.0	Highlight Report to Trust Board Alaric Churchill to provide a draft CFC Highlight Report for the March Trust Board to be approved by the Chair.	Alaric Churchill	Highlight Report produced and approved by the Chair. Highlight Report presented to the March 2022 Trust Board.	31/03/2022	COMPLETE

MINUTES OF THE PUBLIC CHARITABLE FUNDS COMMITTEE (CFC)

VELINDRE UNIVERSITY NHS TRUST HQ / TEAMS

THURSDAY 03 FEBRUARY 2022 AT 09:30AM

PRESENT:	
Professor Donna Mead OBE	Chair
Martin Veale	Independent Member
Hilary Jones (<i>in part</i>)	Independent Member
Matthew Bunce	Executive Director of Finance
ATTENDEES:	
Steve Ham	Chief Executive Officer
Jacinta Abraham	Executive Medical Director
Cath O'Brien MBE	Chief Operating Officer
Alaric Churchill	Interim Charity Director
Emma Stephens	Head of Corporate Governance
Steve Coliandris	Financial Planning and Reporting Manager
Christine McCarthy	Senior Finance Business Partner
Jonathan Patmore	Finance Manager
Alison Hedges	Business Support Officer / Secretariat

1.0.0	Standard Business <i>Led by Professor Donna Mead OBE, Chair</i>	
1.1.0	Apologies <i>Led by Professor Donna Mead OBE, Chair</i> No apologies were received. It was noted that Hilary Jones would only be able to attend part of the meeting.	
1.2.0	In Attendance <i>Led by Professor Donna Mead OBE, Chair</i> The Chair welcomed our regular attendees: - <ul style="list-style-type: none"> • David Cogan (Patient Liaison Representative) • Wayne Griffiths (Charity Ambassador) The Chair was pleased to advise that Robyn Davies, Head of Innovation, would be joining the meeting to present item 5.2.0 Innovation Project Manager Business Case and Expenditure proposal.	
3.3.0	Declarations of Interest <i>Led by Professor Donna Mead OBE, Chair</i> No Declarations of Interest were declared.	

	<p>funding is sought for a new post we ask if core funding has been considered first, and whether the charity is the most suitable source of funding.</p> <p>Steve Ham noted that it starts with the Trust determining our priorities and agreeing how we build the proposed funding strategy through the Senior Leadership Team through the IMTP process, to then agree the approach for the Charity.</p> <p>Cath O'Brien echoed this and how this sits firmly at the heart of Velindre Futures and our aspirations, underpinned by the need for a tactical plan.</p>	
	Jacinta Abraham joined the meeting at 9:48am	
	Hilary Jones left the meeting at 9:49am	
	<p><u>Actions from Committee Meeting held on 6th May 2021</u></p> <p>4.1.0 Summary of Reserve Policy: Fund Balance Movements – Public Health Wales</p> <p>Matthew Bunce reported that UK and Welsh Government have adopted a policy/recommended guidance where bigger NHS charities can run and hold funds on behalf of smaller organisations, and that this is essentially what we have been doing with Public Health Wales who would like this to continue.</p> <p>Public Health Wales already contribute an administration fee in terms of an agreed percentage of fund balance. What is needed is an agreed fixed and variable fee to manage the funds with a clear spend strategy aligned to the values of the Charity.</p> <p>Matthew Bunce also highlighted that this would send a positive message to Welsh Government and other organisations that Velindre is willing to continue to work with Public Health Wales and manage their funds.</p> <p>This was supported by the Committee in principle.</p> <p>**Matthew Bunce to present a paper to the May Committee setting out a clear proposal for a fixed/variable fee for managing Public Health Wales funds.</p> <p>7.1.0 Fundraising Update Report</p> <p>Message from the Chair and Chief Executive has been included in this year's Charity Annual Report which ? sets a precedent. A message from the Chair and Chief Executive will also be included in the next Fundraising newsletter to be produced in 2022.</p> <p>**Action to be closed.</p> <p>The Chair and Steve Ham would also like to include a message in the next Fundraising Newsletter. This was noted by the Committee.</p>	Matthew Bunce

	<p>1.4.0 New Action arising from previous Action 6.4.0 Research Infrastructure</p> <p>The Chair confirmed that a meeting is in the process of being set up for herself and Jacinta Abraham to meet with the Chief Executive of Cancer Research Wales and will update the Committee at the next meeting. **Action to remain open.</p> <p><u>Actions from Committee Meeting held on 4th November 2021</u></p> <p>2.0.0 Advanced International Fellowship Programme Medical Training Initiative</p> <p>The Chair and Executive Director of Finance will meet to further discuss producing full economic costings for Business Case Expenditure Proposals. **Action to remain open.</p> <p>8.1.0 Financial Update Paper - Christine McCarthy to establish what the current position is with the Pet Care Project, who is best placed to now take this forward and provide an update to the Chair.</p> <p>The Chair confirmed this item could now be noted as COMPLETE on the action log.</p> <p>The Committee NOTED and AGREED for any COMPLETE actions to be removed from the Action Log.</p> <p>The Committee also NOTED the Action Log and surrounding discussion is very reflective of how the Charity is developing.</p>	<p>Donna Mead / Jacinta Abraham</p> <p>Donna Mead / Matthew Bunce</p>
2.0.0	<p>CONSENT ITEMS <i>Led by Professor Donna Mead OBE, Chair</i></p>	
2.1.0	<p>FOR APPROVAL <i>Led by Professor Donna Mead OBE, Chair</i></p>	
2.1.1	<p>Draft Minutes from the meeting of the Public Charitable Funds Committee held on the 04 November 2021 <i>Led by Professor Donna Mead OBE, Chair</i></p> <p>The Committee AGREED and APPROVED, the minutes from the meeting held on 04 November 2021 were an accurate record.</p>	
2.1.2	<p>Draft Minutes from the Extraordinary meeting of the Charitable Funds Committee on the 22 December 2021 <i>Led by Professor Donna Mead OBE, Chair</i></p> <p>The Committee AGREED and APPROVED, the minutes from the Extraordinary meeting held on 22 December 2021 were an accurate record.</p>	

2.2.0	FOR NOTING <i>Led by Professor Donna Mead OBE, Chair</i>	
	<p>Velindre University NHS Trust Charitable Funds Trustee Annual Report 2020-2021 <i>Led by Alaric Churchill, Interim Charity Director</i></p> <p>The Chair advised that this has now been completed, including the Annual Accounts section. There were several actions that had to be completed to conclude formal approval of the report. These actions are contained in the minutes of the December Extraordinary meeting and have been met. The Chair also confirmed that the Annual report has been formally submitted to the Charity Commission and the Letter of Representation has been signed and issued to Audit Wales.</p> <p>The Chair requested that the Audit Committee conduct an evaluation / review of lessons learnt to support next year, following this year's process. Martin Veale confirmed that he was happy to oversee this as Chair of the Trust Audit Committee.</p> <p>**Action: Martin Veale to report on review / evaluation on the Charitable Funds Trustee Annual Report process, to the May meeting of the Charitable Funds Committee.</p> <p>The Committee discussed how the report celebrated the excellent work undertaken by the Charity over the past year, particularly against the backdrop of COVID and how this could be shared / made more visible across the Trust.</p> <p>Alaric Churchill confirmed that he would be arranging for the Charity's Annual Report to be published on the Trust website. It was also suggested and agreed for both the Chair and Alaric to meet with Non Gwilym to discuss a message being included in the Trust Staff Communication to highlight the Charity achievements with a link to the Annual Report.</p> <p>**Action: The Chair and Alaric Churchill to have a discussion regarding leading a daily Comms message to celebrate the key achievements of the Charity with a link to the Annual Report.</p> <p>The Committee also discussed how wider engagement with the Charity across the Trust could be facilitated to get more people involved. Cath O'Brien highlighted the display screens available in Velindre Cancer Service and the poster boards, which could help raise visibility and encourage engagement.</p> <p>**Action: Cath O'Brien to put Alaric Churchill in touch with Stuart Buswell to discuss utilisation of the display screens in the Velindre Cancer Service to promote engagement with the Charity.</p>	<p>Martin Veale</p> <p>Donna Mead / Alaric Churchill</p> <p>Cath O'Brien</p>
3.0.0	Update from the Interim Charity Director	

	<i>Led by Alaric Churchill, Interim Charity Director</i>	
	<p>The Chair welcomed Alaric Churchill to present his report. The Committee were advised that following the impact of the Omicron variant, the Fundraising Showcase originally planned for January 2022 has been postponed until the end of May 2022, as the Fundraising team also have a large event in March and April 2022.</p> <p>The Committee noted that income received in October and November 2022 was good although had declined slightly in December 2022 due to the impact of COVID-19. The Committee were advised that total income received in January and February 2022 is expected to be higher following the hugely successful 'Wear Red Campaign' which coincided with the launch of the 6 Nations Championship and have received significant input this year from the Welsh Rugby Union, including support from Scarlets Rugby.</p> <p>The Committee were advised of plans in place to move towards a managed planning cycle for the Charity utilising digital support to increase communication opportunities and support fundraisers and donors more effectively. For example, supporters can now donate at site by application of a QR Code on campaign posters and 9 pubs and bars in North Wales are supporting us with digital development being part of the strategy.</p> <p>**Action: Alaric Churchill to look at wider sources and methods of receiving funding such as direct debits, and for each establish a clear process including how we procure any systems or services to support.</p> <p>The Committee noted how a change in campaign management has helped create a more response driven communications plan. Messaging has been developed to reflect the incredible commitment of staff from Velindre aligned with their wonderful sense of humour and the support given every day.</p> <p>The Committee noted and was pleased to hear of the plans being progressed for fundraising activity in the coming months, with 39 events booked, 15 dates pending and 22 further fundraising initiatives developed of which 17 are fully inclusive.</p> <p>The Committee were advised that going forward there is a clear need to be able to fundamentally put data at the heart of development for the future and this will be core to the new 5 year strategy for the Charity.</p> <p>The Chair highlighted that she would be attending Velindre Cancer Service on Friday 04 February 2022 to support the Wear Red Campaign and on behalf of the Committee wished it every success.</p> <p>The Committee NOTED the contents of the report.</p>	<p>Alaric Churchill</p>

	Robyn Davies joined the meeting at 10:30am	
4.0.0	FINANCE <i>Led by Christine McCarthy, Senior Finance Business Partner</i>	
4.1.0	Financial Update Paper <i>Led by Christine McCarthy, Senior Finance Business Partner</i> <p>Before inviting Christine McCarthy to present the Financial Update, the Chair extended her thanks for the excellent support she had provided for the recent Advancing Radiotherapy Fund Project Board meeting in a very tight turnaround. This was noted by the Committee.</p> <p>Christine McCarthy provided the Committee with an overview of the financial position, covering the period 01 April 2021 – 31 December 2021 that provided an update on income, expenditure, fund balances and a cashflow forecast.</p> <ul style="list-style-type: none"> Income Income received for the period was overachieving against the planned target of the unrestricted fund by £384,000 and the overall income for the Charity is on course to achieve circa £2.6 million by the end of this financial year (2021-2022). Income for the period has included £548,000 in legacies which have notably helped the year-to-date performance. The Committee received confirmation of further legacies totalling circa £500,000 including one for £425,000, not included in the year-to-date figures but factored into the forecast income. Expenditure The Committee noted that expenditure was lower than planned by £482,000, largely due to timing issues as a result of delayed activity due to vacancies against projects. Spend is expected either in the later part of this financial year or is to be deferred over future years. Fund Balances Balances have decreased by £0.6 million during the year from £5.8 million to £5.2million as at 31st December with a total forecast at the end of this financial year of £4.8 million. Investment Performance The Investment Portfolio is in a positive position and for the period has increased by £249,000 (4.15%). Reserve Policy The unrestricted reserve target has been set based on the current commitments at £786k which is an over achievement of £784k when compared to the balance of £1,570k that was in the charitable funds accounts as at the 31st December 2021. 	

	<p>Christine McCarthy noted that the Committee is asked to consider 3 Business Cases against the unrestricted funds, which will be considered under item 5.0.0 on the Agenda.</p> <p>Steve Coliandris highlighted to the Committee how well we have done over the pandemic and how good the income position is, given where we were at the start of the pandemic. Steve Coliandris noted we may be in a position where we will maintain our fund balance. Income levels have been maintained and are in a better position than anticipated.</p> <p>The Chair highlighted that a number of the schemes are funded out of unrestricted funds and the patients will receive that service across all tumour sites. Restricted funds are a bit more difficult to manage, but patients with tumour sites where we could spend restricted funds benefit from the services we are providing from the unrestricted funds. Chair asked Steve Coliandris to give this some thought. Some of the funds for these generic posts could come out of the restricted funds.</p> <p>Steve Coliandris supported this approach and said that is a route the Charity has considered in the past as it's harder to spend restricted funds and the Charity doesn't want funds being unused for long periods of time.</p> <p>**Action – Steve Coliandris and Team to have a look at what's already committed against the restricted funds and whether we can utilise those funds more often.</p> <p>Matthew Bunce highlighted that on Page 7 4.1.0b of the Financial Paper the Creditors have doubled on the balance sheet tables. Steve Coliandris reassured the Committee this was because the invoices from the hospital weren't raised last month so it's a Creditor to our own organisation and noted it's nothing to be concerned about.</p> <p>The Committee NOTED the contents of this financial briefing paper and in particular:</p> <ul style="list-style-type: none"> • The financial performance of the Charity for the period ending 31st December 2021. • The position of the Charity's investment portfolio. 	Steve Coliandris
5.0.0	BUSINESS CASE AND EXPENDITURE PROPOSALS	
5.1.0	<p>Psychology for Staff Business Case <i>Led by Cath O'Brien, Chief Operating Officer</i></p> <p>The Chair invited Cath O'Brien to take the Committee through the Psychology for Staff Business Case</p> <p>Cath O'Brien highlighted to the Committee that staff work under considerable pressure and there is an increased need for this service for staff given the ongoing impact of the COVID-19 pandemic.</p>	

	<p>The Chair raised that the reason the Business case was not approved at the September Charitable Funds Committee was that there was no evidence that providing psychology for staff was a Trust endorsed direction. It was noted that the revised proposal now confirms that the Cancer Centre Senior Leadership Team has endorsed this scheme.</p> <p>Cath O'Brien confirmed to the Committee that core funding was considered however it was deemed not appropriate or possible.</p> <p>The Committee welcomed that the scheme is part funded by the 'NHS Charity Together' and that future funding strategies should adopt a similar approach of a mixed funding model with less dependence on funding from the Trust Charity.</p> <p>The Committee APPROVED the business case, but requested that the 1st year evaluation report reflected future funding options with a clear exist strategy for this scheme.</p> <p>Cath O'Brien highlighted that she is working with the service to look at format and content of papers, how we articulate the evaluation and how we feed that back in the Evaluation Report as part of the ongoing plan.</p>	
5.2.0	<p>Innovation Project Manager <i>Led by Robyn Davies, Head of Innovation</i></p> <p>The Chair invited Robyn Davies to take the Committee through the Innovation Project Manager Business Case.</p> <p>Robyn Davies shared a short presentation to provide the Committee with an overview of the business case proposal.</p> <p>The Committee were advised that the Business Case had been through the required governance pathway in advance of its submission to the Committee and had incorporated all feedback received to reflect this. The Committee noted that the scheme is aligned with the new Trust Strategy and Charities mission and will enable a small core team to be established to support driving forward the RD&I Programme of work.</p> <p>The Chair thanked Robyn Davies for bringing some concrete examples of where innovation has worked and noted that ideas can be mainstreamed and commercialised, and that it is about bringing benefits to patients.</p> <p>Martin Veale also highlighted that he was happy to support the proposal and noting the exit strategy and a clear intent to become self-financing.</p> <p>Alaric Churchill noted from a charity perspective there is an ambition to help the innovation agenda move forward as a lot of income is derived from Intellectual Property relating to services developed and patents treated from Charity funds, so the</p>	

	<p>Charity's goals over the next few years would be to increase capacity to fund innovation.</p> <p>The Committee were content to APPROVE 2 years funding for £90,000 and requested that the 1st year evaluation report clearly set out the expected outcome measures.</p> <p>Steve Coliandris noted the funds are being requested against the General Purpose Fund and queried if it would be more appropriate /aligned with the Research General Funds. Jonathan Patmore suggested an out of committee reconciliation is undertaken, however believed the Research General Fund money is already committed to projects that have previously been approved.</p> <p>**Action Steve Coliandris and Jonathan Patmore to discuss the source of funding for the Innovation Project Manager Business Case outside of Committee.</p>	<p>Steve Coliandris / Jonathan Patmore</p>
6.0.0	BREAK 11:15AM - 11:25AM	
5.3.0	<p>ESOL Business Case Led by Cath O'Brien, Chief Operating Officer</p> <p>The Chair invited Cath O'Brien to take the Committee through the ESOL Business Case.</p> <p>Cath O'Brien noted this came to the Committee previously in September 2021 and was taken away with some valid challenges to incorporate: what it was delivering, where it sat within the ESOL Programme, what the remit of Velindre was compared to Cardiff & Vale College, and provide further clarity around the costs.</p> <p>Cath O'Brien went through the revised proposal with the Committee, noting that the ESOL Programme is run by Cardiff & Vale, this is an optional additional module that can be undertaken and each of the resources produced by Seema Arif over the year has become an ESOL plus module, covering various healthcare aspects over a period.</p> <p>Cath O'Brien highlighted that last year paper modules were produced on Covid and vaccines which couldn't be placed online because of lack of availability of eLearning Technologists in Cardiff & Vale College. There is now an evaluation that provides some details in terms of numbers of students that have accessed these resources now they are available, so there is potential to continue to share and grow the number of students by continuing to grow the National ESOL network.</p> <p>The Chair highlighted that on Page 5, second paragraph, a sentence ends mid-sentence: '<i>There are also technical costs of...</i>' Cath O'Brien confirmed this is associated with the production of the modules which is included in the tables below.</p>	

	<p>**Action: Cath O'Brien to review Page 5, second paragraph, of ESOL Business Case Proposal to add missing detail currently ending mid-sentence.</p> <p>Martin Veale queried what is funded by Cardiff & Vale and what is funded by Velindre Charity. Cath O'Brien confirmed that the ESOL course is funded by Welsh Government through Cardiff & Vale College. The Velindre Charity is only funding the production of this additional module. We are getting the subject matter experts to produce information and the Cardiff & Vale staff turn our information into a learning resource and then provide the technical expertise to turn that into an online learning resource.</p> <p>Jacinta Abraham noted that it is a small investment and it's about how we maximise the benefit of that investment. We need to look at using to our advantage by turning into a strategic piece of work.</p> <p>Steve ham echoed this and noted the need to think about the Trust approach to engagement and how we use to start leveraging out our broad ambitions.</p> <p>The Chair noted that we need to check Velindre branding is included on the programme materials / publicity and questioned whether we should also approach Welsh Government for seek funding.</p> <p>Cath O'Brien noted that following discussion with Seema they were looking at relevant issues for the Trust in terms of cancer and the population, cancer support and cancer services, which has morphed our approach, out of necessity of responding to the pandemic, into other areas of more general health. We have initiated a discussion with Public Health Wales and are going to meet with them to determine, how much is Velindre's responsibility and how much is a wider public health endeavour.</p> <p>Cath O'Brien also highlighted that there is a question around where we might want to go in terms of additional modules that are more focused around cancer wellbeing and prevention and how do we continue to support and update existing resources. All elements will be picked up with Seema over the next 12 months and a proposal brought back to the Committee.</p> <p>The Chair noted this Business case has reduced the request to £16,000 and is a very important initiative.</p> <p>The Committee noted that the ESOL Programme is provided in partnership with Cardiff & Vale College, and provides a valuable resource for its target audience that covers a number of important healthcare topics promoting equality, diversity and innovation in education. The Committee were pleased to learn that the Business Case proposal had been revised to incorporate previous feedback from the Committee and were content to APPROVE the revised expenditure proposal.</p>	Cath O'Brien
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7.0.0	BUSINESS CASE EXPENDITURE EVALUATIONS	
7.1.0	<p>Chaplaincy Annual Evaluation <i>Led by Cath O'Brien, Chief Operating Officer</i></p> <p>The Chair asked Cath O'Brien to present the Chaplaincy Annual Evaluation report.</p> <p>Cath O'Brien reported that she was happy to take any questions from the Committee or to take back any feedback to the team on the Annual Evaluation Report.</p> <p>The Chair noted this is year 2 of a 3-year project and that it would have been useful for it to have included further details of any material effects arising from the reduction in number of hours.</p> <p>Martin Veale noted that the spiritual support only covers 2 days and queried how we manage and supported patients' spiritual needs in the remaining days, in particular with people visiting in the pandemic. Cath O'Brien advised her understanding is that other times were signposted.</p> <p>The Chair also raised if there is equity of provision and that you would expect Velindre to have its own Chaplaincy Service.</p> <p>Matthew Bunce noted his understanding with regards to time outside of the 2 days service provision that Velindre can access support in an emergency via the 24/7 access provided through Cardiff & Vale Health Board. The support is multi-faith so even if the Chaplain is of Christian denomination, they provide spiritual and pastoral care to all faiths.</p> <p>Steve Ham noted the equity of provision point and that there is no evidence that anyone else is involved and it might be a single point of failure and suggested this discussion would be taken out of Committee to discuss the appropriate route to investigate this. The Chair suggested this could also be discussed eventually at Strategic Development Committee.</p> <p>**Action: Cath O'Brien to look into the points raised on the Chaplaincy Annual Evaluation report regarding the effect of the number of hours being reduced and the out of working hours questions and provide an update at the next Committee meeting.</p> <p>The Committee AGREED to APPROVE the Evaluation report and AGREED to undertake a strategic review of Chaplaincy services at Velindre over the coming weeks and months.</p>	Cath O'Brien
7.2.0	<p>Patient Information Manager Annual Evaluation <i>Led by Cath O'Brien, Chief Operating Officer</i></p> <p>The Chair asked Cath O'Brien to take the Committee through the Patient Information Manager Evaluation Report.</p>	

	<p>Cath O'Brien noted that this is an ongoing service which provides a myriad of support to our patients and was happy to take any questions and feedback from the Committee.</p> <p>The Chair suggested that under the original Business Case objectives it would have been useful to include an explanation of how these have been achieved and would like to see more information on this for the 3rd year evaluation report.</p> <p>Cath O'Brien highlighted as part of the work being undertaken on the Patient Engagement Framework, some of the feedback from the patients is around the information we provide them, access to information, and where our current resources are and what we can do to continue to develop and improve this. This work will help articulate where this sits as part of our overall offer and what our expectation is for the future, which can be included in the 3rd year evaluation report detail.</p> <p>The Committee AGREED to ACCEPT the Business Case. The Committee AGREED that some more robust evaluation is needed for the next report which will be at the end of the 3 years.</p>	
7.3.0	<p>Psychology for Staff Annual Evaluation Led by Cath O'Brien, Chief Operating Officer</p> <p>The Chair asked Cath O'Brien to take the Committee through the Psychology for Staff Annual Evaluation.</p> <p>Cath O'Brien advised she was happy to take any questions and feedback from the Committee.</p> <p>The Chair highlighted that the report contains a number of emotive statements and assertions that didn't really explain the reason / evidence underpinning them. More information needs to be incorporated to evidence this in the report. For example, positive patient feedback needs to be shown and explained.</p> <p>Steve Ham suggested we focus on what the team must build over the next year to link with the patient experience and the Civica implementation.</p> <p>Matthew Bunce said they have the supporting data, and they just need to include this in the appendix and refer to it in the narrative. The Chair agreed this would be an acceptable approach.</p> <p>**ACTION: Cath O'Brien to link with the team to update the Psychology for Staff 2nd year Evaluation report to include data currently available via a supporting appendix to support evaluation of the Psychology for Staff service. Further data to be captured to support more robust assessment at end of Year 3 evaluation report.</p> <p>Emma Stephens highlighted that more information is being requested from authors where this is not provided in evaluation</p>	Cath O'Brien

	reports for re-submission to the Committee. The Chair agreed we must start raising the Committees expectations around production of evaluation reports to evidence value of funding/investment provided.	
8.0.0	WALES WEEK IN LONDON <i>Led by Alaric Churchill, Interim Charity Director</i>	
	<p>The Chair welcomed Alaric Churchill to present this item.</p> <p>Alaric Churchill provided a brief overview of the Wales Week in London event to the Committee.</p> <p>Alaric highlighted that this provides an opportunity to explore the opportunities for the Charity that exist beyond the South Wales market including how we interact with corporate organisations and how we can target grant giving organisations and businesses based in London.</p> <p>Alaric outlined the plans for seminar work, focusing on how to make communication effective, helping patients and employees, and Research & Development. However, this is not included in Wales Week in London, due to the uncertainty around Covid and the fact the Charity would like to do this as a face-to-face event. This will be available later in the year.</p> <p>The profit from all events is estimated will be circa £12,000 net to the Trust.</p> <p>The Chair queried the programme of events taking place all over London and whether Velindre would be in attendance at any other events going on. The Chair also raised overheads for the golf tournament seemed a bit high.</p> <p>Alaric confirmed that following the event the Charity will have the opportunity to sit down with several businesses to discuss possible funding opportunities. Regarding the golf tournament costs, the main element of cost is to cover accommodation and travel for everyone representing Velindre.</p> <p>The Chair stated she would like to encourage the 'model' being used more locally.</p> <p>Alaric noted representation this year has been difficult and capacity was constrained due to resources available. Alaric highlighted increased use of data going forward will support more efficient process and effective planning in the coming year.</p> <p>The Committee were content to:</p> <ul style="list-style-type: none"> • APPROVE Velindre Fundraising being the chosen Charity of Wales Week in London for the third (not fourth) year running. • COMMIT to the events planned and approve expenditure for each event as outlined in section 3 of this report. 	

9.0.0	ANY OTHER BUSINESS Prior Agreement by the Chair Required	
	The Chair and Committee NOTED there were no other items of business.	
10.0.0	HIGHLIGHT REPORT TO TRUST BOARD	
	It was agreed by the Committee that a Highlight Report to the Trust Board would be prepared in readiness for its meeting 31 March 2022. **Action Alaric Churchill to provide a draft Highlight Report for approval by the Committee Chair.	Alaric Churchill
11.0.0	DATE AND TIME OF NEXT MEETING	
	Tuesday 17 May 2022 at 10:00am via Microsoft Teams	
14.0.0	CLOSE	
	The Committee was asked to adopt the following resolution: That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest in accordance with Section 1(2) Public Bodies (Admission to Meetings) Act 1960 (c.67).	

Charitable Funds Final Internal Audit Report April 2022

Velindre University NHS Trust



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Cydwasaethau
Gwasanaethau Archwilio a Sicrwydd
Shared Services
Partnership
Audit and Assurance Services



Ymddiriedolaeth GIG
Prifysgol Felindre
Velindre University
NHS Trust



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Fieldwork commencement:	15 th February 2022
Fieldwork completion:	5 th April 2022
Draft report issued:	6 th April 2022
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Final report issued:	21 st April 2022
Auditors:	Simon Cookson, Acting Head of Internal Audit Emma Rees, Interim Deputy Head of Internal Audit Johanna Butt, Principal Auditor
Executive sign-off:	Matthew Bunce, Director of Finance
Distribution:	Stephen Coliandris, Financial Planning and Reporting Manager Alaric Churchill, Charity Director
Committee:	Audit Committee



Audit and Assurance Services conform with all Public Sector Internal Audit Standards as validated through the external quality assessment undertaken by the Institute of Internal Auditors.

Acknowledgement

NHS Wales Audit & Assurance Services would like to acknowledge the time and co-operation given by management and staff during the course of this review.

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Executive Summary

Purpose

To review whether the operational procedure is compliant with policies of the Trust as trustee.

Overview

We have issued reasonable assurance on this area.

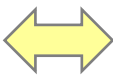

Whilst we have not identified any significant matters arising, we wish to bring to management's attention to the need to ensure expenditure is approved by an appropriate individual prior to being committed.

Management should also ensure that implementation of the two previous recommendations that remain open is supported by appropriate evidence.

Other matters arising concerning areas for refinement and further development have also been noted (see Appendix A).

Details of our follow-up on 2018/19 recommendations regarding Charitable Funds are included in Appendix B.

Report Classification

		Trend
Reasonable	Some matters require management attention in control design or compliance.	 2018/19
	Low to moderate impact on residual risk exposure until resolved.	

Assurance summary¹

Assurance objectives	Assurance
Income	
1 Procedures for receiving charitable fund income	Substantial
2 Receipting of monetary donations	Reasonable
3 Banking and recording of income received	Substantial
4 Donations / legacies with restrictions on the fund's use	Substantial
Expenditure	
5 Expenditure is appropriate, authorised and within the terms of the relevant fund	Reasonable
Follow-up of 2018/29 recommendations ²	
6 Implementation of previous medium priority recommendations raised.	Reasonable

¹ The objectives and associated assurance ratings are not necessarily given equal weighting when formulating the overall audit opinion.

² The scope of the follow-up work provides assurance against the implementation of the agreed actions from the medium priority actions in the 2018/19 Charitable Funds Internal Audit Report. It does not provide assurance against the full scope and objectives of the original audit.

1. Introduction

- 1.1 Charitable Funds is the term given to money that is donated to Velindre University NHS Trust (the Trust) and which is administered through a registered charity, Velindre University NHS Trust Charity (the Charity). The Trust is the Corporate Trustee of the Charity and has appointed the Charitable Funds Committee to oversee the management of its funds.
- 1.2 During the year ended 31 March 2021, the Charity received income of £2.683m (2019/20: £2.8m). This included a one-off donation of £0.5m from the Moondance Foundation and £0.524m in legacies.
- 1.3 For the same period, the Charity's expenditure was £2.763m (2019/20: £2.753m). This represented an underspend of £1.101m on planned expenditure mainly due to timing issues arising from vacancies against projects or reduced activity due to the Covid-19 pandemic.
- 1.4 As of 31 March 2021, the Charity's investment portfolio position was £5.99m (2019/20: £5.154m). The Investment Performance Review Sub Committee supports the Charitable Funds Committee in advising the Trust's Board on investment policy and performance.
- 1.5 For the period April to December 2021, the Charity had received donations of £1.768m and had expenditure of £2.385m.

Associated risks

- 1.6 The key risks considered in this review were:
 - i. non-compliance with operational policies as well as legislation and The Charity Commission guidelines;
 - ii. charitable funds income may be incorrectly recorded and / or accounted for;
 - iii. charitable funds income is not being maximised; and
 - iv. charitable funds expenditure may be inappropriate, excessive or be incorrectly recorded and not in line with the principles of the policy.

Limitations of scope

- 1.7 The following limitations in scope:
 - i. whilst some charitable donations may have been received via frontline staff, we will not visit wards as part of this review due to the continuing pressures from the pandemic;
 - ii. we have not verified that the minimum procurement thresholds for quotes and competitive tendering arrangements have been adhered to. However, we did establish whether the delegated authorisation levels required in order to authorise expenditure against Velindre NHS Trust Charitable Funds was appropriate; and
 - iii. we have not reviewed Gift Aid.

Covid-19 impact

- 1.8 We understand from discussions with management that the fundraising team were significantly impacted by the Covid-19 pandemic and that the Trust continues to have staffing issues within the fundraising and the finance teams.

2. Detailed Audit Findings

Audit objective 1: The Trust established procedures for receiving charitable funds income during the pandemic.

- 2.1 Policies are available to staff on the Trust's intranet site. We reviewed the policies and procedures relating to Charitable Funds. With the exception of 'CFC 04 - Charitable Funds Investment Policy' which was reviewed and approved in September 2021, all other Charitable Funds policies were found to be past their review date of September 2021. However, we were informed that management took the decision not to update the policies and procedures at that point due to them not being considered business critical in light of the Covid-19 pandemic and staffing issues. We understand there have been no changes to the procedure for receiving income during the pandemic. See **matter arising (MA) 1 in Appendix A**.
- 2.2 We understand from discussions with key staff that it was not necessary to draft additional procedures during the pandemic and that the controls and procedures have remained the same throughout. We also note that during the pandemic that the Velindre Cancer Centre were not accepting donations at their offices.
- 2.3 In addition to the policies and procedures there is a 'quick guide' in place on the Trust's intranet page that details how to apply for funds and includes hyperlinks to the relevant forms that need to be completed and key dates that applications need to be submitted by.

Conclusion:

- 2.4 We did not identify any significant matters for reporting in this area. Noting this, we have provided **substantial** assurance over this audit objective.

Audit objective 2: Monetary donations, including funds raised by staff (where applicable) were receipted in line with the Trust's Charitable Funds Policies and Procedures.

- 2.5 The Trust has several internal procedures in place for income. All income received is recorded on the donation database and there is a specific procedure for this, namely, the 'Database Donation Entry instructions' procedure.
- 2.6 The Velindre Fundraising website provides guidance on the process to be followed if someone wishes to donate monies to Velindre NHS Trust, including one-off

donations; leaving a bequest in a will; making regular donations; setting up a tribute fund; and wedding favour donations.

- 2.7 The Trust provided a report of all income received for the period 1st April 2021 to 14th February 2022 (the income report). We selected a sample of 25 transactions to include a selection of income received from donations, legacies and events.
- 2.8 Our testing identified 13/25 instances where an acknowledgement letter was not sent to the donor or was not available during the audit. We were informed that acknowledgment letters are not provided for all donations. We reviewed the procedure for 'Database Donation Entry instructions' and found that it details the process for sending out an acknowledgement letter, but it does not detail the instances where a letter is not required. See **MA4 in Appendix A**.
- 2.9 We understand that the donations database is used to generate charitable board fundraising reports. As such it is important that donation information is accurately recorded on the database. For our sample, the majority of funds received were posted to 6000 'Hospital General Purposes Fund'. However, 4/25 had been posted to specific funds and it was not clear from the supporting documentation provided why these had not been posted to the 'Hospital General Purpose Fund'. See **MA5 in Appendix A**.
- 2.10 Additionally, the fundraising event that the donation relates to is recorded in the 'Notes' section of the donation database. We identified 4 instances where the fundraising event noted was incorrect or we were unable to confirm whether it was correct based on the audit evidence provided. See **MA6 in Appendix A**.

Conclusion:

- 2.11 We identified three low priority matters arising in this area concerning acknowledgement letters and accuracy of recording in the charitable funds database (two findings). Noting this, we have provided **reasonable** assurance over this audit objective.

Audit objective 3: Charitable funds income received is banked promptly, securely and in full and recorded and accounted for correctly.

- 2.12 We selected a sample of 25 transactions from the income report to include a selection of different methods of payment including direct to the bank, cheques and cash. We confirmed, with reference to the bank statements, that all income selected had been banked in full.
- 2.13 The report showed that approximately 67% of income received was direct to the bank and as such is banked promptly and securely.
- 2.14 The remaining 33% was made up of cheques, postal orders and cash. Cash made up 3% of the income received on the report. We understand from discussions with staff that cash is held securely in a safe until deposited in the bank. *Note: verification of the security of cash and cheques prior to banking was out of scope for the review due to the Covid-19 pandemic.*

- 2.15 15/25 income transactions in our sample related to cash and cheque donations. We obtained the cash sheets to review the timeliness of banking. Where dates had been entered on the form, we calculated the timeliness from date paid to date banked. These were found to be banked within an average of 4 working days.
- 2.16 Monthly bank reconciliations are undertaken, and these will highlight any differences between the fundraising database and the bank statements. Testing on bank reconciliations was out of scope for this audit, although we saw evidence of the bank reconciliations in our testing on the banking of income.

Conclusion:

- 2.17 We did not identify any matters for reporting in this area. Noting this, we have provided **substantial** assurance over this audit objective.

Audit objective 4: Donations are not accepted as restricted funds unless it is in line with the strategic objectives of the Trust.

- 2.18 The Trust confirmed that there have been no restricted funds received since 1st April 2021. Where donor letters had been provided as audit evidence, in our sample testing under audit objectives 2 and 3, we did not identify any instances where there was a request to restrict the funds.
- 2.19 Acknowledgement letters sent to donors include the standard wording "*Without any imposition of trust, we will attempt to comply with your wishes as to the use of the donation. Unless specified, your donation will be paid into our general Donations Fund which is used to support all our services, projects and appeals*".
- 2.20 However, we have recognised under audit objective 2 that acknowledgement letters were not sent or were not available for 13/25 of sample transactions. We were informed by management that not all donors would receive an acknowledgement letter, but this is not clear from the 'Database donation entry instruction' guidance. We have reflected this in our assurance rating for audit objective 2.

Conclusion:

- 2.21 We did not identify any matters for reporting in this area. Noting this, we have provided **substantial** assurance over this audit objective.

Audit objective 5: Charitable funds expenditure is appropriate, authorised and in line with the charitable objectives.

- 2.22 The Trust provided an expenditure report for the period 1st April 2021 to 14th February 2022. We selected a sample of 25 expenditure transactions to include a cross section of expenditure types.
- 2.23 The Trust's intranet site includes a Charity fundholder coding structure which details each fund number which corresponds to the Oracle cost centre and details the appropriate authorisers for each fund.

2.24 All expenditure items in our sample had been authorised by an appropriate individual.

2.25 However, we identified the following matters regarding expenditure:

- retrospective authorisation of expenditure: orders should be placed on the Oracle system and authorised prior to the goods and services being received. We identified three Purchase Orders (POs) where the invoice date preceded the date of the PO. As such, approval was not sought prior to committing to spend;
- reimbursement of expenses incurred in March 2020 with missing supporting documentation: flight costs in respect of South Wales Sierra Leone Cancer Care link were re-imbursed without having evidence of the flight booking and / or plane ticket. Also, this expense was incurred in March 2020 but not submitted for payment until May 2021. We were informed that the delay in submission was due to the pandemic.

2.26 See **MA 2 and 3 in Appendix A**.

Automatic accruals

2.27 4/25 of the transactions selected related to errors in automatic accruals which we confirmed had been appropriately cleared in January 2022.

2.28 These were also identified by Audit Wales (AW) as part of their end of year audit for 2020-21. Their ISA260 report for 2020-21 detailed that they identified an error relating to automated accruals being over-stated by £49,190. This was either because the accruals had already been settled or were of such an age that the need to settle the liability was considered remote.

2.29 The AW report made a high priority recommendation that *"The Trust should introduce robust arrangements to regularly review the Charitable Funds automated creditor accruals to ensure that a continued liability exists at year end"*.

2.30 Trust Management accepted the recommendation in full and the Trust confirmed *"A full review of the automated accruals has been undertaken as part of the audit exercise. Procurement have been contacted to close the orders that are no longer required. Measures are now in place to review the automated accruals on a quarterly basis and to clear down any accruals that are no longer valid"*.

Timeliness of invoice payment

2.31 Whilst outside the scope of this review, we note that for three of the transactions selected, the Trust had received final demands for payment. We have not raised a matter arising for these as we were informed that the Trust monitors and reports on the timeliness for payment of invoices. However, we suggest the Trust identifies the underlying reason for these delays. Two of these final demands were from Cardiff University.

Conclusion:

2.32 We identified one medium priority matter arising relating to retrospective approvals and one low priority finding relating to appropriate evidence for, and timely submission of, expense claims. Noting this, we have provided **reasonable** assurance over this audit objective.

Audit objective 6: Follow-up on the medium priority recommendations from our 2018/19 Charitable Funds report.

2.33 The Trust's audit tracker includes all open recommendations. Closed recommendations are removed from the tracker when they are deemed as being implemented. We reviewed the most recent audit tracker as of January 2022. This confirmed that it did not include any of the previous Charitable Funds internal audit report recommendations. This suggests that the Audit Committee has been informed that the recommendations were fully implemented.

2.34 A summary of progress against the medium priority recommendations from the 2018-19 internal audit is detailed in the table below. Full details of our findings and updated recommendations are included in Appendix B.


Prior finding – current position	Previous rating	Direction of travel	Current rating
1. Moondance Programme Board - Attendance	Medium		Closed

We were informed that from January 2020 the 'Moondance Programme Board' has been replaced with the Advancing Radiotherapy Fund (ARF) Board.

The previous audit reported that the Medical Director had not attended any of the meetings. We reviewed the updated Terms of Reference (ToR) for the ARF Board, confirming that the Trust has removed the Medical Director as a member of this Board. However, we note that the ToR has not been formally approved.

We reviewed the minutes for the ARF Board to confirm attendance at the meetings since our previous review, i.e., April 2018. We noted that, of the twelve meetings scheduled between April 2018 and March 2022, good attendance from all members was evidenced in the minutes and only two meetings (August 2018 and September 2019) were not quorate. Between March 2020 and March 2022, three scheduled meetings have been cancelled. However, this is considered reasonable due to the Covid-19 pandemic.

The original recommendation is **closed**. However, a new recommendation relating to the approval of the ToR is included in [Appendix A \(see MA7\)](#).

2. Procedure for the Management of Fundraising Events is out of date	Medium		Closed
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The Trust's Procedure for the Management of Fundraising Events (CFC005) was reviewed and approved by the Charitable Funds Committee in November 2018. However, we note that the revised procedure was due for review in September 2021 but was outstanding at the time of our audit (due to a decision that the policy/procedure update was not considered business critical in light of the pandemic).

The original recommendation is **closed**. However, a new recommendation around policy/procedure updates is included under audit objective 1 in [Appendix A](#).

Prior finding – current position	Previous rating	Direction of travel	Current rating
3. Desktop Procedure – Monies Received	Medium		Medium

We were informed that the desktop procedure had been drawn up and circulated. However, the Trust confirmed they were unable to locate or provide a copy of the procedure.

In the absence of audit evidence to support the statement made the recommendation remains **open** at **medium priority**. We have provided updated recommendations in [Appendix B](#).

4. Trust Guidance for Donations	Medium		Medium
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We were informed that the desktop procedure had been drawn up and circulated. However, the Trust confirmed they were unable to locate or provide a copy of the procedure.

In the absence of audit evidence to support the statement made the recommendation remains **open** at **medium priority**. We have provided updated recommendations in [Appendix B](#).

Conclusion:

2.35 Two of the previous recommendations have been fully implemented, whilst two remain open due to a lack of evidence to support implementation. Noting this, we have provided **reasonable** assurance over this audit objective.

Appendix A: Management Action Plan

Matter arising 1: Charitable Funds Policies (Design)

Impact

We reviewed the policies pertaining to Velindre Charitable Funds. The following policies were found to be past their review date of September 2021:

Ref	Policy/Procedure:	Last Review	Approval Date	Review due
No reference	Trust Procedure for the Management of Fundraising events	June 2018	November 2018	September 2021
CFC 001	Procedure for the Scheme of Delegation and Stages for the Purchasing and Authorisation of Goods and Services	June 2018	November 2018	September 2021
CFC 002	Travel and Expenses Reimbursement Policy	June 2018	November 2018	September 2021
CFC 003	Credit Card Policy and Procedures	June 2018	November 2018	September 2021

Potential risk of:

- non-compliance with operational policies as well as legislation and The Charity Commission guidelines.

We acknowledge that there has been no change to the policy or procedures and that updating such document was not considered business critical during the pandemic. We understand the Trust intends to review the documents as the pandemic eases.

Recommendations

Priority

- 1.1 Management should ensure that all out of date policies are reviewed, updated, approved and made available on the Trust's intranet site as soon as possible.

Low

Management response

Target Date

Responsible Officer

- 1.1 Accepted - Due to Covid and capacity issues within the finance team the policy/procedures were not reviewed last financial year, however the policies and procedures are still relevant so per the recommendation is low priority but recognise that they need to go through the formal process for re-approval.

July 2022

Charitable Funds Finance Manager

Matter arising 2: Retrospective Purchase Orders (Operation)**Impact**

Velindre 'NHS Charitable Funds Procedure for the Scheme of Delegation and Stages for the Purchasing and Authorisation of Goods and Services' provides guidance and procedures for the payment and authorisation of goods and services paid through Velindre NHS Trust Charitable Funds.

s8.1.2 of the procedure details that "All requests made through charitable funds must be placed on the oracle system prior to any purchase being made. It is not acceptable to place an order once the goods or services have been received".

Our review of 25 expenditure transactions identified three instances where the invoice date preceded the approval date indicating that the approval had been sought retrospectively as follows:

Purchase Order (PO) Number	Amount	PO Approval date	Invoice date
712140407	£1,158.75	06/09/21 and 07/09/21	02/09/21
712142423	£229.50	14/10/21	23/08/21
712143070	£2,520.00	29/10/21	23/09/21

Potential risk of:

- charitable funds expenditure may be inappropriate, excessive or be incorrectly recorded and not in line with the principles of the policy.

Recommendations**Priority**

- 2.1 Management should remind requisitioners and approvers that purchase orders should be placed on the Oracle system prior to the goods and services being ordered and received.

Medium

Management response**Target Date****Responsible Officer**

- 2.1 Accepted – This is policy and should be followed. The Charitable funds finance manager will review monthly reports shared by NWSSP Accounts Payable team and specifically target repeat offenders. A reminder will be sent to all Fund holders and requisitioners.

May 2022

Charitable Funds Finance Manager

Matter arising 3: Appropriate evidence for, and timely claiming of, expenses (Operation)**Impact**

We reviewed a sample of 25 expenditure transactions and noted one instance where there was reimbursement of expenses over a year after they had been incurred and the related supporting documentation was inadequate.

The expenditure (£728.53) related to South Wales Sierra Leone Cancer Care Link for March 2020. The 'Velindre NHS Trust (VUNHST) Consultant Medical and General staff study leave and charitable funds authorisation form' had been completed and authorised by an appropriate individual. However, the supporting documentation was a receipt from 'Wellbodi Partnership' which detailed 1 x return flight from Birmingham to Freetown £628.53 and 1 x single entry visa £80. Evidence of the visa was provided, however, evidence for the flight was not attached to the authorisation form.

Additionally, the expenditure was incurred in March 2020 but not submitted for payment until May 2021. We were informed the delay in claiming these expenses was due to the Covid-19 pandemic.

Potential risk of:

- inaccurate financial monitoring and reporting;
- the Trust re-imburses expenditure that has not been incurred; and
- expenditure is not posted to the correct financial year.

Recommendations**Priority**

3.1 Management should:

- communicate to relevant individuals and authorisers the requirement for timely submission of expense claims supported by appropriate evidence; and
- ensure that expenses submitted late or without appropriate evidence are appropriately challenged before payment and the challenge and justification for payment are clearly documented.

Low

Management response**Target Date****Responsible Officer**

- | | | | | |
|--------|---|--|---|-------------------------------------|
| 3.1 a. | Accepted. Whilst we do request a timely submission of claims, the reason this was held up was due to Covid, and this has been confirmed by the consultant in question when asked for the reason in the delay. We do however recognise that this delay is excessive and the employee has been reminded of the importance in submitting claims in a timely manner. | Complete
consultant has
already been
contacted. | - | Charitable Funds Finance
Manager |
| b. | Accepted. This is linked to the above and it is not uncommon for receipts to go missing, however we were aware that the named individual went by flight to Sierra Leone and the cost of the ticket / reclaim was in line with what you would expect to pay. We do however recognise that this needs to be clearly documented, such as printing off an illustration of | Complete
consultant has
already been
contacted | - | Charitable Funds Finance
Manger |

the cost of a flight to Sierra Leone in order to accompany and support the claim, and articulating this with the employee at the time.

Matter arising 4: Acknowledgement letters (Operation)**Impact**

Review of the income procedure 'Database Donation Entry instructions' details how to send out an acknowledgement letter. For 13/25 of the donations in our sample, acknowledgement letters had not been sent or were not provided during the audit. We were informed by key staff that acknowledgement letters are not issued for all income received. However, we note that the Trust's procedures do not set out when this is appropriate and whether another form of acknowledgement (e.g., a receipt) is required.

The 13 donations where acknowledgement letters were not sent/provided were relate to the following Receipt IDs:

130151 - £1,145	130402 - £10,000	133240 - £1,400	134784 - £3,211	134780 - £150,000	136263 - £1,659
137493 - £2,600	137892 - £47,500	129882 - £5,250	132474 - £2,210	136166 - £2,301	136600 - £2,610
137726 - £3,000					

It is unclear whether these were not provided because they were not issued or that the Trust was unable to locate copies of the letter. Due to the lack of Trust guidance, we could not identify whether it is appropriate or not that acknowledgement letters were not sent in relation to these receipts.

Potential risk of:

- donor not acknowledged for fundraising effort and will not have evidence of the charitable donation for their own tax purposes; and
- may negatively impact the donors' future plans for fundraising for the charity.

Recommendations**Priority**

- 4.1 Management should update the 'Database Donation Entry instructions' document to detail when acknowledgment letters are not issued.
- 4.2 Management should review the 13 receipts identified above to satisfy itself that it was appropriate that an acknowledgement letter was not issued.

Low

Management response**Target Date****Responsible Officer**

- 4.1 Accepted – the manual will be updated April 2022 Charity Director
- 4.2 Accepted – review is being undertaken April 2022 Charity Director

Matter arising 5: Allocation of funds (Operation)

Impact

We understand that the donations database is used to generate fundraising reports. As such it is important that donation information is accurately recorded on the database.

For our sample, the majority of funds received were posted to 6000 'Hospital General Purposes Fund'. However, 4/25 had been posted to specific funds and it was not clear from the supporting documentation provided why these had not been posted to the 'Hospital General Purpose Fund'. These relate to the following Receipt IDs:

Receipt ID 134780 - £150,000 related to money left to the Trust in a will. The donation database details that the amount has been posted to 6317 'Radiotherapy Department'. The letter from the executor did not specifically request that the donation be made to the Radiotherapy Department.

Receipt ID 132474 - £2,210 the donation database details that the donation was to 6312 'Brain'. No supporting documentation was available for the donation. As such we are unable to confirm why the donation was not posted to 6000 'Hospital General Purposes Fund'.

Receipt ID 135813 - £3,542 the donation database details that the donation was to 6304 'Urology / Prostate'. However, the letter from the donor does not specifically request that the donation is for Urology / Prostate.

Receipt ID 137726 - £3,000 the donation database details that the donation was to 6307 'Research Gynaecological (Aphrodite Appeal)'. The only evidence available for the donation was the pink slip receipt. As such, we are unable to confirm why the donation was not posted to 6000 'Hospital General Purpose Fund'.

We were informed that there were no restricted funds received since 1 April 2021.

Potential risk of:

- inaccurate fundraising reports from the donation database; and
- charitable funds expenditure may not be in line with donor's wishes.

Recommendations

Priority

5.1 Management should:

- develop guidance on when funds should be allocated to funds other than the general-purpose fund and what supporting evidence should be retained in such circumstances;
- confirm that the four above receipts have been posted to the correct fund number code and update the donation database as necessary; and
- consider whether a review of the accuracy of the information in the database is required.

Low

Management response	Target Date	Responsible Officer
5.1 a. Accepted – All funds are donated into the General funds unless specifically requested from a Donor or a fundraising event / activity is raising money for that particular fund. We can develop a quick guide to demonstrate this. It will be in the guidance that we expect written confirmation when donations are requested to be received into another fund, and we will make every effort to ensure that the guidance is followed.	June 2022	Charity Director
b. Accepted – All donations have been reviewed and confirmed that they are in the correct place.	Complete	Charity Director
c. Accepted – An appropriate level of review of accuracy of the information in the database will be undertaken.	June 2022	Charity Director

Matter arising 6: Incorrect fundraising event noted (Operation)		Impact
<p>We understand that the donations database is used to generate fundraising reports. As such it is important that donation information is accurately recorded on the database.</p> <p>The fundraising event that the donation relates to is recorded in 'Notes' on the donation database. We identified 4 instances where the fundraising event noted was incorrect or we were unable to confirm was correct based on the audit evidence provided. These were:</p> <p>Receipt ID 130402 - £10,000 the donation database detailed that this related to match funding for 'Mile a Day 2021'. However, the Trust were unable to provide any supporting documentation or evidence in support of this.</p> <p>Receipt ID 136169 - £15,000 related to a legacy in memory of donation. The note column of the donation database details 'Legacy21'. The majority in memory donations are posted to 'IMO21' on the database.</p> <p>Receipt ID 137892 - £47,500 related to Jiffy50Cancer bike ride which was a joint fundraising event with Swansea Bay UHB. The note column on the donation database details 'SuppEvent21' instead of 'Jiffy50cancer'.</p> <p>Receipt ID 133693 - £11,024 the donation database includes 'Majorca22' in the note column. However, there was no reference to 'Majorca22' on the audit evidence provided.</p>		<p>Potential risk of:</p> <ul style="list-style-type: none"> inaccurate fundraising reports from the donation database.
Recommendations		Priority
<p>7.1 Management should:</p> <ol style="list-style-type: none"> remind staff of the need for accurate recording of fundraising events in the donation database; confirm that the four above receipts have been allocated to the correct fundraiser and update the donation database as necessary; and consider whether a review of the accuracy of the information in the database is required (see also MA5). 		Low
Management response	Target Date	Responsible Officer
7.1 a. Accepted - the Fundraising team are aware and have been reminded that it is important that information is recorded accurately in the database.	Complete	Charity Director

Management response (continued)	Target Date	Responsible Officer
b. Accepted - A review will be undertaken to ensure that the receipts have been allocated to the correct fundraiser, however we are confident that they are in the correct fund for accounting purposes.	May 2022	Charity Director
c. Accepted – An appropriate level of review of accuracy of the information in the database will be undertaken.	June 2022	Charity Director

Matter arising 7: Advancing Radiotherapy Fund Board Terms of Reference (Operation)**Impact**

In our follow-up of previous recommendations (see prior year finding 1 in Appendix B), we identified that the ARF Board ToR had been updated since our previous review but had not been approved.

Potential risk of:

- ToR does not appropriately cover ARF Board responsibilities; and
- non-compliance with legislation and Charity Commission guidelines

Recommendations**Priority**

8.1 Management should ensure the ARF Board ToR is formally approved and kept under review.

Low

Management response**Target Date****Responsible Officer**

8.1 Accepted – The ToR has been reviewed and regularly updated, however due to the lack of meetings which were stood down for a period during Covid it has delayed formal approval for the latest version. The latest version of the ToR is going to ARF Board on 27th April for approval.

April 2022

Moondance Programme Manager

Appendix B: Progress on 2018/19 Charitable Funds recommendations

Previous Matter arising 1: Moondance Programme Board – Attendance (Operating effectiveness)

Original recommendation and management response

Management should remind members of requirement to attend the meeting and review the attendance requirements of the Programme Board and update the terms of reference if required.

Management response:

Management note that the Medical Director has not attended since July 2017.

The Terms of Reference (ToRs) of the Moondance programme board are currently being reviewed, but it should be noted that the Director of Finance is the vice chair and as a Trustee will deputise for the Medical Director in their absence. As part of the ToRs no decision can be made without two Trustees being in attendance.

All members of the revised ToR will be reminded of the need to attend.

Jenny Stock – Moondance Programme Manager - 30.01.2019 (next MPB meeting date).

Original priority

Medium

Current findings

We were informed that from January 2020 the 'Moondance Programme Board' has been replaced with the Advancing Radiotherapy Fund (ARF) Board.

The previous audit reported that the Medical Director had not attended any of the meetings. We reviewed the updated Terms of Reference (ToR) for the ARF Board, confirming that the Trust has removed the Medical Director as a member of this Board. However, we note that the ToR has not been formally approved.

We reviewed the minutes for the ARF Board to confirm attendance at the meetings since our previous review, i.e., April 2018. We noted that, of the twelve meetings scheduled between April 2018 and March 2022, good attendance from all members was evidenced in the minutes and only two meetings (August 2018 and September 2019) were not quorate. Between March 2020 and March 2022, three scheduled meetings have been cancelled. However, this is considered reasonable due to the Covid-19 pandemic.

Residual risk

N/a – recommendation closed

Current findings (continued)**Conclusion:**

The Medical Director is no longer a member of the ARF Board and there has been good attendance at the meeting since our last review. However, the Terms of Reference are still in draft and have not been finalised. Consequently, the original recommendation is considered **fully implemented** and **closed**. However, a new recommendation relating to the approval of the ToR is included in [Appendix A](#) (see matter arising 7).

Previous matter arising 2: Procedure for the Management of Fundraising Events is out of date (Control design)
Original recommendation and management response
Original priority

Management should ensure that the procedure is reviewed and submitted to the Charitable Funds Committee for approval as soon as practicable.

Management response:

Whilst management recognise that the procedure is out of date by a few months, it is still relevant and we are not expecting any major changes. The procedure has been through the Exec team, and Divisional SMT teams, but due to the time it has taken to go through this process it missed the last committee meeting.

Andrew Morris – Fundraising Manager – 28/11/2018

Medium

Current findings
Residual risk

The Trust's Procedure for the Management of Fundraising Events (CFC005) was reviewed and approved by the Charitable Funds Committee in November 2018. However, we note that the revised policy was due for review in September 2021 but was outstanding at the time of our audit.

N/A – recommendation closed.

Conclusion:

The original recommendation is considered **fully implemented** and **closed**. However, a new recommendation has been raised in [Appendix A](#) about the current status of the Charitable Funds policies and procedures, (see matter arising 1).

Previous matter arising 3: Desktop Procedure - Monies Received (Control design)

Original recommendation and management response

Original priority

Management should draw up a desktop procedure that details the processes to be followed by the fundraising staff and finance staff for recording, safeguarding and banking of Charitable Funds income.

Management response:

Fundraising Desktop procedure to be drawn up.

Andrew Morris – Fundraising Manager – 28/11/2018

Medium

Current findings

Residual risk

We were informed that the desktop procedure had been drawn up and circulated. However, the Trust confirmed they were unable to locate or provide a copy of the procedure.

Conclusion:

In the absence of audit evidence to support the statement made the recommendation remains **open** at **medium priority**.

Charitable funds income may be incorrectly recorded and / or accounted for.

Recommendations

Priority

3.1 Management should draw up a desktop procedure that details the processes to be followed by the fundraising staff and finance staff for recording, safeguarding and banking of Charitable Funds income.

3.2 Management should ensure that the original recommendation is reinstated on the Trust's audit tracker.

Medium

Management response

Target Date

Responsible Officer

3.1 Accepted – a new procedure will be developed

June 2022

Charity Director

3.2 Accepted – original recommendation will be reinstated

June 2022





Charity Director

Previous matter arising 4: Trust Guidance for Donations (Control design)		
Original recommendation and management response	Original priority	
<p>Management should draw up guidance as soon as possible that details the process to be followed for any donations or enquiries received directly by departments within the Trust.</p> <p>Management response:</p> <p>Communication has previously gone out to staff members advising them what to do, however management recognise that guidance can be drawn up and recirculated to all staff.</p> <p><i>Andrew Morris – Fundraising Manager – 28/11/2018</i></p>	Medium	
Current findings	Residual risk	
<p>We were informed that the guidance had been drawn up and circulated. However, the Trust confirmed they were unable to locate or provide a copy of the guidance.</p> <p>Conclusion:</p> <p>In the absence of audit evidence to support the statement made the recommendation remains open at medium priority.</p>	Charitable income is not maximised. Funds not	
Recommendations	Priority	
4.1 Management should draw up guidance as soon as possible that details the process to be followed for any donations or enquiries received directly by departments within the Trust.	Medium	
4.2 Management should ensure that the original recommendation is reinstated on the Trust's audit tracker.		
Management response	Target Date	Responsible Officer
4.1 Accepted – communication has previously gone out to staff members advising them what to do. However, management recognise that guidance can be drawn up and recirculated to all staff. A new communication highlighting the process for donations has been sent via the Trust's weekly staff newsletter.	Complete	Charity Director
4.2 N/a – updated recommendation addressed, therefore no need to reinstate on the tracker.	N/a	N/a

Appendix C: Assurance opinion and action plan risk rating

Audit Assurance Ratings

We define the following levels of assurance that governance, risk management and internal control within the area under review are suitable designed and applied effectively:

	Substantial assurance	Few matters require attention and are compliance or advisory in nature. Low impact on residual risk exposure.
	Reasonable assurance	Some matters require management attention in control design or compliance. Low to moderate impact on residual risk exposure until resolved.
	Limited assurance	More significant matters require management attention. Moderate impact on residual risk exposure until resolved.
	No assurance	Action is required to address the whole control framework in this area. High impact on residual risk exposure until resolved.
	Assurance not applicable	Given to reviews and support provided to management which form part of the internal audit plan, to which the assurance definitions are not appropriate. These reviews are still relevant to the evidence base upon which the overall opinion is formed.

Prioritisation of Recommendations

We categorise our recommendations according to their level of priority as follows:

Priority level	Explanation	Management action
High	Poor system design OR widespread non-compliance. Significant risk to achievement of a system objective OR evidence present of material loss, error or misstatement.	Immediate*
Medium	Minor weakness in system design OR limited non-compliance. Some risk to achievement of a system objective.	Within one month*
Low	Potential to enhance system design to improve efficiency or effectiveness of controls. Generally issues of good practice for management consideration.	Within three months*

* Unless a more appropriate timescale is identified/agreed at the assignment.



NHS Wales Shared Services Partnership
4-5 Charnwood Court
Heol Billingsley
Parc Nantgarw
Cardiff
CF15 7QZ

Website: [Audit & Assurance Services - NHS Wales Shared Services Partnership](#)



Majorca 2022 Overseas Bike Ride

Hosted by Velindre Cancer Charity
In aid of Velindre Cancer Centre



Challenge Overview:

- 3 Days
- 390km Road Ride
- Climbing over 25,000ft
- Including the famous Sa Calobra climb used by Velindre Patron Geraint Thomas and Team SKY as part of their official training.
- Event delivered in partnership with The Ultimate Travel Company.



Matthew J Watkins

1978 - 2020

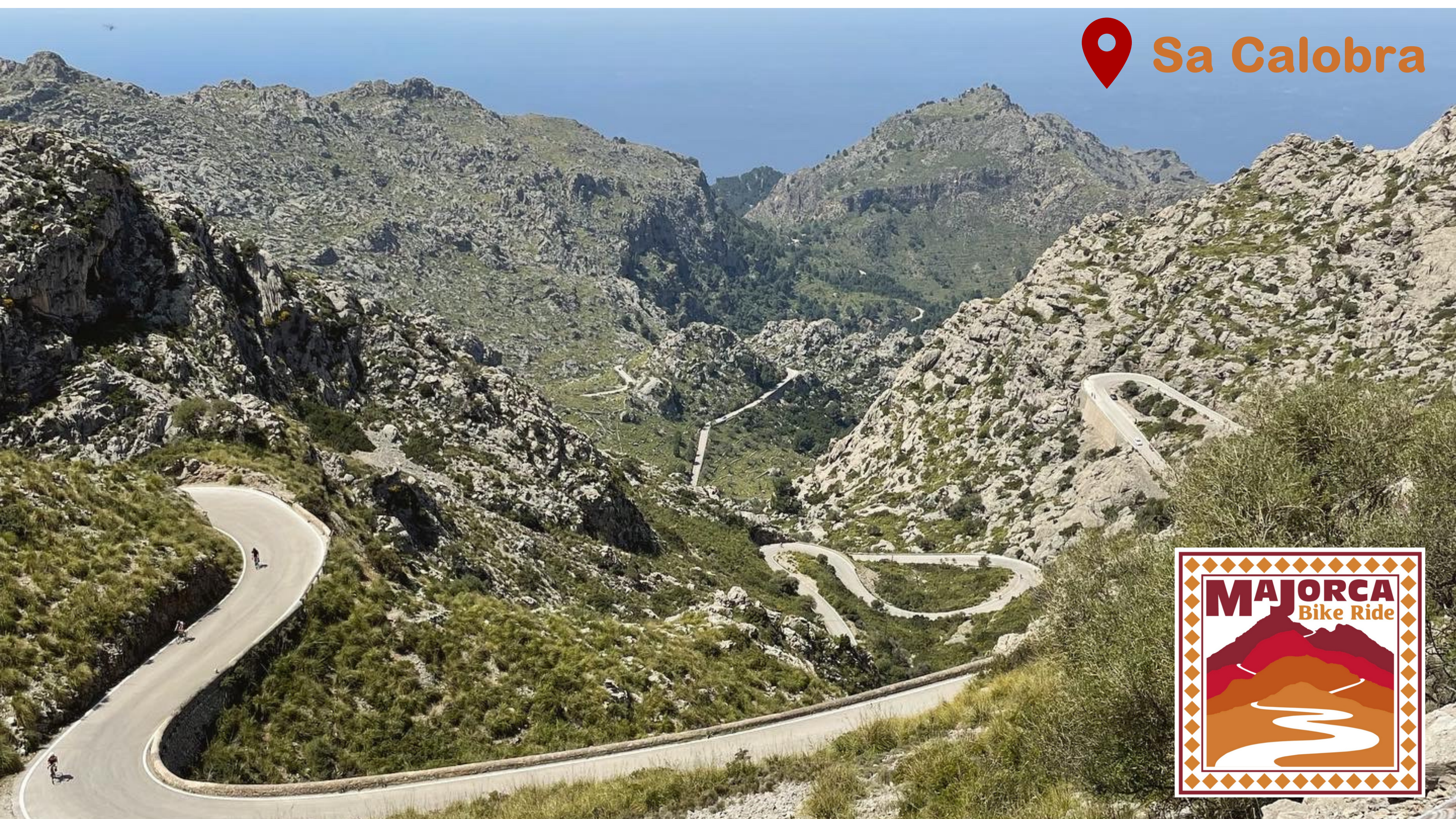


In Memory Of Matthew J Watkins

When designing the logo for the 2022 Majorca overseas challenge, we decided to make the 'M' and 'J' more prominent as a way of remembering former Welsh rugby player and passionate Velindre supporter, Matthew J Watkins. Many of the participants took part in honour of Matthew after knowing him as a friend, colleague, team mate and the rugby legend that he was. This was a very emotive and fitting tribute for Matthew who previously attended various overseas challenges himself to support the work of Velindre.



Sa Calobra



Week 1: 20-25th April 2022

- 20 Participants
- Led by Velindre Patron Sam Warburton



Week 2:

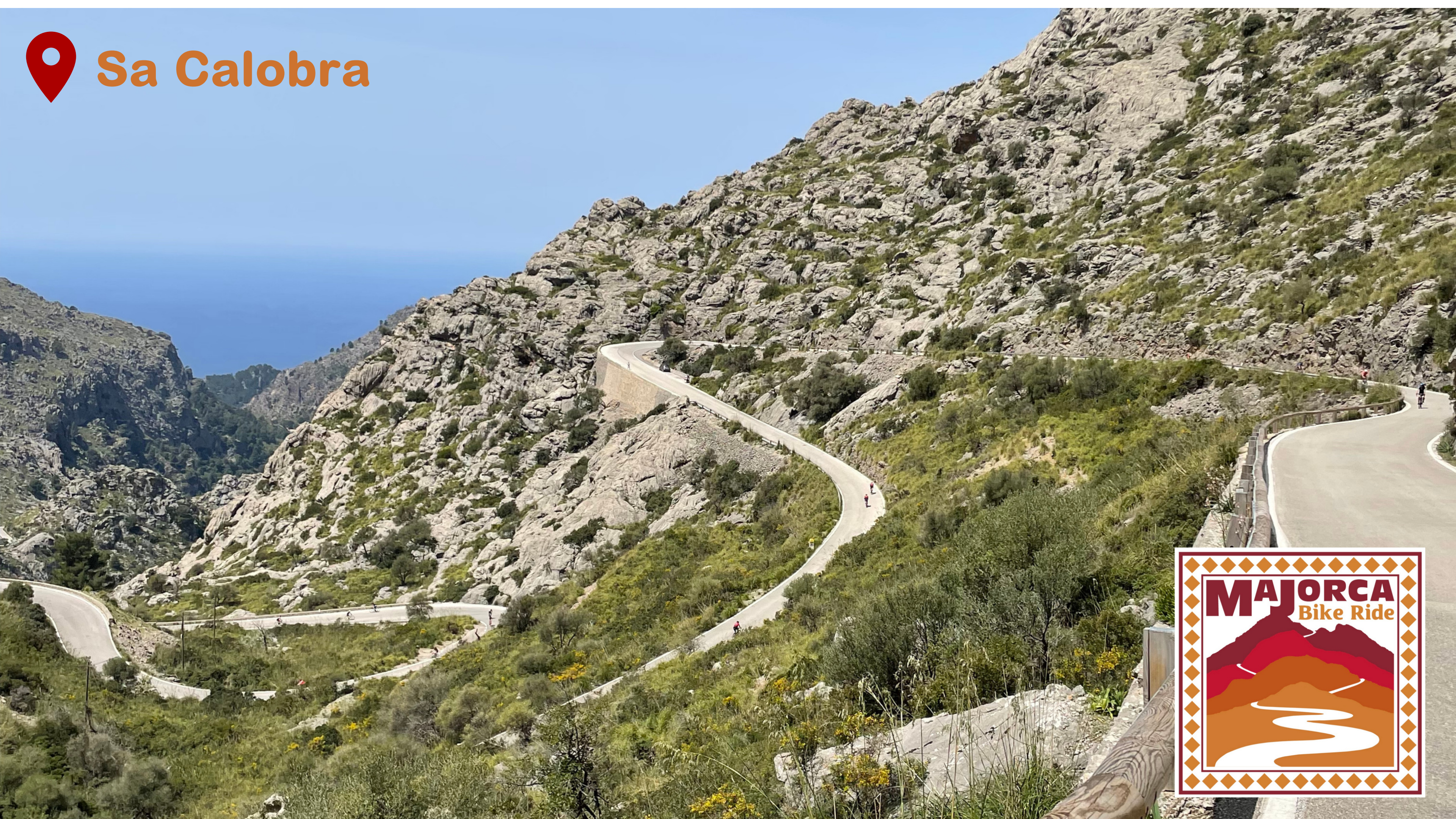
27th April - 2nd May 2022

- 52 Participants
- Led by Velindre President Jonathan Davies
- Velindre Patron Shane Williams, Consultant Emma Hudson and Professor Tom Crosby also in attendance.





Sa Calobra



Celebrity Attendance:



Sam Warburton
Velindre Patron



Jonathan Davies
Velindre President



Shane Williams
Velindre Patron

The Majorca overseas challenges was endorsed by three welsh rugby legends who are all extremely passionate about the work of Velindre Cancer Centre. All three representatives of the Charity participated in the challenge, engaged with fundraisers throughout and enhanced the experience of all participants.

Velindre Staff:

Velindre Cancer Charity staff led the Overseas Challenge from both an operational and engagement point of view and joined participants in the challenge from start to finish. Due to having such a small workforce within the Charity, selected staff members were required to remain for the second week to complete the challenge back to back.

Week 1:

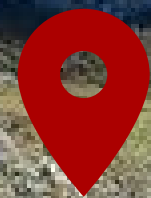
Kylie McKee
Amy Penketh
Lucesca Walters

Week 2:

Amy Penketh
Lucesca Walters

Within one week of returning from this challenge Kylie McKee and Amy Penketh will be leading over 60 new participants on a trek across Cuba.





Sa Calobra





Participant Feedback:

I would say that the two speeches given by consultants Tom Crosby and Emma Hudson really gave you the message you were making a difference.

I've never had that on a trip before & that has really stuck with me!

Time of my life as always, great people, great common cause & goal.

Alex Lenthall



Participant Feedback:

**This has been a brilliant event!
Thank you to everyone for
making it so special. Superb
organisation and unbelievable
effort from everyone involved
in completing the challenge.
A real pleasure to be there
with you all.**

Tom Kahan, Creo Medical



Participant Feedback:

**Thank you for making us both
feel so welcome on my first
ever Velindre Overseas event.**

What a challenge!!

**We have had an absolutely
incredible time.**

*Lloyd Rowe and Andy Shell,
Teachers at Bryntirion Comprehensive School*



Participant Feedback:

What an amazing experience. My first trip with Velindre but it certainly won't be my last. Brilliant people, well organised and for such an amazing cause. See you all at the next one!

Neil Williams, Legal & General



Participant Feedback:

**Thank you so much for
hospitality and friendship for a
great cause. Velindre... you are
amazing! I have made friends
and memories that I will cherish
forever. Thank you all!**

Darren Poole



Participant Feedback:

To have all of this and raise £210k for such a good cause is just fantastic. It really will be a massive boost to patients and staff and the delivery of the highest quality cancer care that the people of Wales deserve.

Great to welcome new folk to the Velindre fundraising family. This has really flourished over the past 10 years and family is for life! Do post on social media about the positive experience of this event and Velindre... it (and you!) makes a huge difference!

Professor Tom Crosby



Financial Breakdown

Costs:

Majorca Pack Artwork and Amendments	£445.00
Ultimate Travel Fee (Week 1)	£40,165.00
Ultimate Travel Fee (Week 2)	£65,185.00
Nation Radio Advert	£1,500.00
Cycling Jerseys	£2640.00
	<hr/>
	£109,935.00

Income:

Deposits	£5,698.50
Participants who did not attend	£8,583.96
Total Fundraising Income (Week 1)	£58,145.11
Total Fundraising Income (Week 2)	£233,652.95
	<hr/>
	£306,080.52

Total Profit:
£196,145.52

**Outstanding income of
£14,145.77 to be invoiced.**



Total Raised:

£210,291.29

Figures accurate as of 05.05.22

THANK YOU

to our sponsors



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CHARITABLE FUNDS COMMITTEE

ANNUAL DELIVERY PLAN 2022/23

DATE OF MEETING

17/05/2022

PUBLIC OR PRIVATE REPORT

Public

IF PRIVATE PLEASE INDICATE REASON

Not Applicable - Public Report

PREPARED BY

Emma Stephens, Head of Corporate Governance
Alaric Churchill (Interim) Charity Director
Steve Coliandris, Financial Planning & Reporting Manager

PRESENTED BY

Alaric Churchill

EXECUTIVE SPONSOR APPROVED

Alaric Churchill

REPORT PURPOSE

FOR APPROVAL

COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING

COMMITTEE OR GROUP

DATE

OUTCOME

Velindre Charity Senior Leadership Group

06/05/2022

SUPPORTED

ACRONYMS

1. SITUATION/BACKGROUND

- 1.1 This is the Velindre University NHS Trust Charity Annual Delivery Plan detailing its activities and proposed income streams for 2022/23.

2. ASSESSMENT / SUMMARY OF MATTERS FOR CONSIDERATION

- 2.1 The Annual Delivery Plan sets out Velindre University NHS Trust Charity key priorities and deliverables for 2022-23 to ensure that the Trust Charitable Funds are managed in accordance with the Charity's vision, mission, aims and objectives ref. **Appendix 1**.

3. IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	There are no specific quality and safety implications related to the activity outlined in this report.
RELATED HEALTHCARE STANDARD	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
EQUALITY IMPACT ASSESSMENT COMPLETED	Not required
LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATIONS / IMPACT	Yes (Include further detail below)
	The Delivery Plan sets out the financial projections, targets and costs associated with planned fundraising activities for the reporting period.

4. RECOMMENDATION

- 4.1 The Charitable Funds Committee is requested to **APPROVE** the Velindre University NHS Trust Charity Annual Delivery Plan for 2022/23 included at **Appendix 1**.

Appendix 1

Velindre University NHS Trust Charity Annual Delivery Plan 2022-2023



Velindre University NHS Trust Charity

Annual Delivery Plan 2022-2023

1. INTRODUCTION

- 1.1 The purpose of this delivery plan is to outline the Velindre University NHS Trust Charity key priorities and deliverables for 2022-23 to ensure that charitable funds are managed in accordance with the Charity's vision, mission, aims and objectives.
- 1.2 The primary audience for the plan is our Trustee's, fund holders and staff.

2. BACKGROUND

- 2.1 The Velindre University NHS Trust Board was appointed as corporate trustee of the charitable funds by virtue of the Velindre National Health Service Trust (Establishment) Order No. 2838 that came into existence on 1 December 1993, and that its Board serves as its agent in the administration of the charitable funds held by the Trust.
- 2.2 The Trust Board as Corporate Trustee is ultimately accountable for charitable funds donated by Velindre University NHS Trust. In order to facilitate the management of these funds the Trust Board has established a Charitable Funds Committee (CFC) to provide advice and recommendations to the Board.
- 2.3 During 2018, the Charity requested to change its name to incorporate the University status that had been awarded to the Trust. The Charity Commission accepted the change in name as requested under supplemental deed in October 2018 and the Charity is now registered with the Charity Commission as **1052501 – Velindre University NHS Trust Charity**.

3. CHARITY VISION, MISSION, AIMS & OBJECTIVES

3.1 Our Vision:

- To support the development and delivery of a World Class cancer care centre in Wales

3.2 Our Mission:

- To raise vital funds to make a real difference to Velindre Cancer Centre, its patients and their families and to enable ground breaking research and trials.

3.3 Our Aims:

- The Charity will prioritise its work for the next five years to support Velindre Cancer Centre, focusing on providing a robust funding model for research development and innovation to benefit its patients, staff and families. Fundraising for the Welsh Blood Service will be linked to specific identified appeals and needs in this period.
- Delivering on a 5 year strategy for the Charity
- The Strategy is driven by
 - Investment of funds into research that drive forward positive patient outcomes
 - Service development to change the delivery of patient experience and wellbeing
 - Investment into large capital equipment purchases not achievable through traditional funding mechanisms
- The annual plan is the operational delivery of the Charity's Strategy

3.4 Our Objectives:

General – For charitable purposes relating to the general or specific purposes of Velindre NHS Trust or to purposes relating to the health service and for any other Health Services for which specific monies have been donated for use within the UK or overseas.

Patients - For the relief of illness of patients suffering from cancer or its effects as well as other patients that are/or have been treated by Velindre University NHS Trust.

Donors - For the promotion of blood donation to grow the donor pool and to improve donor care and experience.

Staff - For the relief of sickness by promoting the efficient and effective performance and duties of Velindre University NHS Trust staff.

Research - For any charitable purpose or purposes principally (but not exclusively) at or in connection with Velindre University NHS Trust which will further the following aims.

- The investigation of the causes of cancer and the prevention, cure, treatment and defeat of cancer in all its forms.
- The advancement of scientific and medical education and research in topics related to cancer.
- The furtherance of any other charitable purpose for the relief of persons diagnosed with cancer.
- To support research and development into new and novel uses of blood, blood components and cellular technology for the benefit of patients.
- Improve donor care through the development of research activity.
- Improve quality and safety of blood components and products.
- Support research to improve outcomes in transplantation.

4. SCOPE

This delivery plan covers the following key aspects:

- 4.1 Strategic Direction & Strategy for 2022-27
- 4.2 Governance Delivery Plan 2022-23
- 4.3 Fundraising Delivery Plan 2022-23
- 4.4 Financial Delivery Plan 2022-23

4.1 STRATEGIC DIRECTION & STRATEGY FOR 2022-27

- 4.1.1 Developing a new five-year strategy for the Charity covering the period 2022-27 has been a key priority over the previous year, the development of which has been led by the Interim Charity Director. This Strategy will balance the ambition and strategic direction of the Charity recognising the new context within which the Charity is operating resulting from the COVID 19 global pandemic. The development of key new channels to market and data capabilities are fundamental the delivery of this comprehensive transformational Programme.

4.2 GOVERNANCE DELIVERY PLAN

- 4.2.1 The Trust Board as Corporate Trustee is ultimately accountable for charitable funds donated to Velindre University NHS Trust. In order to facilitate the administration and management of these funds the Trust Board has established a Charitable Funds Committee to provide advice and recommendations to the Board
- 4.2.2 The Charitable Funds Committee manages, on behalf of the Trust Board, all aspects of control, investment and expenditure of the Trust's charitable funds. The Trustees have been appointed under s11 of the NHS and Community Care Act 1990.
- 4.2.3 The Charitable Funds Committee may delegate authority to commit expenditure but cannot delegate accountability.
- 4.2.4 The Executive Director of Finance is responsible for the day to day management and control of the administration of the charitable funds and reports to the Charitable Funds Committee. The Executive Director of Finance has particular responsibility to ensure that the spending is in accordance with the objectives and priorities agreed by the Charitable Funds Committee and the Board; that the criteria for spending charitable monies are fully met; that full accounting records are maintained and that devolved decision

making or delegated arrangements are in accordance within the policies and procedures set out by the Board as the Corporate Trustees.

4.2.5 The Charitable Funds Committee (CFC) is supported by the Charitable Funds Senior Leadership Group and meets on a monthly basis. A substantive review of the remit and terms of reference for this group has been undertaken during 2022-2023 to ensure it remains fit for purpose. The revised Terms of Reference were formally **APPROVED** by the Charitable Funds Committee.

4.2.6 Governance activity 2022-23 will include:

- **Review the Charitable Funds Committee Effectiveness**

Ensure the Charitable Funds Committee complies with the following annual governance requirements:

- Terms of Reference Review
- Committee Cycle of Business Review and update for 2022-23
- Response to Internal Audit conducted February / March 2022
- Compile a Committee Annual Report for the Trust Board reporting on the activity of the Charity during the previous year.
- Undertake the Annual Committee effectiveness survey.

- **Monitor progress in respect of the Committee Business Cycle for 2022-23**

It is good practice for all Board/ Committees to have in place an agreed work plan for the year and Committee Business Cycle for 2022-23 will be monitored to ensure agreed activity is met. The oversight of the activities planned and enacted will be in the first instance by the Senior Leadership Group (SLG) of the Charity and then confirmed by the CFC.

- **Continue to identify new Risks and review and management of existing risks affecting the Charity.**

This will be achieved through regular monitoring and consideration of the Charity Risk Register and activities affecting the Charity.

- **Fundraising risks will be mitigated by the development of new digital capabilities and opening of new channels to market.**

4.3 Fundraising in 2021/22

4.3.1 Fundraising Activities

Events organised on behalf of Velindre

An area that had increased dramatically up until March 2020 when the pandemic impacted and this source of income stopped. Prior to this, fundraising activities were taking place every weekend of the year for Velindre, and on most week- nights. Each supporter completes an Online Event Registration Form, which provides Velindre Fundraising with the information required to provide the necessary level of support. Velindre Fundraiser then contacts the supporter to offer advice, motivation and support, and develops the relationship. Supporters have initiated a number of highly successful virtual events. The event Programme has started to recover but is still not at pre-pandemic levels. The new 5 year strategy will look to complement event fundraising by opening new channels to market.

In Memory

It is an area, which has historically caused issues, as many families have, and continue to mistakenly donate to other charities with a presence at Velindre Cancer Centre, particularly CRW, in the belief that they are donating to Velindre. There is regular communication twice a year with funeral directors, updates on income and how funds are being used. Direct contact with donors is far more difficult as GDPR prevents Funeral Directors passing on donor contact details to charities. In most instances receipts and thank you letters need to be sent to Funeral Directors in the hope that they will pass onto families.

It is envisaged that the development of a comprehensive Charity Brand messaging Programme will help address the inconsistencies in recognition for Velindre.

Legacies

Over the last 10 years legacy income has averaged 18% of total income, which is a healthy position. Because of the volatile and unpredictable nature of legacy income, Charitable Board has decided that Legacy income will not be considered “core” income, but in addition to the funds raised by Velindre Fundraising. Legacy promotion throughout the charity sector has become far more prominent in recent years, with some Charities adopting a far more aggressive campaigning stance.

For the first time the Charity will be developing a managed campaign targeted at Professional organisations and therefore the income target for 2022-23 will include forecasted legacies.

Legacies		
2021/2022		1,299,000
2020 \ 21	Dec-20	452,140
2019 \ 20	17%	490,394
2018 \ 19	18%	601,074
2017 \ 18	34.00%	1,036,979
2016 \ 17	16.00%	366,331
2015 \ 16	21.00%	608,125
2014 \ 15	25.00%	872,003
2013 \ 14	25.00%	622,452
2012 \ 13	11.00%	230,043
2011 \ 12	13.00%	159,645
2010 \ 11	16.00%	274,219
2009 \ 10	18.00%	192,564
		7,240,969

Regular Givers

Velindre's Regular Givers have increased year on year. This is a rich source of guaranteed income with low recruitment cost levels, and long term support. A campaign new campaign will be develop highlighting direct debit (previously not available) and digital giving.

Company adoptions

Despite Covid restrictions, a number of companies have chosen Velindre as their Charity of the Year, including Cardiff Airport and the Walters Group. Both have agreed to continue fundraising in 2022 / 2023. An area that seen substantial improvement in a few years. Seven years ago there were a handful of small companies who had chosen to support Velindre. The increase in Velindre's profile has undoubtedly assisted when companies have committed to supporting Velindre instead of other charities. Targeting Trusts,

Foundations and strategies to increase larger coma adoptions require more specialised time spent with clients to ensure maximum profitability from the relationship.

Grant Giving Bodies & Trusts

Velindre Fundraising has successfully applied NHS Together (formerly the Association of NHS Charities) and received grants totaling over £120,000 in 2022 \ 2023. Velindre Fundraising has not yet been involved in a major capital project, where applications to Grant Giving Bodies and Trusts would form an essential part of any fundraising programme. If there are specific items that are required at the newly built Velindre Cancer Centre, there could be an opportunity to make applications.

Velindre Activities

It has been extremely difficult to organise any fundraising events since March 2020. A number of virtual fundraising activities have taken place, and these will continue until Covid restrictions are lifted. Whilst organising events can have a cost implications we have proved through the development of the 'Wear Red' campaign the return on investment can be very rewarding, as part of an overall programme of diverse fundraising activities they play a crucial role in:

- Raising funds.
- Recruiting new supporters, ideally high worth, and ongoing future donors.
- Raising the profile of an activity, a particular appeal, and work of Velindre.
- Acknowledging the work of existing high worth individuals.

Velindre Fundraising work very closely with new and existing supporters to put in place a diverse fundraising programme of repeatable events, which also achieve the above criteria. In normal times the Fundraising Team organises a number of activities throughout the year, designed to develop and grow and become an annual activity in people's calendars.

Young Velindre Ambassadors

The Young Ambassadors programme has been completely relaunched, and despite schools not being attended by the majority of pupils, the response has been very impressive. A number of Young Ambassadors have designed and initiated their own fundraising programmes, and this is an area that will be expanded upon in 2022 /2023.

Wear Red for Wales and Velindre

An inclusive mass participation activity encouraging schools and companies to wear something red on the eve of the 6 Nations Rugby tournament. Wear Red planned for February was a massive achievement for 2022 this will be replicated for 2023.

Overseas Challenges

Velindre has been the leading charity in Wales for overseas challenges for over ten years, beginning with the Kilimanjaro Captains Climb in 2010. Covid has been a major disruption to overseas challenge plans, with 3 major events having to be postponed, and no guarantee that Covid restrictions will not affect these events going forwards. Even if it does, extensions will need to be granted to riders as they will be unable to organise events to raise funds due to Covid restrictions.

Future activities planned are:

- 2021 Cuba to May 2022
- 2020 September 3 Canyons Bike Ride postponed to September 2022
- 2022 to February 2023 Kilimanjaro Trek

Patrons and Ambassadors

Velindre Fundraising Patrons make a highly significant contribution. 3 of the Patrons will have been involved for over 14 years. The social media followers of some of the Patrons has been hugely beneficial during the Covid pandemic in highlighting the crisis facing charities, and how important it is to continue to support Velindre. Velindre Patrons cover a wide spectrum and are amongst the leading figures in sport, music and entertainment. 1 President, 2 Vice Presidents, 11 Patrons and 38 Ambassadors.

Website, systems and procedures

The Covid pandemic has allowed time for systems and procedures to be refined, updated and improved, ready to take advantage of the new landscape that Charities are faced with. The Fundraising Database will need to be replaced in 2022 with a comprehensive CRM system. This new system will allow further development in digital data capture, event application and communications management. A new digital programme will be developed to enhance micro giving capabilities.

Income Forecast 2022/ 2023

2022 - 2023 Forecast	£
3 Canyons Sept	50,000 New
Cuba May 2022	50,000 New
Cardiff Triathlon	10,000 3 rd Year
Majorca 2022	50,000 New
Cardiff Half Marathon	20,000 4 th year
London Marathon	10,000 10 th year
Castle 2 Castle	35,000 5 th Year
Wear Red	75,000 3 rd Year
Jonathan Davies Golf	20,000 10 th Year
BAY 10K	40,000 3 rd Year
Charity of the Year	30,000 ongoing
In Memory	250,000 ongoing
CAFS	30,000 ongoing
General donations	739,000 ongoing
Facebook	60,000 ongoing
Regular Givers	60,000 ongoing
Tribute Funds	60,000 ongoing
Supporters Events	50,000 new tool box
Wedding Favours	10,000 ongoing
Xmas Appeal	25,000 new tool box
Young Ambassadors	10,000 ongoing

2022 - 2023 Forecast	£
Facebook Birthday Fund	30,000 ongoing
Mile a day in May	30,000 ongoing
Rhian Rose Fund	50,000 ongoing
Merchandise sales	6,000 ongoing
Micro donation development	300,000 New
	2,100,000
Legacies	700,000 on going
Total Income	2,800,000

4.4 FINANCIAL DELIVERY PLAN 2022-23

4.4.1 INTRODUCTION: FINANCIAL OUTLOOK

Last year's annual delivery plan set out a level of income that was expected to be achieved for 2021-22 against the Charity's unrestricted fund at that point in time. This figure of £1,429k was revised down from prior years to consider the impact that Covid would have on the income performance of the Charity during the financial year.

Despite the impact of Covid, the Charity managed to far exceed expectations and raise £2,739k against the unrestricted fund during 2021-22, which is an overachievement of £1,310k against the planned target for the period. The Charity did benefit during the year from receiving £1,059k of legacies, which notably helped the position, however this is due to engagement from the Fundraising team.

4.4.2 FINANCIAL PLAN

A financial plan ensures that charitable funds are managed in accordance with the charity's vision, mission, and aims. This is achieved by setting a realistic income target which will allow for the charity to meet these objectives. The plan must also ensure that Income is allocated and spent in a timely manner, taking full account of the agreed reserves policy, to meet the priorities as identified by the Charitable Funds Committee.

The Information provided below outlines the current projected financial position of the charity for 2022-23.

4.4.3 CURRENT PROJECTION OF FUND BALANCES AS AT 31 MARCH 2023

Table A below provides a summary of the forecast financial position for 2022-23 taking into account current existing commitments approved by the Charitable Funds Committee before considering additional income to be generated during the financial year.

Table A

Fund Category	Opening Balance as at 1 April 2022 £000	Total Current Forecast Commitments & Transfers as at 31 March 2023 £000	Forecast Final Balance (excl income) as at 31 March 2023 £'000
Unrestricted	2,633	(2,448)	185
Unrestricted/ Designated Funds			
Patients Funds	183	0	183
Staff Funds	81	0	81
Research Funds	3,711	(700)	3,011
Sub Total	3,975	(700)	3,275
Welsh Blood service	99	0	99
Sub Total Funds	6,707	(3,148)	3,559
Investment Growth Funding Pot	654	(515)	139
Total	7,361	(3,663)	3,698

*Fundraising staff and overhead charges of £515k are expected to be funded from the investment income and gains during 2022-23.

The current total estimated commitments against the Charity for 2022-23 is **£3,663k**. This includes all existing grants/ bids which have been previously approved by the Charitable Funds Committee. Included in the above commitments are:

- Pre-approved Grant Expenditure £2,933k
- Fundraising expenditure of £165k
- Fundraising staff £292k
- Overheads £223k
- General expenditure against the unrestricted general fund of £50k

4.4.4 INCOME TARGET 2022-23

The income target against the unrestricted fund will be set at £2,800k, with the Fundraising Team feeling that this is a challenging but realistic target.

£177k of income will also be expected to be generated against the unrestricted/ designated funds based on the previous year's performance as illustrated in table B below.

Table B

Fund Category	Opening Balance as at 1 April 2022	Total Forecast Income as at 31 March 2023	Other Income Forecast Dividend /Investment 31 March 2023	Total Forecast Commitments & Transfers 31 March 2023	Forecast Final Balance as at 31 March 2023
	£000	£000	£000	£000	£'000
Unrestricted	2,663	2,800		(2,448)	2,985
Unrestricted/ Designated Funds					
Patients Funds	183	1		0	184
Staff Funds	81	1		0	82
Research Funds	3,711	174		(700)	3,185
Sub Total	3,975	176	0	(700)	3,451
Welsh Blood service	99	1		0	100
Sub Total Funds	6,707	2,977	0	(3,148)	6,536
Investment Funding	654		113	(515)	252
Total	7,361	2,977	1113	(3,663)	6,778

Based on the current level of commitments, and assuming that income achieves the desired target, then the unrestricted reserve target for 2022-23 would be set at **£816k**,

which accounts for a positive reserve variance of **£1,817k** against the unrestricted balance of £2,633k as at 1 April 2022.



GIG
CYMRU
NHS
WALES

Ymddiriedolaeth GIG
Prifysgol Felindre
Velindre University
NHS Trust

CHARITABLE FUNDS COMMITTEE

MANAGEMENT OF PUBLIC HEALTH WALES CHARITABLE FUNDS

DATE OF MEETING	17/05/2022	
PUBLIC OR PRIVATE REPORT	Public	
IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report	
PREPARED BY	MATTHEW BUNCE, EXECUTIVE DIRECTOR OF FINANCE	
PRESENTED BY	MATTHEW BUNCE, EXECUTIVE DIRECTOR OF FINANCE	
EXECUTIVE SPONSOR APPROVED	MATTHEW BUNCE, EXECUTIVE DIRECTOR OF FINANCE	
REPORT PURPOSE	FOR APPROVAL	
COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING		
COMMITTEE OR GROUP	DATE	OUTCOME
Velindre Charity Senior Leadership Group	06/05/2022	Discussed and Reviewed
ACRONYMS		

1. SITUATION/BACKGROUND

- 1.1 Velindre UNHST has continued to manage charitable funds on behalf of PHW since its transfer out of the Trust and establishment as a separate statutory body.
- 1.2 PHW currently contributes to the management cost of the charity through the annual overhead charge which represented 5.51% of the total income received during 2021-22 (2.77% in 2020/21) and expected to be circa 8% in 2022/23. Prior years being less due to the Charity Director vacancy and redirection of staff to support Covid. The overhead charged to PHW during 2021/22 was £1,083 and was deducted directly from the PHW fund balances based on the average balance of funds held during that period.
- 1.3 During 2019-20 and 2020-21 the Charitable Funds Committee sought assurances from PHW that they had plans to spend the funds held by the Trust on their behalf.
- 1.4 During 2019-20 PHW responded to confirm they had agreed spending plans and the balance of funds did reduce. However, with the onset of the pandemic during 2020-21 and continuation into 2021-22 PHW has primarily focused on its response to Covid-19 and implementation of the charitable fund investment plans was put on hold.
- 1.5 The Charitable Funds Committee accepted that during the pandemic spend of the charity funds was not prioritized, but in October / November 2021 sought assurance that the Funds would be completely spent by the end of the financial year with the intension that the PHW fund would be closed and the Trust no longer would manage charitable funds on its behalf.
- 1.6 In the May 2021 Charitable Funds Committee members asked what the current position was in terms of Velindre Trust Charity continuing to manage the small amount of funds (c£50k) held on behalf of PHW as at 31st March 22.
- 1.7 In September 2021 the PHW DoF wrote to the Trust to explain that over the last 18 months PHW has been working at an enhanced level of response to the pandemic, with many staff mobilised to other roles and many of the business as usual functions being put on hold. Unfortunately, they lost momentum on their plans to spend the charitable funds in full (although the balances are considerably lower than they were a few years ago). He noted that as the funds are of such low value it would clearly be poor value for money in setting up a new charity with all the necessary administration and so asked that the Charity Committee consider management of the charitable donations they receive and spend against them on an ongoing basis.

2. ASSESSMENT / SUMMARY OF MATTERS FOR CONSIDERATION

- 2.1 The reasons provided by PHW for asking that the Trust continues to manage their charitable donations relates to the significant cost to PHW in setting up and running its own Charity relative to the small value of donations it receives.
- 2.2 There is DOH best practice guidance (adopted by WG) regarding the management of Charitable Funds in the NHS which encourages organisations that manage high value and / or volume of funds to undertake this on behalf of other organisations that have low value and / or volume of transactions in order to avoid them incurring significant costs to establish their own charity and associated governance.
- 2.3 The Trust DoF met with PHW DoF in December 2021. PHW are asking the Charitable Funds Committee to consider providing PHW with ongoing management of their charitable funds. This is something that is common for smaller NHS organisations for whom it is not economical to establish their own charity and associated governance. This is normally undertaken with a reasonable fee being charged. The Trust already charges a % fee on the average value of fund balances which covers the overheads costs of running the charity. The charge for 2021-22 was £1,083 and was deducted directly from the fund balances held in relation to PHWT However, in addition to this PHW have proposed the following:
1. To continue to charge the overheads as a % of fund balances.
 2. A sliding scale of fees. An additional set fee of £3k if balances are up to £100k and then 2% of fund balances additionally on any amount above that.
 3. That annual spending plans are provided in February each year
 4. That all spending plans must work on the basis that the money is spent in full within 2 years unless in exceptional and agreed circumstances
- 2.4 The Trust DoF agreed to put the proposal to CFC for consideration, but suggested the fee should include a fixed element as the Charity Overheads / admin exists whether it holds £0 or £100k funds for PHW.
- 2.5 It is proposed that the Trust DoF agree the detail of the fee structure ensuring that there is a fixed element and a % uplift based on fund value.

- 2.6 PHW have recently received a £20k bequest which executors are seeking confirmation whether PHW will accept the monies. Given the increased public awareness of the role of PHW during the pandemic it is anticipated their charitable donations and bequests to increase over coming years.

3. IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	There are no specific quality and safety implications related to the activity outlined in this report.
RELATED HEALTHCARE STANDARD	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
EQUALITY IMPACT ASSESSMENT COMPLETED	Not required
LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATIONS / IMPACT	Yes (Include further detail below)
	As included in paper detail the DoF will agree a new fee mechanism with PHW for the continued management of their charitable donations and expenditure

4. RECOMMENDATION

- 4.1 The Committee is asked to **APPROVE**:
- 4.1.1 the continued management of the Charitable donation received by PHW through a dedicated fund and management of the associated spend against the fund

- 4.1.2 the proposed fee mechanism to compensate the Trust Charity for providing this service be agreed by the Trust DoF with PHW, but will include a fixed fee and % of fund value fee
- 4.1.3 the PHW annual spending plans are submitted to the Trust Charity in February each year
- 4.1.4 that all PHW spending plans assume that the allocated funding is spent in full within 2 years unless in exceptional and agreed circumstances

CHARITABLE FUNDS COMMITTEE

CHARITY ANNUAL ACCOUNTS 2020/21 LESSONS LEARNED

DATE OF MEETING	17/05/2022	
PUBLIC OR PRIVATE REPORT	Public	
IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report	
PREPARED BY	Steven Coliandris, Financial Planning and Reporting Manager Chris Moreton, Deputy Director of Finance	
PRESENTED BY	Matthew Bunce, Executive Director of Finance	
EXECUTIVE SPONSOR APPROVED	Matthew Bunce, Executive Director of Finance	
REPORT PURPOSE	FOR DISCUSSION / REVIEW	
COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING		
COMMITTEE OR GROUP	DATE	OUTCOME
Audit Committee	03/05/2022	NOTED
ACRONYMS		
CFC ISA	Charitable Funds Committee International Standard on Auditing	

1. SITUATION/BACKGROUND

- 1.1 The 2020/21 Annual Accounts were expected to be unconditionally signed off by the Charitable Funds Committee at an extraordinary meeting on 22 December 2021, where Audit Wales presented the ISA 260 report for Velindre University NHS Trust Charitable Funds. The ISA 260 report included an assessment of the impact of Covid-19 on the audit timelines, which had resulted in a later timetable than previous years.
- 1.2 The update provided by Audit Wales to CFC in December 2021 confirmed that although the audit had been substantially completed, an immaterial error had been identified. This did not affect the unqualified opinion of the accounts, however, auditing standards required Audit Wales to undertake further testing after the extraordinary meeting thereby delaying the submission of the annual accounts.
- 1.3 The Charity's 2020/21 annual accounts were submitted on the 31st January 2022 the statutory deadline, following the satisfactory completion of further testing in line with the conditional approval granted by the extraordinary meeting of the CFC in December 2021.
- 1.4 Professor Donna Mead OBE, Chair, Velindre University NHS Trust suggested that a lessons learned exercise should be conducted in order to help facilitate timely completion for 2021/22 accounts.
- 1.5 The process improvements identified from the lessons learned exercise are presented in section 2.

2. ASSESSMENT / SUMMARY OF MATTERS FOR CONSIDERATION

- 2.1 There were several challenges which affected the audit of the 2020-21 accounts, such as the audit starting on the 8th November, whereas in previous years the audit would begin in September. During the audit a member of the audit team caught Covid which resulted in the work being delayed by a week. In addition, the team were unable to access key information due to a member of the fundraising team being off on long term sick, which delayed the ability to provide required evidence. A further unexpected challenge was the outsourcing of the Annual Report which significantly impacted the ability to make changes to the report, with each amendment having to be sent externally to be corrected.

- 2.2 Audit Wales and Velindre Finance jointly undertook a lessons learned exercise as a result of the situation outlined in section 1.
- 2.3 As a result of this exercise, the key areas for process improvement are as follows:
 - 2.3.1 Make earlier preparations for audit start, building on the good relationship in place with Audit Wales. Ensure that resilience is built into the process for a potential later start date of the audit, which will include earlier drafting and review of the annual report narrative before the audit, and aligning the date for sign off by the Charitable funds Committee.
 - 2.3.2 Improve oversight of the annual accounts process through allocation of more senior experienced support on production of the accounts.
 - 2.3.3 Increase provision of quality assurance, building on improvements to the preparation of the accounts from the previous year.
 - 2.3.4 Improve automated accruals review process.
 - 2.3.5 Improve the process of recording income in fund raising team.
 - 2.3.6 Improve the Analytical Review process by ensuring internal review and sign-off by Trust and Audit prior to any outsourcing to publishing suppliers of financial statement for review.
 - 2.3.7 Evaluate how information sharing can be improved due to size of Analytical Review and issues experienced.
- 2.4 In order to deliver the recommendations, the Finance team will reallocate roles and responsibilities within the team to segregate duties, reduce risk and improve performance in the delivery of the Charity annual accounts production as follows:
 - 2.4.1 The Financial Operations team will be responsible for producing the Charity annual accounts in addition to the Trust's annual accounts. Oversight will be provided by the Head of Financial Operations.
 - 2.4.2 The Charity Finance Business Partner will focus on the provision of day-to-day operational finance support to the Charity. E.g. Delivering the systems and processes required for recording income and the provision of timely financial information to support the delivery of the Charity's strategy and plans. Oversight will be provided by the Financial Planning and Reporting Manager.

- 2.5 It is expected that these changes will improve resilience for the production of the Charity's 2021/22 annual accounts and reduce the risk of having a single point of failure.

3. IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	There are no specific quality and safety implications related to the activity outlined in this report.
RELATED HEALTHCARE STANDARD	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
EQUALITY IMPACT ASSESSMENT COMPLETED	Not required
LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATIONS / IMPACT	There is no direct impact on resources as a result of the activity outlined in this report.

4. RECOMMENDATION

- 4.1 The Charitable Funds Committee is asked to **DISCUSS & REVIEW** the lessons learned and the proposed Finance Function improvements that will help facilitate timely completion for 2021/22 and future accounts.

CHARITABLE FUNDS COMMITTEE

FINANCIAL STATEMENT REPORT 1ST APRIL 2021 TO 31ST MARCH 2022

DATE OF MEETING	17/05/2022
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PUBLIC OR PRIVATE REPORT	Public
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IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report
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PREPARED BY	Steve Coliandris, Financial Planning & Reporting Manager
PRESENTED BY	Steve Coliandris, Financial Planning & Reporting Manager
EXECUTIVE SPONSOR APPROVED	MATTHEW BUNCE - EXECUTIVE DIRECTOR OF FINANCE

REPORT PURPOSE	FOR DISCUSSION / REVIEW
-----------------------	-------------------------

COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING		
COMMITTEE OR GROUP	DATE	OUTCOME
Velindre Charity Senior Leadership Group	06/05/2022	Discussed and Reviewed

ACRONYMS	

1. SITUATION/BACKGROUND

- 1.1 This paper and the supporting schedules have been completed to provide the CFC with the financial position of the charitable funds accounts as at the 31st March 2022. The information within the statements should provide the CFC with a clear picture of the financial position and performance of the Charitable funds accounts, which will allow for the committee to discuss, evaluate and make decisions on the best use of resources.
- 1.2 The report is a standing agenda item providing the CFC with a breakdown of the financial activity during the period. The report consists of the following sections and is further explored in Appendix 1
- Financial Report for the period ending 31st March 2022.
 - Balance Sheet as at 31st March 2022.
 - Current and future forecasted performance of the unrestricted fund.
 - Cash Flow Forecast as at 31st March 2022.

2. ASSESMENT / SUMMARY OF MATTERS FOR CONSIDERATION

- 2.1 Key Issues to note are as follows:

Income

Despite the challenges that we expected this year from the pandemic, the charity raised £3,180k during 2021-22 which is significantly above the planned target, which in light of the circumstances and challenges from Covid is a very successful year.

Expenditure

Expenditure was significantly lower than planned during 2021-22 which was the result of two main causes:

1. Redirection of Charity funded staff to support core service during the pandemic.
2. Project slippage which is either due to delay in projects actually starting or due to staff vacancies.

Investments

The investment portfolio position has increased by £196k since the start of the financial year, which represents an increase in valuation of 3.27% for 2021-22.

Dividends of £113k were received, which were reinvested back into the portfolio during 2021-22.

Reserve Policy

The unrestricted reserve target is currently set at £816k which is an over achievement of £1,817k when compared to the balance of £2,633k that is in the Charitable funds accounts as at the 31st March 2022.

3. IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	There are no specific quality and safety implications related to the activity outlined in this report.
RELATED HEALTHCARE STANDARD	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
EQUALITY IMPACT ASSESSMENT COMPLETED	Not required
LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATIONS / IMPACT	Yes (Include further detail below)
	Please refer to financial statement report.

4. RECOMMENDATION

4.1 The Charitable Funds Committee is asked to **Note** the contents of this financial briefing paper and in particular:

- The financial performance of the Charity for the period ending 31st March 2022.
- The position and performance of the Charity's investment portfolio during 2021-22.



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Velindre UNHS Trust Charitable Funds

VELINDRE UNIVERSITY NHS TRUST CHARTIABLE FUNDS **Financial Position Report** **1st APRIL 2021 TO 31st MARCH 2022**



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Velindre UNHS Trust Charitable Funds

1. Purpose

This paper has been completed to provide the CFC with the financial position of the charitable funds accounts as at the 31st March 2022. The information within the statements should provide the CFC with a clear picture of the financial position and performance of the Charitable fund's accounts, which will allow for the committee to discuss, evaluate and make decisions on the best use of resources.

2. Income Summary 1st April to 31st March 2022

Purpose:

To monitor the income performance of the Charity against the planned income target.

Key Issues:

The annual delivery plan produced in March 2021 set out a level of income that was expected to be achieved for 2021/22 against the Charity's unrestricted fund at that point in time. This figure was revised down from prior years to consider the impact that Covid would have on the income performance of the Charity during the financial year.

- The total income received during 2021/22 was £3,067k, and included £1,299k in legacies, which has notably helped the overall position for income, however this is following the fundraising team engaging with professional Organisations.
- Despite the impact of Covid and the further challenges of the omicron variant, the Charity still received £2,739k of income and legacies against the unrestricted fund during 2021-22. This led to an overachievement of £1,310k against the planned target. Within the total £1,059k was related to legacies.
- Income performance for 2021-22 is £384k greater when compared with 2020-21.



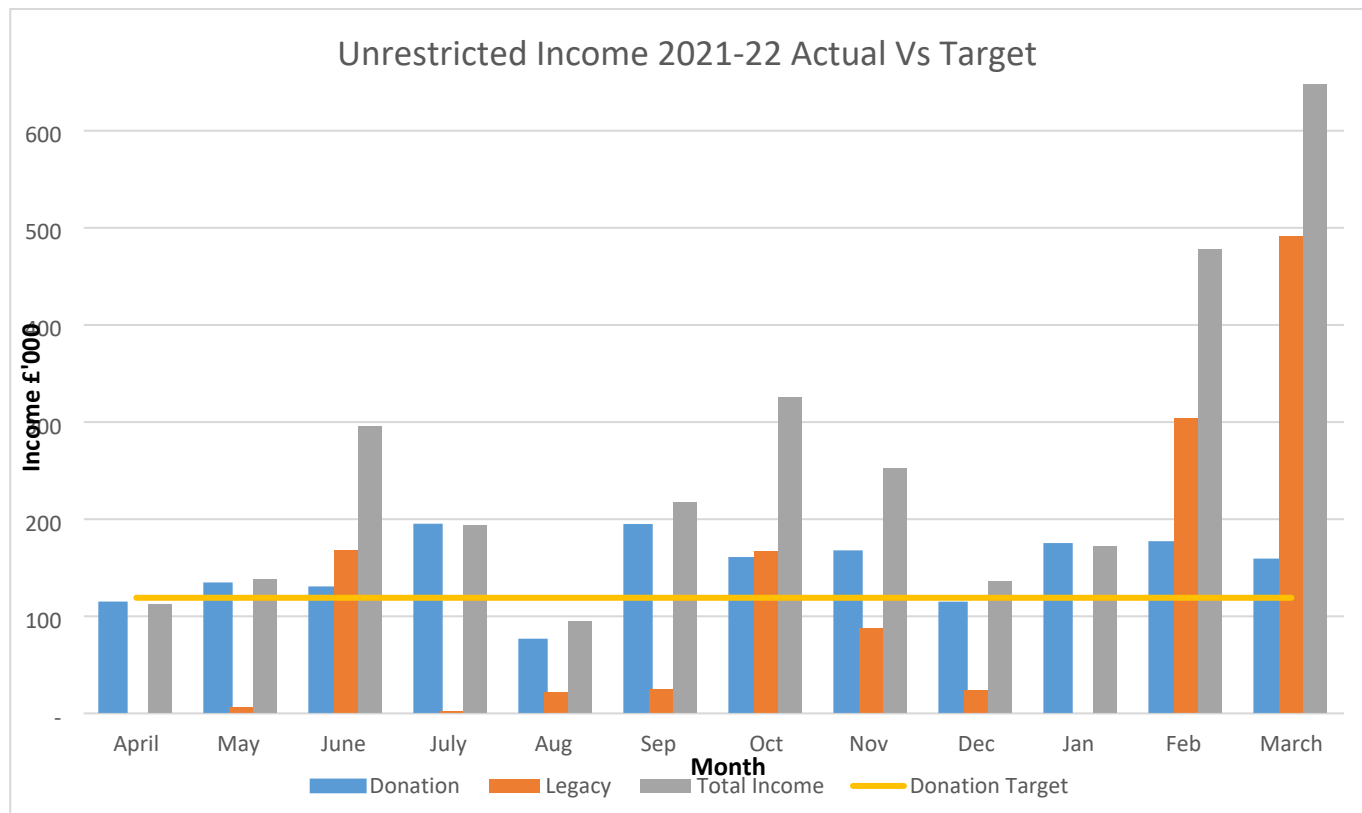
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Velindre UNHS Trust Charitable Funds

Fund Category	Planned Income £'000	Actual Income £'000	Variance £'000	Last Year Income for the same period £'000
Unrestricted	1,429	2,739	1,310	2,493
Unrestricted/ Designated Funds				
Patients Funds	13	2	-11	13
Staff Funds	6	1	-5	5
Research Funds	57	324	267	171
	76	327	251	189
Welsh Blood service	1	1	0	1
Total Income	1,506	3,067	1,561	2,683

The graph below provides the monthly income performance of the Charity's unrestricted fund against planned during 2021/22.



Velindre UNHS Trust Charitable Funds

3. Expenditure Summary 1st April to 31st March 2022

Purpose:

To compare charitable funds expenditure incurred, with budget expectations and expenditure incurred last year during the same financial period.

Key Issues:

- The annual delivery plan produced in March 2021 set out the level of commitments that were expected to be incurred for 2021/22 against the Charity's unrestricted fund at that point in time. The total estimated commitments against the Charity for 2021/22 was £3,569k and included all existing grants/ bids previously approved by the Charitable Funds Committee as well as Fundraising and overhead costs.
- The total expenditure for 2021-22 was lower than planned by £1,307k. A significant proportion of the underspend (£727K) is a result of reduced activity due to redirection of Charitable funded staff to support the service in response to Covid. Other variances in most cases related to timing issues, where projects have either been delayed in starting or due to staff vacancies. The spend for projects that have delayed starts is expected to be deferred over future years.

	Planned Expenditure £000	Actual Expenditure £000	Variance £000	Last Year Expenditure £000
Unrestricted	2,523	1,929	594	2,092
Unrestricted / Designated & Restricted Funds				
Patients Funds	22	5	17	25
Staff Funds	5	0	5	-2
Research Funds	1,013	328	685	631
	1,040	333	707	654
Welsh Blood service	6	0	6	0
Total Expenditure	3,569	2,262	1,307	2,747

Notes:

As previously agreed with the committee the cost of fundraising staff for 2021-22 (£205k) is excluded from the table, with the team funded from the investment income and gains during 2021/22.

Overheads of £151k are also excluded from table will be funded via the investment growth during 2021-22.

Velindre UNHS Trust Charitable Funds

Total expenditure can be categorised into 3 main subheadings; Grant/Projects, Fundraising, and Overheads with further details provided below.

- The graphs on the attached appendice provide a comparison of actual expenditure against planned for each live Grant/Project since funding was approved (excluding Advancing Radiotherapy: Moondance, Lucas and Probert with the details provide below). The following projects have not yet incurred any spend:
 - 2021-05 R&D Small Grants Scheme - £50k funding approved in April 2021, the scheme was launched in July 2021 and remained open for funding bids until September 2021. Funding has recently been awarded to several projects and draw down against these is expected over the next 12 months
 - 2022-02 Early Phase Trial: Medical Session for the Future - £134k was approved in May 2021. There was a delay in the appointment of a consultant and a start date is currently being arranged
- Total spend against the Advancing Radiotherapy Fund for 2021-22 was £3,138k. The following table provides further details of committed expenditure against total income/funding available.

	Total Income/Funding £'000	Actual Expenditure £'000	Total Committed Expenditure £'000	Remaining Uncommitted Balance
Moondance	3,000	2,289	2,835	165
Lucas Fund	825	367	651	174
Head & Neck (Probert)	1,304	482	951	353

- Fundraising expenditure for 2022-22 totaled £205k against an annual forecast of £245k at the start of the year. This is largely due to the impact of the pandemic and redirection of staff to support core service.
- Overheads costs of £151k are largely support staff costs including the Trust's Charity Director and a proportion of the Governance Manager and Finance staff who provide the general management of the Charitable Funds. This is lower than originally planned due to the Charity Director post vacancy from the period April to mid-June 202 and a proportion of redirection of staff due to Covid.

Velindre UNHS Trust Charitable Funds

4. Fund Balance Movements 1st April to 31st March 22

Purpose:

To monitor the movement in fund balances during the period.

Key Issues:

The level of fund balances on Velindre's unrestricted and restricted funds increased during 2021-22 by £805k from £5,902k to £6,707k, which is in recognition of income over performance, and reduced expenditure largely due to staff redirection from the pandemic, along with slippage against approved projects.

Fund Category	Opening Balance as at 01 Apr 2021 £'000	Actual Income as at 31 Mar 2022 £'000	Actual Expenditure as at 31 Mar 2022 £'000	Actual Balance as at 31 Mar 2022 £000
Unrestricted	1,823	2,739	-1,929	2,633
Unrestricted Designated/ Restricted Funds				
Patients Funds	186	2	-5	183
Staff Funds	80	1	0	81
Research Funds	3,715	324	-328	3,711
	3,981	327	-333	3,975
Welsh Blood service	98	1	0	99
Total Funds (excl Investments)	5,902	3,067	-2,262	6,707

- The table above does not include the funds held as custodian for PHWT which has a balance of £50k as at the 31st March 2022.

Velindre UNHS Trust Charitable Funds

5. Balance Sheet as at 31st March 2022

Purpose:

To monitor the investment performance, and current assets/ liabilities during the year.

Key Issues:

The investment portfolio position has increased by £196k since the start of the financial year, which represents an increase in valuation of 3.27% for 2021-22.

Dividends of £113k were received during 2021-22, which were reinvested back into the portfolio.

The Funds held on the Velindre UNHS Trust Charitable funds accounts as at 31st March 2022 is £7,409k with £7,359k representing Velindre's share and £50k being held as custodian for PHWT.

BALANCE SHEET AS AT 31 MARCH 2021	
INVESTMENTS	
Cash	377
Fixed Income	2,045
Absolute Return	809
Commodities	205
Developed Market Equity	1,886
Emerging Market Equity	61
Real Estate & Infrastructure	328
Other	279
Total Assets on Investments	5,990
CURRENT ASSETS	
Current Account	378
Deposit Account	776
Transactions Posted	5
Total Cash and Bank	1,159
Creditors	- 479
Debtors	44
Total Current Assets	724
BREAKDOWN OF ASSETS	£'000
Total assets on investment	5,990
Bank/Cash	724
Total Breakdown of Assets	6,714
TOTAL FUNDS	
Total Funds Held	6,714

BALANCE SHEET AS AT 31 MARCH 2022	
INVESTMENTS	
Cash	360
Fixed Income	2,093
Absolute Return	818
Commodities	245
Developed Market Equity	1,978
Emerging Market Equity	-
Real Estate & Infrastructure	399
Other	293
Total Assets on Investments	6,186
CURRENT ASSETS	
Current Account	1,656
Deposit Account	676
Transaction Posted	19
Total Cash and Bank	2,352
Creditors	- 1,145
Debtors	16
Total Current Assets	1,223
BREAKDOWN OF ASSETS	£'000
Total assets on investment	6,186
Bank/Cash	1,223
Total Breakdown of Assets	7,409
TOTAL FUNDS	
Total Funds Held	7,409

Velindre UNHS Trust Charitable Funds

6. Compliance with Reserve Policy

Purpose:

To monitor the compliance with the reserve policy established by the Trustees during this financial period.

Key Issues:

The Trustees has previously considered that reserves should be set at a level which is equivalent to estimated planned commitments covering **a period of 4 months**. At this level, and in the event of a significant reduction in charitable funding, Trustees feel that they would be able to continue with the current programme of activity for such time as is necessary to allow for a properly planned and managed change in the activity programme and/or the generation of additional income streams.

In the light of the above, the unrestricted reserve target has been set based on the current commitments of **£816k** which is an over achievement of **£1,817k** when compared to the balance of **£2,633k** that was in the charitable funds accounts as at the 31st March 2022.

Reserves are that part of a charity's unrestricted funds that are available to spend on any of the charity's purposes. Reserves need to be maintained at a level which is sufficient to meet planned commitments and any unforeseen or unexpected expenditure in advance of the receipt of investment income and charitable donations. This assessment of the required level of reserves excludes those funds designated as restricted as they are only available for a specified purpose.

Reserves levels which are set too high tie up money which could and should be spent on charitable activity creating a trustees risk, acting in conflict with their duty to apply income within a reasonable time, or failing in their duty to be even-handed to future and current beneficiaries; more further it could be perceived by donors or funders to be holding money. If they are too low the future of the charity may be put at risk. Therefore, charities will require a reserves policy, which is robust and fit for purpose providing clear accountability.



Velindre UNHS Trust Charitable Funds

7. Forecasted Balance of the Charity's Unrestricted Fund

Purpose:

Provides a summary of the current and forecasted position of the Charity's unrestricted fund, in order to evaluate the future balance of the fund, and the performance against the reserve target.

Key Issues:

The table below provides the estimated future balance of the unrestricted fund based on the current level of forecasted income and expenditure commitments.

If income and the level of commitments remains as projected, then the Charity is expected to exceed the reserve policy in 2021/22 and the following two financial years, however this does not consider any future commitments.

Summary of Commitments against the Charities Unrestricted fund			
	Year 1 2022/23 £000	Year 2 2023/24 £000	Year 3 2024/25 £000
Opening Balance	2,633	2,985	3,427
Forecast Donation Income	2,800	3,000	3,200
Current Forecast Commitments			
Fundraising Team*			
Fundraising Event Expenditure	165	400	450
Overheads*	0	250	260
General Expenditure & Charges	50	50	50
Anticipated Recurrent Project Expenditure	1,800	1,800	1,800
Time Limited (Project/ Bid Expenditure)	433	58	20
Total Current Commitments	2,448	2,558	2,580
Closing Balance	2,985	3,427	4,047
Target Reserve	853	860	
Reserve Variance	2,132	2,567	

*The expectation is that the fundraising team will be funded from the investment growth for each of the next three years.

*Overheads is expected to be funded from the investment growth in 2022/23, with future years funding dependent on investment performance.



Velindre UNHS Trust Charitable Funds

8. Investment Growth held outside of Charitable Fund Allocation

Purpose:

To inform the committee of the current and forecast position of the investment income and gains that are held outside of Charitable Fund allocation.

The Charitable funds committee previously approved that the investment income (dividends), and any gains that are made from the investment portfolio would be used where possible to fund the fundraising team and overhead costs.

Key Issues:

The investment growth which is being held outside of the committee as at 31st March 2022 is currently £654k and is forecasted to be circa £253k as at the end of March 23 after supporting both the fundraising team and overhead costs.

Investment (dividend) income generally remains steady with the £113k received in 2021/22 consistent with prior years.

Investment gains and losses are extremely volatile and therefore difficult to predict, and on this basis any gain or loss has been purposely admitted from the table. If the portfolio does realise future gains, then the expectation would be that overheads can also be funded during that period. If investment growth is not available in future years, then the costs will be apportioned over the Charitable funds based on average balances.

Current & Forecasted Investment Growth Position			
	Year 1 2022/23 £000	Year 2 2023/24 £000	Year 3 2024/25 £000
Opening Balance	654	253	66
Forecast Investment Income	113	113	113
Forecast Gains /Losses			
Forecast Commitments			
Fundraising Team	292	300	315
Overheads	222		
Total Forecast Commitments	514	300	315
Closing Balance	253	66	-136



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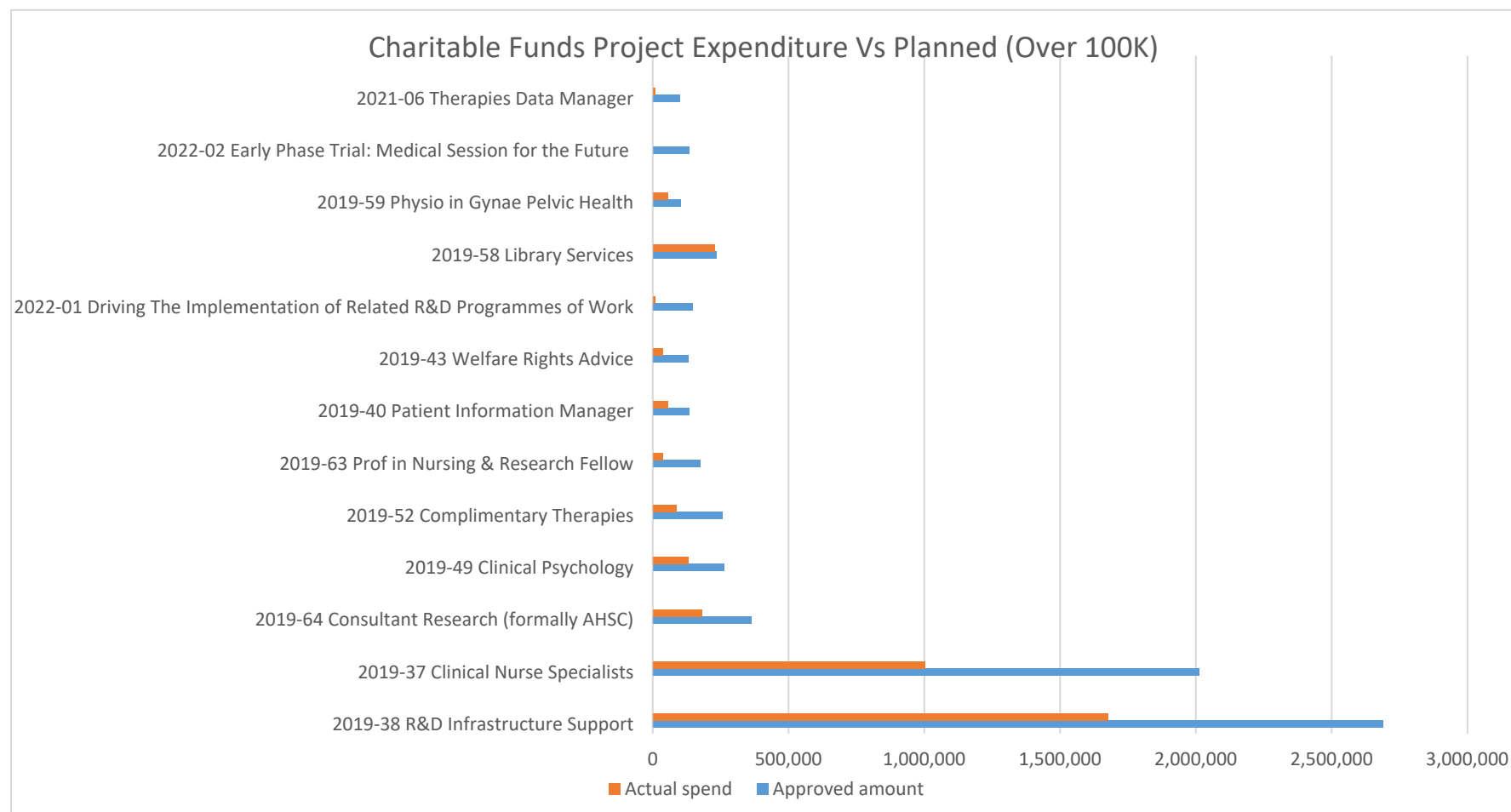
Velindre UNHS Trust Charitable Funds

9. Recommendation

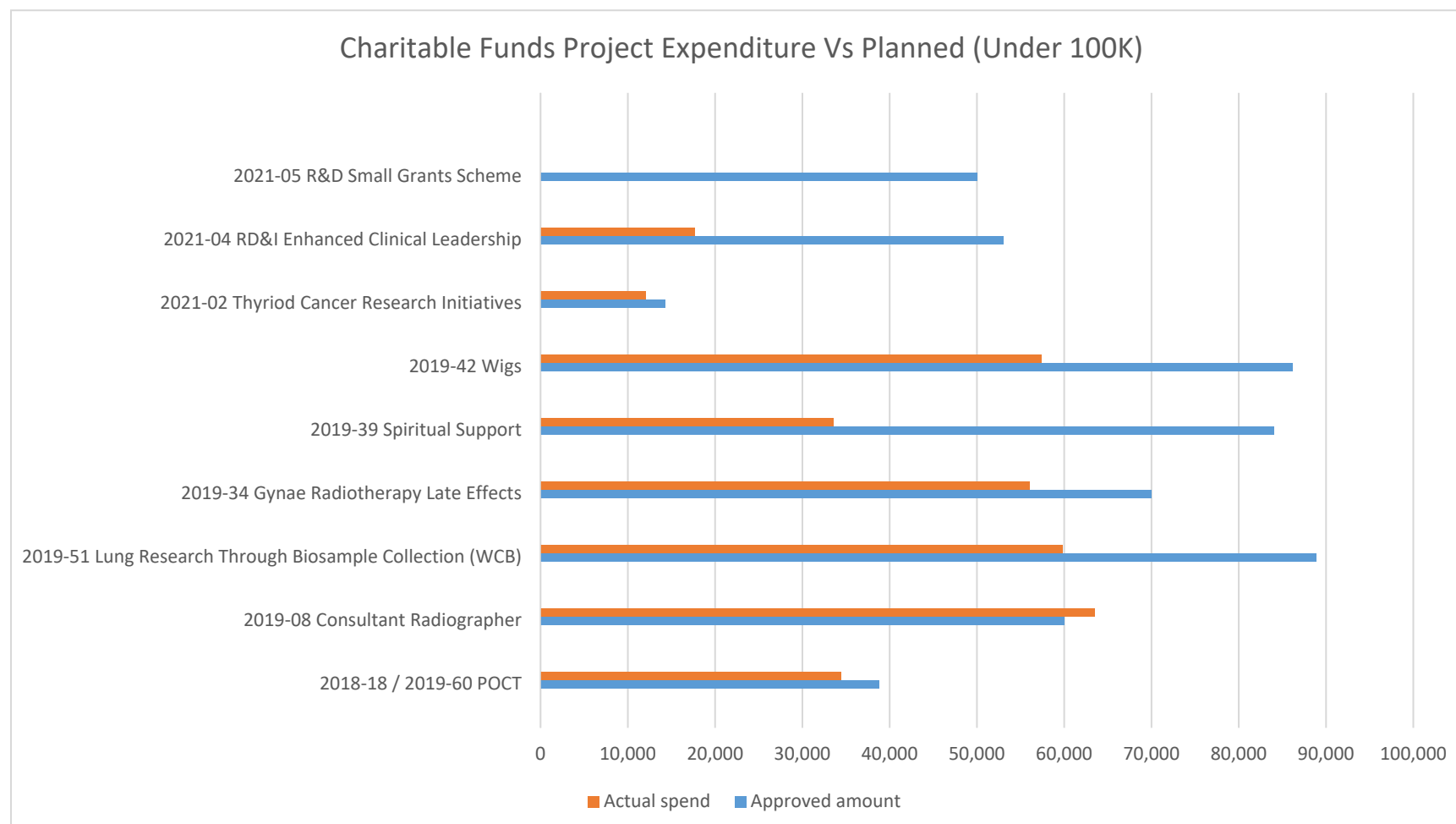
The CFC is asked to **Note** the contents of this Finance report and in particular:

- The financial performance of the Charity for the period 1st April to 31st March 2022.
- The position and performance of the Charity's investment portfolio during 2021-22.

Velindre NHS Trust Charitable Funds



Velindre NHS Trust Charitable Funds





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CHARITABLE FUNDS COMMITTEE

Summary of Commitments against the Charity's Unrestricted fund

DATE OF MEETING	17/05/2022
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PUBLIC OR PRIVATE REPORT	Public
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IF PRIVATE PLEASE INDICATE REASON	Choose an item.
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PREPARED BY	Steve Coliandris – Financial Planning & Reporting Manager
PRESENTED BY	Steve Coliandris – Financial Planning & Reporting Manager
EXECUTIVE SPONSOR APPROVED	MATTHEW BUNCE – EXECUTIVE DIRECTOR OF FINANCE

REPORT PURPOSE	FOR APPROVAL
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COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING		
COMMITTEE OR GROUP	DATE	OUTCOME
Nil	(DD/MM/YYYY)	Choose an item.

ACRONYMS	

1. SITUATION/BACKGROUND

- 1.1 The purpose of this paper is to provide the CFC with a summary of the current and forecasted commitments against the Charities unrestricted fund, in order to evaluate the future balances, and the effect the bid received at today's meeting will have on the reserve target.

2. ASSESMENT / SUMMARY OF MATTERS FOR CONSIDERATION

- 2.1 Table A below provides a summary of the current and forecasted position of the charity's unrestricted fund, based on the current level of forecasted income and expenditure.

Summary of Commitments against the Charities Unrestricted fund			
	Year 1 2022/23 £000	Year 2 2023/24 £000	Year 3 2024/25 £000
Opening Balance	2,633	2,985	3,427
Forecast Donation Income	2,800	3,000	3,200
Current Forecast Commitments			
Fundraising Team			
Fundraising Event Expenditure	165	400	450
Overheads	0	250	260
General Expenditure & Charges	50	50	50
Anticipated Recurrent Project Expenditure	1,800	1,800	1,800
Time Limited (Project/ Bid Expenditure)	433	58	20
Total Current Commitments	2,448	2,558	2,580
Closing Balance	2,985	3,427	4,047
Business case proposals			
Pump Prime Velindre Innovation	45	45	
CCRH - Investment Strategy	25		
Patient Engagement Officer	60	60	
Total Business case Proposals	130	105	0
Total Commitments	2,578	2,663	2,580
Revised Closing Balance	2,855	3,322	4,047
Target Reserve	888	860	0
Reserve Variance	1,967	2,462	4,047

The assumption is that we will deliver against the current plan, however income will be reviewed and considered in alignment with the adoption of the Charity Strategy.

3. IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	There are no specific quality and safety implications related to the activity outlined in this report.
RELATED HEALTHCARE STANDARD	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
EQUALITY IMPACT ASSESSMENT COMPLETED	No (Include further detail below)
LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATIONS / IMPACT	Yes (Include further detail below)
	Please refer to funding schedule included within this paper.

4. RECOMMENDATION

- 4.1 The CFC is asked to **Consider** the impact of approving the business cases that have been presented today would have on the unrestricted fund balance.
- 4.2 Based on an assumed level of forecast income and current commitment the Charity is able to fund the business cases with a projected significant reserves variance expected.



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CHARITABLE FUNDS COMMITTEE

CHARITABLE FUNDS FINANCE ADMINISTRATION ASSISTANT

DATE OF MEETING	17 th May 2022	
PUBLIC OR PRIVATE REPORT	Public	
IF PRIVATE PLEASE INDICATE REASON	Choose an item.	
PREPARED BY	Steve Coliandris, Financial Planning & Reporting Manager	
PRESENTED BY	Steve Coliandris, Financial Planning & Reporting Manager	
EXECUTIVE SPONSOR APPROVED	Matthew Bunce, Executive Director of Finance	
REPORT PURPOSE	FOR APPROVAL	
COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING		
COMMITTEE OR GROUP	DATE	OUTCOME
Corporate Scrutiny	26.04.22	IN SUPPORT
ACRONYMS		
CFC	Charitable Funds Committee	

1. SITUATION/BACKGROUND

- 1.1. In August 2016 the CFC approved a request to appoint a finance assistant to support the finance manager in the general financial administration of the charity. The post was subsequently appointed from November 2016, and has since being extended on two occasions, with the fixed term arrangement due to end on the 31st May 2022.
- 1.2. The post has provided invaluable support in dealing with the increased financial administration and governance arrangements which is required to run the charity.
- 1.3. The CFC is now being asked to support a permanent appointment of the Finance Assistant post.
- 1.4. The request was supported by the Corporate Scrutiny Panel on 26th April.

2. ASSESMENT / SUMMARY OF MATTERS FOR CONSIDERATION

- 2.1 Since 2011-12 the demands on running the Charity's financial management and governance arrangements have steadily increased. The posting and reconciling of income have intensified, along with the continued planning, review and maintenance of expenditure. In addition, more time is being spent on financial procedures and reporting to ensure accurate, and clear presentation of the Charity's accounts and balances.
- 2.2 The Finance Assistant provides key assistance in the following areas.
 - Posts all fundraising income to the financial ledger, ensuring reconciliation to both the fundraising database and cash book.
 - Supports raising the Charity's requisitions.
 - Processes Velindre and non-purchase order invoices.
 - Chases and ensures prompt payment of the Charity's invoices in order to meet the trust's payment target.
 - Completes and posts all expenditure journals.
 - Ensures that the Charity is capturing all VAT reclaims accurately, maximising savings.
 - Maintains the Charity's salary database and project expenditure control spreadsheets.
 - Undertakes regular reviews to ensure all income and expenditure are accurately reflected within the financial ledger.
 - Manages the Charity's six monthly project review, annual evaluation report, and trading agreements.
 - Liaises with internal & external companies to ensure project expenditure is accurately reflected in the Charity's balances.
 - Sends out monthly budget reports.
 - Completes the Charity's gift aid return.
 - Provides training/ advice and support to the Charity's fund holders

- 2.3 The post reports directly to the Charitable funds Finance Manger within the Finance Planning and Reporting team.

Financial Planning & Reporting Manager



Charitable Funds Finance Manger (vacant)



Charitable Funds Finance Assistant

- 2.4 The benefits of continuing to support this post include:

- Continued operational support within the team to carry out work in areas outlined above;
- Ability to continue to carry out ongoing work that supports the Charitable funds Finance Manager (currently vacant)
- Supports the Charity's responsibility in providing accurate financial reports to the Charity's fund holders, Charitable funds Committee and Charity Commission.

- 2.5 The impact / risks of not continuing to support this post include:

- Risk that the operational work required to maintain the financial support arrangements for the Charity will not be met.
 - Following the departure of the Charitable funds finance manager and significant amount of work required following recent audits, there is a risk that the financial governance of the Charity could be further impacted.
 - Potential for statutory reports to not be delivered in a timely basis.
 - Possible delay of Charity financial information to the Charitable funds Committee and other areas of the Charity as required by the finance team.
 - Detrimental impact on wellbeing of staff within this team which is already under significant pressure.
- Financial support to Charitable Fund holders reduces.

- 2.6 The finance assistant post has become integral to the financial management of the Charitable funds and given that the post holder now has full employee rights having been employed by the Trust since November 2016, a request is being made to the CFC to support continued funding from the Charity to make this post permanent. If for any reason in the future the Charity is unable to support the funding of this post the costs associated will be met from within the Finance budget of the Trust.

- 2.7 The financial impact of appointing the post on a permanent basis will be £15k per annum.

3. IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	There are no specific quality and safety implications related to the activity outlined in this report.
RELATED HEALTHCARE STANDARD	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
EQUALITY IMPACT ASSESSMENT COMPLETED	Not required
LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.
FINANCIAL IMPLICATIONS / IMPACT	Yes (Include further detail below)
	The cost to keep the current post holder for a further year will be £15k

4. RECOMMENDATION

- 4.1 The CFC is being asked to **APPROVE** the permanent appointment of the finance administration assistant post.

CHARITABLE FUNDS COMMITTEE

PEARL CLINICAL TRIAL: EXTENSION OF CONSULTANT CLINICAL LEAD SESSIONS

DATE OF MEETING	17 th May 2022	
PUBLIC OR PRIVATE REPORT	Public	
IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report	
PREPARED BY	Dr Tom Rackley, Consultant Oncologist and PEARL Clinical Lead Nicky Hughes, Acting Medical Directorate Manager Libby Crumpton, Advancing Radiotherapy Fund Project Manager	
PRESENTED BY	Dr Tom Rackley, Consultant Oncologist and PEARL Clinical Lead	
EXECUTIVE SPONSOR APPROVED	Jacinta Abraham, Executive Medical Director	
REPORT PURPOSE	FOR APPROVAL	
COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING		
COMMITTEE OR GROUP	DATE	OUTCOME
Advancing Radiotherapy Fund - Board	27 th April 2022	APPROVED TO CO-FUND 50%
RD&I Sub-Committee	7 th April 2022	ENDORSED FOR APPROVAL
ACRONYMS		
ARF	Advancing Radiotherapy Fund	

CRW	Cancer Research Wales
RD&I	Research, Development and Innovation Committee
CI	Chief Investigator
TMG	Trial Management Group
VCC	Velindre Cancer Centre
PETIC	Positron Emission Tomography Imagine Centre
PET	Positron Emission Tomography

1. SITUATION/BACKGROUND

1.1 Please see Business Case at Appendix 1.

2. ASSESMENT / SUMMARY OF MATTERS FOR CONSIDERATION

2.1 Please see Business Case at Appendix 1.

3. IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	There are no specific quality and safety implications related to the activity outlined in this report.
RELATED HEALTHCARE STANDARD	Individual Care
	Timely Care and Effective Care
EQUALITY IMPACT ASSESSMENT COMPLETED	No (Include further detail below)
LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.
	Please see Business Case at Appendix 1.
FINANCIAL IMPLICATIONS / IMPACT	Yes (Include further detail below)
	Please see Business Case at Appendix 1.

4. RECOMMENDATION

4.1 The RD&I Sub Committee are asked to **APPROVE** funding for £16,759.50 for the period of 27 months.

APPENDIX 1

BUSINESS CASE FOR SUBMISSION TO THE CHARITABLE FUNDS COMMITTEE

THIS BUSINESS CASE HAS TO BE COMPLETED FOR PROJECTS / GRANTS / BIDS WITH EXPENDITURE OVER £5,000

(For Support please contact Chris McCarthy on x6589, or contact your local finance team).

Or access the Trust intranet page for an example of best practice

[Velindre NHS Trust | Charitable Funds Policies](#)

SECTION 1

1. BUSINESS CASE TITLE
PEARL Clinical Trial: Extension of Consultant Clinical Lead Sessions
2. PLEASE INDICATE THE STRATEGY LINK THAT ALIGNS WITH THIS BUSINESS CASE PROPOSAL
Research, Development & Innovation
3. BUSINESS CASE PREPARED BY
Dr Tom Rackley, Consultant Oncologist and PEARL Clinical Lead, Nicky Hughes, Acting Medical Directorate Manager, and Libby Crumpton, Advancing Radiotherapy Fund Project Manager.
4. BUSINESS CASE SPONSORED BY
Jacinta Abraham, Executive Medical Director
5. VCC SLT/WBS SMT SPONSOR (RESPONSIBLE OFFICER) Ensure VCC SLT/WBS SMT approval is sought before submitting to the Charitable Funds Committee
VCC SLT has been briefed on this business case by Nicola Hughes, Acting Medical Directorate Manager.
6. UNIQUE BUSINESS CASE REFERENCE NUMBER (Request from Corporate Finance/ HQ, contact Carol Tahir or Chris McCarthy)
2022-10
7. BUSINESS CASE TOTAL EXPENDITURE
£16,759.50 requested from CFC

£33,519 to support 1 consultant session from May 22 – August 24
50% from ARF (£16,759.50)
50% from CFC Head and Neck / Thyroid fund (£16,759.50)
**the ARF business case was approved for 50% co-funding at the 27th April ARF Board Meeting*

8. TERM OF PROPOSAL (MAXIMUM 3 YEARS)

27 months: May 2022 until August 2024

9. FUND NAME & NUMBER

Access the Trust intranet page for details [Velindre NHS Trust | Charitable Funds Policies](#)

Head and Neck / Thyroid, 6310

10. FUND BALANCE & CURRENT COMMITMENTS

(Corporate Finance/ HQ will complete this section)

Fund	Actual Balance as at 31/12/2021 £000	Opening Balance 01/04/2021	Forecasted Income 2021/22 £000	Current Commitments 2021/2 £000	Forecasted Balance 31/03/2023 £000
6310	78	78	7	0	85

11. FUND HOLDER APPROVAL

Please confirm that the fund holder has supported this funding request prior to it being submitted to the CFC.

Access the Trust intranet page for fund holder details [Velindre NHS Trust | Charitable Funds Policies](#)

Prof Mererid Evans, Head and Neck / Thyroid fund holder, has reviewed this application and confirmed support for the funding request.

12. IS THIS A REQUEST FOR CONTINUATION OF FUNDING BEYOND THE ORIGINAL TERM OR IS THIS A NEW PROPOSAL

New Proposal

13. IF THIS A REQUEST FOR CONTINUATION OF FUNDING BEYOND THE ORIGINAL TERM, PLEASE OUTLINE THE REASONS WHY A FURTHER FUNDING REQUEST IS BEING SUBMITTED AND WHY THE EXIT STRATEGY IN THE ORIGINAL BUSINESS CASE HAS NOT BEEN IMPLEMENTED.

This is a new request for funding directly from the CFC, but has previously been supported by the Advancing Radiotherapy Fund (ARF) as part of a wider grant / clinical trial.

SECTION 2 – DESCRIPTION AND PURPOSE

14. BRIEF DESCRIPTION OF THE BUSINESS CASE PROPOSAL

Try to limit to 500 words

This business case is requesting a financial award to support the continuation of consultant clinical leadership in the PEARL study (x1 session a week), currently funded jointly by the ARF and Cancer Research Wales. Consultant leadership is essential as no clinical trial can proceed without Chief Investigator (CI) involvement. As CI, Dr Rackley has many responsibilities to ensure the ongoing success of the study so that recruitment can continue with appropriate supervision and result in meaning scientific results worthy of a high impact publication. Dr Rackley's role currently includes:

- Drive and encourage ongoing recruitment of patients to the study
- Deliver the adaptive radiotherapy technique on recruited patients
- Ensure protocols are adhered to so that patients are treated safely in the framework of the study
- Facilitate trial expansion to other centers to improve patient recruitment.
- Chair trial management group (TMG) meetings ensuring all stakeholders are working collaboratively together with the common goal of study success.
- Ensure the study results are published in a high impact scientific journal.

PEARL is an important study for Velindre Cancer Centre (VCC) as it fulfils many of research strategic aims. Its success has the potential to raise our profile within the radiotherapy research arena forging the way for future radiotherapy based research opportunities and collaborations. The study was recruiting well and proved to be very popular with patients, however when the Covid pandemic escalated all radiotherapy based research was halted in order to priorities resource to non-trial patients. Even when the trial reopened, recruitment was capped by the radiotherapy department due to reduced capacity because of high staff sickness and increased Covid cleaning measures within the department. These Covid related issues have had a dramatic effect on our recruitment targets and although we have tried to mitigate this through opening in other centers, they too were affected by the pandemic in much the same way as VCC. Through re-profiling of our budgets, we have been able to secure the study for another 24 months, but there is not the financial means to support ongoing consultant leadership which is essential for the successful running of the trial.

15. LIST OF OPTIONS AND PREFERRED OPTION?

Include details of other funding options you have considered / engaged with and the outcome

Option A: funding awarded by CFC for the full amount requested (£16,760), extending the sessions until August 2024. CFC will be paying 50% of the total session cost, with the ARF fund supporting the other 50% for the same period.

Option B: partial funding awarded by CFC with the balance sought elsewhere e.g. Medical Directorate, return application to the ARF or similar. As the ARF have agreed to fund 50% of the total cost already, a further request is unlikely, potentially reducing the time allocated to this work to 0.5 of a consultant session, or 1 session for a shorter time frame impacting the potential success of the trial and work pressure on the clinical lead.

Option C: no award from CFC made, as above with Option B.

Option A is the preferred option.

16. WHY IS THIS CONSIDERED TO BE CHARITABLE FUNDING?

The proposal must align with the Charity Vision, Mission, Aims and Objectives and the Charity Strategy / Annual Delivery Plan which can be found on the Trust intranet page [Velindre NHS Trust | Charitable Funds Policies](#)

The PEARL study to date has been supported financially by the ARF and Cancer Research Wales. The request to the CFC is an extension of this charitable support of a research project / clinical trial, that aligns with the aims of the Velindre Trust Charity:

- Improve outcomes for cancer patients,
- Ensure that cancer patients treated at VCC have access to the best possible treatment (including training its staff) and
- Improve the scope of successful treatment by assisting with the development of Velindre Cancer Centre research activities and medical education.
-

As well the charity strategy, this work supports the VCC Cancer Strategy in the aim to be an international leader in research, development, innovation and education.

SECTION 3 – IMPACT ASSESSMENT

17. PROVIDE DETAILS OF THE PROJECT OBJECTIVES AND THE TOOL(S) YOU WILL BE USING TO MEASURE THE SUCCESS OF EACH BY COMPLETING THE TABLE BELOW

As part of the evaluation process you will be required to submit an annual progress report clearly stating if the project has delivered against these objectives and how this was achieved.

Business Case Objectives	Tools Used to Measure Success *
1. PEARL recruits to target (50 patients)	Study recruitment numbers
2. Study is published in a high impact scientific journal	Publication
3. Maintain VCC's reputation as center that can produce high quality radiotherapy research	Number of collaborations with other centers and academic institutes. Utilise the experience of PEARL to encourage further radiotherapy based clinical trials

*Consider patient feedback and quantifiable information that can easily measure success e.g. improved patient outcome, increase in number of patients treated, reduction in waiting list, reduced waiting times



GIG
CYMRU
NHS
WALES

Ymddiriedolaeth GIG
Prifysgol Felindre
Velindre University
NHS Trust

18. WHAT DIFFERENCE WILL THIS PROPOSAL MAKE?

Consider impact/ benefit on all stakeholders including patients, staff, the service and the wider community.

Trial Summary

PEARL is a pioneering clinical trial working to improve the treatment and survival rates of patients with head and neck cancer. Using the very latest technological advances, the trial combines modern radiotherapy with advanced medical imaging (PET scans), to pinpoint the exact site of live tumors and therefore enabling radiotherapy treatment to be targeted more effectively.

Although head and neck tumors can be treated successfully with conventional chemo-radiotherapy, the complex anatomy of the head and neck make large tumors difficult to define and accurately target with radiotherapy, and cancers in the area can recur. Standard radiotherapy treatment for head and neck cancers can leave long-term side effects including a dry mouth, difficulty in swallowing, loss of taste and alterations to the voice.

Patients taking part in the trial at VCC, South West Wales Cancer Centre and Guys and St Thomas' (Bristol and Beatson Cancer Centre set-up pending) are treated with an innovative medical imaging technique that has the potential to greatly improve the accuracy and targeting of radiotherapy. A PET scan works by exploiting the tendency of cancer cells to take up high amounts of sugars in the body, which cancer cells require for rapid growth. Patients are given short-lived radioactive sugars which then distribute within the body, accumulating in areas with cancer cells and regions of the tumour with high metabolic activity. These areas are then picked up on a specialised PET scanner that captures serial digital slices to generate a detailed 3D colour image of the body – much like a heat map – allowing doctors to target fine tumour margins and areas of increased disease activity with high levels of accuracy.

Once patients on the trial have received initial radiotherapy to eradicate the bulk of the cancer, they undergo additional highly specialised PET scans at the start of the art Wales Research and Diagnostic Positron Emission Tomography Image Centre (PETIC) at Cardiff University, which will be combined with the conventional CT scans to produce a detailed PET/CT scan that contains both structural and functional information. Those patients found to have remaining high levels of disease activity, evidenced by the increased glucose uptake, will receive further doses of PET-guided radiotherapy to those areas in the head and neck. This technique known as 'dose painting' will improve the targeting of radiotherapy to live tumors, while sparing normal tissues or cancer already destroyed by the initial radiation. This will potentially result in better control of the disease, lower rates of relapse, reduction in side effects and ultimately improve patient survival and quality of life.

Patient Benefit

Patients on the trial have an opportunity to take part in a pioneering new radiotherapy technique that is tailored to their cancers behavior after the first two weeks of radiotherapy. This process of "homing in" on the shrinking tumour provides an opportunity to reduce radiation dose to normal healthy tissue and thereby potentially reduce side effects. This could have long-term benefits to the patients reducing problems such as dry mouth and swallowing difficulties.

Patient will also get the satisfaction that they have contributed to an advancing radiotherapy technique that could become the new normal benefiting future patients.
The study has proven to be very popular with this cohort of patients, as everyone who has been approached to take part have responded positively.

Research of this nature supports the centre's strategic aim to be an international leader in research, development, innovation and education, contributing to the health and wealth of Wales. Research and development is a strategic priority in Wales, with research active centres shown to provide an enhanced patient experience.
Velindre Cancer Strategy 2016-2026

19. IN NO MORE THAN 100 WORDS EXPLAIN TO STAKEHOLDERS AND DONORS HOW YOU WILL USE THEIR MONEY TO MAKE A DIFFERENCE

Consider as if you were undertaking a...

- stakeholder briefing
- Press release
- Social Media Post

As outlined in 18.

Funds will be used to support the continuation of a world class, multicentre study working toward improved treatment and experience for patients and the development of research activity within VCC.

20. ARE THERE ANY LEGAL AND / OR ETHICAL IMPLICATIONS THAT NEED TO BE CONSIDERED? IF YES HOW WILL THEY BE MANAGED

e.g. Intellectual Property Rights, Confidentiality Agreements, Contractual Arrangements

There are no new legal or ethical implications as a result of this funding application. PEARL is an established clinical trial, for which VCC are sponsors and has the support and expertise of the RD&I community within VCC.

Sarah Townsend, Head of Research and Development and her team have been instrumental in the set-up, management and delivery of this trial.

21. RISK ASSESSMENT

Please Indicate how the project will manage both strategic and operational risks identified as part of the risk assessment. In particular, you should make reference to risks which initiate the need for change, those which need to be managed in implementing the project and the risks identified with not proceeding with the project.

A study-wide Risk Assessment has been undertaken as part of the PEARL study to provide assurances and allow appropriate Velindre University NHS Trust oversight of the study. This study is currently being managed by the trial team at the Centre for Trials Research, Cardiff University. All study related risks have been assessed and are mitigated to avoid unnecessary issues being a factor to prevent effective implementation of this study.

The PEARL study has already experienced a demand for change and flexibility due to the COVID-19 pandemic, and the subsequent impact on resources and patient recruitment. The team have displayed flexibility and strategic thinking in their approach to managing the impact of this, proposing and agreeing changes to facilitate the continuation of the study.

- Financial management of the study continues to be overseen by Jonathan Patmore, Finance Manager with regular meeting of the TMG, who have facilitated the repurposing of existing funds to support the trial for another 24 months.

Any reduction in the amount of clinical time spent on this study will adversely impact the assessed risks, the ability to reach recruitment targets and impact on participant treatment.

As well as the risk to the Trust research portfolio, if these research sessions are not authorised it may impact the opportunities for eligible patients to be able to benefit from the study treatments.

22. LEGISLATIVE / REGULATORY COMPLIANCE

Provide evidence that the proposed project meets the relevant requirements/standards including Health and Safety, GDPR, Equality & Diversity, Data Protection Legislation etc. Also consider the Clinical Governance requirements, National Service Frameworks, NICE Regulations, Healthcare Standards, Commission for health improvement requirements and the Strategic and Financial Framework.

The Trust must abide by their responsibilities for the initiation, management and financing (or arranging the financing) of that research as described in:

- UK policy framework for health and social care research, version 3.3, dated 07 Nov 2017

To ensure compliance with the Trust's sponsorship responsibilities, the Head of Research and Development will maintain oversight of this award through the Trust research accounts and sponsorship responsibilities.

The PEARL study has also had the relevant reviews from the national regulatory bodies (Health and Care Research Wales/HRA) and ethics committees to ensure compliance with current legislation and patient safety.

SECTION 4 – RESEARCH, DEVELOPMENT AND INNOVATION (RD&I) SUB-COMMITTEE

23. DOES THIS PROPOSAL INCLUDE RD&I ACTIVITY?

Yes, this project is the continuation of consultant clinical leadership, in an existing project / study.

24. IF YES, PLEASE PROVIDE EVIDENCE THAT THIS PROJECT HAS BEEN ENDORSED BY THE RD&I SUB-COMMITTEE. INCLUDE THE DATE OF THE SUB-COMMITTEE WHERE IT WAS CONSIDERED.

This proposal was endorsed by the 7th April 2022 meeting of the RD&I Subcommittee.

25. IF THIS PROPOSAL HAS BEEN ENDORSED BY THE RD&I SUB-COMMITTEE SUBJECT TO CERTAIN PROVISIONS, PROVIDE DETAILS ON HOW THIS HAS BEEN ADDRESSED

RD&I Sub-Committee endorsed the Business Case without requiring any provisions.

SECTION 5 – FUNDING REQUIREMENTS

26. FUNDING REQUIREMENTS

Provide here an indication of the anticipated costs for the whole project. This should include a breakdown of Capital and / or Revenue costs. Within the revenue cost you should indicate Staff costs, Non-staff cost and Equipment.

CFC are being asked for an award of £16,759.50, this is 50% of the total cost of this project. 50% has been approved from the ARF.

£33,519 to support 1 consultant session from May 22 – August 24
50% from ARF (£16,759.50)
50% from CFC (£16,759.50)

27. PROPOSED FUNDING CASHFLOW

Indicate here the length of the project and the expenditure expected during the financial period. Example - Year 1 Expenditure Total 2021/22 (April 2021-March 2022). Please note that funding cannot be requested for more than a 3 year period.

The Total Funding Cash Flow should match the Total Funding Requirements indicated on the table above

Description	Expenditure year 1	Expenditure year 2	Expenditure year 3	Total Expenditure
1 Consultant Session (50%)	£6,430.50	£7,227.00	£3,102.00	£16,759.50
Assuming a 3% annual uplift	May 22-March 20	April 23-March 2	April 24-Aug24	
				£ 16,759.50

SECTION 6 – EXIT STRATEGY

28. TIMESCALE / PROJECT MILESTONES

Indicate here the length of this project – **This must include a start date and end date.** (Please indicate if there is likely to be any lead time which may delay the start date).

If a project has not commenced within six months you will be requested to provide a progress update to the Charitable Funds Committee who will consider whether funding will continue depending on the explanation provided.

Current funds supporting this session end in May 2022. The anticipated CFC award and newly agreed ARF funding would commence from this date, until August 2024.

There will be no delay to this commencing, the PEARL study and clinical leadership are underway, this would be a continuation of funding on existing work (and adjustment of funding source).

29. ACTION PLAN / EXIT STRATEGY

Include the plans and actions required to mitigate any risks once the term of the Charitable funding ends. Please indicate the anticipated funding routes i.e. will funding cease, will the proposal self-fund if successful, will the financial impact revert to Trust revenue accounts or will other funding sources be secured / considered?

IT IS ESSENTIAL THAT YOU CONSIDER THE POTENTIAL LONG TERM COST IMPLICATIONS, FUNDING BEYOND THIS REQUEST IS NOT GUARANTEED FROM THE CHARITY.

For Example - Will there be any staff cost implication relating from redundancy.

The team are confident the extension period is sufficient to allow the successful completion of the trial and anticipated outcomes; full patient recruitment (50), collection of data, analysis and publishable content, supporting VCC's reputation as a centre that can produce high quality radiotherapy research and a positive patient experience. The delay has been largely due to the unexpected pandemic, which pending further impact from this, the team are in agreement the trial will successfully brought to completion, building a foundation for further research activity in this area.

30. HOW WILL YOU DEMONSTRATE TO STAKEHOLDERS AND DONORS THE IMPACT THAT THIS PROPOSAL WILL HAVE ON PATIENTS / STAFF/ SERVICE OR WIDER COMMUNITY?

The PEARL study has received media coverage from the Western Mail, South Wales Echo and BBC Wales Today indicating the status of this trial and the potential benefit to patients and their treatment.

As the trial continues, through data collection, analysis and patient feedback, it is anticipated evidence will support the inclusion of this treatment format, as a standard option (or consideration) in patient care in the future and treatments evolve.

The trial is a collaborative effort between VCC and other health care providers (Swansea etc.) Cardiff University and funded through entirely charitable sources (ARF and CRW), supporting the scope of successful treatment by assisting with the development of VCC research activities and medical education.

31. FOLLOWING APPROVAL BY VCC SLT/WBS SMT AND CHARITABLE FUNDS OMG THE BUSINESS CASE WILL NEED TO BE PRESENTED TO THE CHARITABLE FUNDS COMMITTEE. PLEASE STATE BELOW WHO WILL PRESENT THIS BUSINESS CASE

Dr Tom Rackley will be available pending clinical / patient commitments, to present this business case. Should this not be possible another associated clinician / or connected colleague will attend in place of Dr Rackley.

PLEASE NOTE:

As part of the evaluation process you will be required to submit an annual progress report clearly stating how the project is performing against key targets such as delivery of results and actual spend against plan. A copy of the Annual Evaluation template can be found on the Trust intranet page [Velindre NHS Trust | Charitable Funds Policies](#)

Accurate completion of these annual evaluations is key in ensuring that the project will continue to be supported by the charity.

Appendix 1

Business case for PEARL consultant sessions – Lay summary

Background

Oropharyngeal cancer is a type of cancer that can affect the throat, tonsils and back of the tongue. Many oropharyngeal cancers are caused by a virus called Human Papillomavirus (HPV), a common virus that we will almost all be affected by during our lives, usually without any illness at all. We don't understand why HPV causes cancers to develop but the good news is that cancers caused by HPV usually respond well to treatment.

The PEARL study aims to see if we can improve the way we give radiotherapy to oropharyngeal cancers that are caused by HPV. At the moment, cancers caused by HPV are treated like any other cancer in the Head and Neck and the survival rate is very good. Many patients are cured of their disease but have to live for decades with several side effects caused by their treatment. This study is looking to see if the radiotherapy treatment can be modified (or adapted) to reduce the risk of these side effects. Side effects are problems that arise directly as a result of treatment. They can happen during treatment or shortly afterwards ('acute' side-effects) or they can happen months after treatment ('late' side-effects) and can last for many years, sometimes permanently.

PEARL is looking to see if we can reduce the severity of these side effects by adapting (or re-planning) the radiotherapy midway through treatment, based on the response we see on a scan called a PET-CT scan. By doing so, we are aiming to find out if this is a feasible way to reduce the dose to surrounding healthy tissues in the mouth and throat.

Current Status

The PEARL study opened just prior to the Covid pandemic and initial recruitment was extremely positive. Every patient approached that was suitable for the study, agreed to take part. The concept of replanning (adapting) their radiotherapy midway through their treatment proved very popular with patients and they specifically liked the reassurance of a second PET scan which confirms cancer shrinkage and the possibility of less side effects. Unfortunately once the pandemic struck recruitment was halted and then subsequently restricted due to staffing and radiotherapy capacity. This has had a significant negative effect on recruitment. Currently we have recruited 20 out of the required 50 patients.

Proposal

With this business case we will be able to maintain consultant support for the study to aid further recruitment locally but also facilitate opening in other sites around the UK. Without the support of this proposal the study will lose momentum and will fail its objectives. We are confident that with this support we will be able to continue to expand recruitment and complete the study which has the potential to answer the question "does adaptive radiotherapy offer equivalent survival to standard treatment whilst lower the dose of radiation to normal healthy structures." This provides hope for future patients that further progress is being made in radiotherapy techniques that will improve on patient survivorship and quality of life.