

Bundle Charity Committee 3 July 2025

Agenda attachments

- ITEM 00 Charity Committee Agenda July 2025
- 0 09:30 – OPENING ITEMS
- 1 Chair's Welcome, Apologies and Quorum
- 2 Declarations of Interest
 - ITEM 02 Board Member Register of Interests – Updated 26 March 2025
- 3 Minutes and Highlight Report
 - 3.1 *Minutes of the Previous Meeting: 02 April 2025*
 - 3.2 *Highlight Report: 02 April 2025*
 - ITEM 03.1 2025-04-02 Unconfirmed Draft Charity Committee Minutes
 - ITEM 03.2 Charity Committee Highlight Report 2 April 2025
- 4 Action Log & Matters Arising
 - ITEM 04 Action Log
- 4.1 FOR APPROVAL, ASSURANCE AND DISCUSSION
- 5 09:45 – Bids Panel Lived Experience – NHSCT Sports Grant Award
 - Kelly and Elain applied to the WAST Charity Sports Fund in December 2024, to fund the creation of a new WAST Netball Team.*
 - The team meets weekly at Cefn Hengoed Leisure Centre in Swansea for an hour-long training session. Later in the evening, the team then play in competitive games as part of the Swansea Valley Netball League.*
 - Since the netball team's first meeting in February, at least 25 members of staff have expressed their interest, and 21 have participated in at least one session. Many attend regularly every week, depending on shift patterns. The team comprises of staff from across WAST teams and directorates, including 111, EMS, Ambulance Care and corporate teams.*
 - With funding from the WAST Charity Sports Fund, the team have been able to purchase equipment and kit, and hire a weekly netball court. This funding has been made possible thanks to a grant from NHS Charities Together. Coaching is delivered by Elain, who is an experienced netball coach.*
 - This initial investment has enabled the team to establish a core group of staff regularly attending, benefitting from improved social connections within WAST and benefitting physical and mental wellbeing.*
- 6 10:10 – Charity Strategy: Delivery Plan (2 years)
 - ITEM 06 SBAR Charity Strategy Delivery Plan_3 July 2025
 - ITEM 06.1 Charity Delivery Plan 2025-2027
- 7 10:30 – Charity Performance Report
 - ITEM 07 SBAR Charity Performance Report_3 July 2025
- 8 10:40 – Charity Funds Finance Report
 - ITEM 08 SBAR Finance Update Report – 23.06.25
- 8.1 10:50 – COMFORT BREAK
- 9 11:05 – Risk Management Report
 - ITEM 09 Executive Summary Risk Management Report Charity Committee 030725
 - ITEM 09.1 Charity Risk Register
 - ITEM 09.2 Annex 3 – CHAR-001 Lack of resource and capacity to manage the Charity v1.3 JB 050625
 - ITEM 09.3 Annex 4 – CHAR-003 Lack of compliance with legal and regulatory framework V1.3 JB 050625
 - ITEM 09.4 Annex 5 – CHAR-005 Charity Governance Risk v1.3 JB 050625
- 10 11:25 – Bids Panel Highlight Reports
 - Item 10: 2 April, 16 and 23 May reports*
 - Item 10.1: 4 June report*
 - ITEM 10 Bids Panel Highlight report. 2 April, 16 and 23 May
 - ITEM 10.1 Bids Panel Highlight report 4 June 2025
- 11 11:40 – Bursary Panel Highlight Report – 14 April 2025 (to include review of Terms of Reference)
 - ITEM 11 Bursary Panel AAA – 14.04.2025
 - ITEM 11.1 Bursary Panel Terms of Reference
- 11.1 CONSENT ITEMS
- 12 Committee Priorities & Cycle of Business Monitoring Report 2025/26

ITEM 12 Charity Committee Priorities and Cycle of Business Monitoring report

ITEM 12.1 Committee monitoring report

ITEM 12.1a Cycle Notes

- 12.1 11:55 – CLOSING ITEMS
- 13 Reflections and Summary of Decisions/Actions
- 14 Any Other Business
- 15 Date & Time of the Next Meeting: 2 October 2025

Length of Meeting: 02:35		Agenda Status:		03 July 2025 - [OPEN] CHARITY COMMITTEE				Deadline for Papers: 24 June 2025	
Time	Mins allotted	Agendum	Title	Item for	Item requested by	Format of Item	Paper prepared by	Item presented by	Colleagues to cc
OPENING ITEMS									
09:30	00:15	1	Chair's Welcome, Apologies and Quorum	Information	Standing	n/a	n/a	Peter Curran	n/a
		2	Declarations of Interest	To State Conflicts	Standing	n/a	n/a	Peter Curran	n/a
		3	3.1 Minutes of the Previous Meeting: 02 April 2025 3.2 Highlight Report: 02 April 2025	Approval	Standing	n/a	n/a	Peter Curran	Alex Payne
		4	4.1 Action Log & Matters Arising	Discussion	Standing	n/a	n/a	Peter Curran	n/a
FOR APPROVAL, ASSURANCE AND DISCUSSION									
09:45	00:25	5	Bids Panel Lived Experience - NHSCT Sports Grant Award Elain Roberts and Kelly Wallace (Netball)	Discussion	CoB	Verbal/Presentation	Partnerships	David Hopkins	n/a
10:10	00:20	6	Charity Strategy: Delivery Plan (2 years)	Assurance	Ad hoc	Paper	Partnerships	Estelle Hitchon	David Hopkins
10:30	00:10	7	Charity Performance Report	Assurance	CoB	Paper	Partnerships	Estelle Hitchon	David Hopkins
10:40	00:10	8	Charity Funds Finance Report	Assurance	CoB	Paper	FinCor	Chris Turley	Jess Price, Bernie Mitchell
10:50	00:15	COMFORT BREAK							
11:05	00:20	9	Risk Management Report	Assurance	CoB	Paper	Gov	Julie Boalch	Marinela Stoichechi
11:25	00:15	10	Bids Panel Highlight Reports * To include any bids for funds which require committee approval	Assurance	CoB	Paper	Gov	Leanne Smith	n/a
11:40	00:15	11	Bursary Panel Highlight Report (to include review of Terms of Reference) * To include any bids for funds which require committee approval	Approval	CoB	Paper	People	Jo Kelso	n/a
CONSENT ITEMS									
11:55	00:00	12	Committee Priorities & Cycle of Business Monitoring Report 2025/26 * Governance around bids and bursary panel with their new terms of reference. * Rolling over the development session for the corporate trustee.	Information	CoB	Paper	Gov	Trish Mills	Steve Owen
CLOSING ITEMS									
		13	Reflections and Summary of Decisions/Actions	Discussion	Standing	n/a	n/a	Peter Curran	n/a
11:55	00:10	14	Any Other Business	Discussion	Standing	n/a	n/a	Peter Curran	n/a
		15	Date & Time of the Next Meeting: 2 October 2025	Information	Standing	n/a	n/a	Peter Curran	n/a
12:05	02:35	CLOSE							

LEAD PRESENTERS

Name	Position
Peter Curran	Non-Executive Director and Committee Chair
Julie Boalch	Assistant Director of Corporate Governance/ Risk,
Estelle Hitchon	Director of Partnerships & Engagement
David Hopkins	Head of Charity
Jo Kelso	Head of Workforce Education and Development, Chair of Bursary Panel
Trish Mills	Director of Corporate Governance/Board Secretary
Leanne Smith	Assistant Director of Digital, Chair of Bids Panel
Chris Turley	Executive Director of Finance and Corporate Resources

Name	Position	Declaration	Interest Type	Date Interest Started	Date Interest Ended	Left Trust
BEAUMONT-WOOD, Rhiannon	Non-Executive Director * Member of the Remuneration Committee * Member of the the Audit, Risk and Assurance Committee * Member of the Quality, Patient Experience and Safety Committee	Dorset Integrated Care Board (NHS Dorset), Non-Executive Director	Financial Interest	May 2023		
		Nursing and Midwifery Council (NMC), Designated Council Member for Wales	Financial Interest	June 2024		
		RBW Executive and Professional Coaching Ltd, Company Director (Company No 14938585) and Shareholder	Financial Interest	June 2023		
		Currently on coaching framework with Health Education and Improvement Wales	Financial Interest	June 2024		
		Registered Nurse (NMC)	Non-Financial Professional	January 1995		
		Registered Specialist Community Public Health Nurse	Non-Financial Professional	September 1996		
		Member of the Royal College of Nursing	Non-Financial Professional	2007		
BEESLEE, Jayne	Non-Executive Director * Chair of the Finance and Performance Committee * Member of the Remuneration Committee * Member of the Academic Partnership Committee	Employment for interim assignments via Public Sector Resourcing (an agency) regarding the review of major UK government programmes (remunerated net of tax via an Umbrella Company - Danbro Employment Umbrella Ltd)	Financial Interest	01 October 2023		
		Member Representative on the UK Civil Service Pension Board	Non-Financial Personal	01 October 2019		
		Governor on the Finance & General Purposes Committee of Cardiff and Vale Further Education College	Non-Financial Personal	01 February 2024		
		Fellow Chartered Institute of Personnel & Development	Non-Financial Personal	01 April 2006		
BROOKS, Lee	Executive Director of Operations	Partner employed by Welsh Ambulance Services NHS Trust	Any Other Interest	July 2019		
		Member of the Order of St John	Any Other Interest	01 March 2023		
		Volunteer – St John's Ambulance Cymru	Any Other Interest	06 April 2023		
		Council Member – St John's Ambulance Cymru Gwent Council	Any Other Interest	06 April 2023		
		Trustee of Action for Children [1097940]	Position in Charity or Voluntary Organisation	01 February 2021		
CURRAN, Peter	Non-Executive Director * Chair of the Audit, Risk and Assurance Committee * Chair of the Charity Committee * Member of the Finance and Performance Committee * Member of the Remuneration Committee	Company Director - Action for Children [04764232]	Directorships	01 February 2021		
		Company Director - Action for Children (Wales) Ltd [10011497]	Directorships	05 April 2022		
		Trustee of National Youth Arts Wales [1170643]	Position in Charity or Voluntary Organisation	06 May 2021		
		Company Director - National Youth Arts Wales [10449512]	Directorships	06 May 2021		
		Non-Executive Director for Taff Housing	Position in Charity or Voluntary Organisation	01 May 2022		
		Company Director - Team Police Ltd [12518812]	Directorships	01 January 2022	31 October 2024	
		Independent Board Member of the Project Board – National Contemporary Art Gallery for Wales	Any Other Interest	01 January 2024		
		Interim Finance Director for Torfaen Leisure Trust	Directorships	01 September 2023	29 February 2024	
		Interim Independent Member – Kaplan International Colleges UK Ltd [05268303]	Directorships	01 March 2024		
		Independent Member – Kaplan Open Learning (inc member of the Audit & Risk Committee)	Directorships	21 March 2024		
DENNIS, Colin	Chair of Trust Board and Non-Executive Director * Chair of Remuneration Committee	Chair – Citizen Housing (Charity) (previously WM Housing Group)	Position in Charity or Voluntary Organisation	01 January 2015		
		Company Director - Citizen Treasury PLC (previously WM Housing Treasury Ltd)	Directorships	29 August 2017		
		Company Director - Citizen Treasury Vehicle Ltd	Directorships	04 September 2017		
		Chair - North Devon Homes	Position in Charity or Voluntary Organisation	01 October 2021		
		Company Director - North Devon Homes	Directorships	01 April 2022		
		Chair - Green Square Accord (Housing Association)	Position in Charity or Voluntary Organisation	26 March 2024		
		Company Director - LowCarbonLiving Homes Ltd [04207671]	Directorships	26 March 2024		
		Company Director - Green Square Estates Ltd [8719365]	Directorships	26 March 2024		
EVANS, Bethan	Non-Executive Director * Chair of Quality, Patient Experience & Safety Committee * Member of Finance & Performance Committee * Member of People & Culture Committee * Member of Remuneration Committee	Managing Director (Employed) at My Choice Healthcare Limited.	Any Other Interest	01 June 2019		
		Non-Executive Board Member at RHA (Social Housing Organisation – Community Benefit Society)	Position in Charity or Voluntary Organisation	01 November 2019		
		Company Director - My Choice Healthcare South Wales Limited	Directorships	11 March 2020		
		Company Director - Moorlands Rehabilitation (Staffordshire) Limited.	Directorships	20 December 2019		
		Company Director - Springfield (Bargoed) Limited.	Directorships	12 March 2020		
		Company Director - Homes of Excellence Limited	Directorships	19 March 2021		
		Company Director - Victoria House Care Property Limited	Directorships	05 March 2020		
		Company Director - My Choice Healthcare (Four) Limited	Directorships	27 April 2022		
		Company Director - Luk Ros Property Limited	Directorships	12 March 2020		
		[Previously called Homes of Excellence Healthcare Limited, Company name changed 12.08.2022 - #12513139]	Directorships	12 March 2020		
		Company Director - Hawthorn Court Property Limited	Directorships	27 April 2022		
		[Previously called My Choice Healthcare (Three) Limited, Company name changed 12.08.2022 - #13371375]	Directorships	27 April 2022		
		Company Director - Ocean Living Property Limited	Directorships	22 July 2022		
		Company Director - Hawthorn Court Care Limited	Directorships	22 July 2022		
		Company Director - Glyncomel Property Limited	Directorships	01 July 2022		
		Company Director - My Choice Healthcare (Two) Limited	Directorships	01 July 2022		
Company Director - Carmarthen Care Limited	Directorships	02 January 2024				
Company Director - Towy Castle Property Limited	Directorships	01 September 2023				
HUTCHINGS, Hayley	Non-Executive Director * Member of the Remuneration Committee * Member of the Academic Partnership Committee * Member of the People and Culture Committee	Employed at Swansea University, Professor of Health Services Research	Financial Interest	17 June 1995		
HITCHON, Estelle	Director of Partnerships and Engagement	Member of Academi Wales Expert Panel	Position in Charity or Voluntary Organisation	15 July 2024		
		Independent Governor (Non-Executive Director), Coleg Sir Gar/Coleg Ceredigion	Non-Financial Personal	01 January 2025		

Name	Position	Declaration	Interest Type	Date Interest Started	Date Interest Ended	Left Trust
JACKSON, Ceri	Non-Executive Director & Vice Chair of the Trust Board * Chair of the People and Culture Committee * Member of the Charity Committee * Member of Audit Committee * Member of Quality, Patient Experience & Safety Committee * Member of Remuneration Committee	Management Consultant primarily working in third sector	Interest in Companies and Securities	01 May 2019		
		Associate Director of SamKat Consulting Ltd in my capacity as self-employed management consultant	Directorships	01 June 2021		
		Charity Trustee - Stroke Association Trustee, Chair Wales Advisory Group.	Position in Charity or Voluntary Organisation	08 October 2020		
		Charitable Company - Stroke Association - Company Director	Directorships	08 October 2020		
KILLENS, Jason	Chief Executive	Honorary Professor - Swansea University	Personal or Departmental Sponsorship	2019		
		Chairperson – Association of Ambulance Chief Executives (AACE)	Non-Financial Professional	September 2024		
		Company Director of the Association of Ambulance Chief Executives (AACE), Co No. (07761209)	Directorships	September 2024		
		Officer of the Order of St John	Any Other Interest	January 2024		
		Member of the Order of St John	Any Other Interest	2009	2024	
KNEESHAW, Carl	Director of People	Chartered Fellow of Chartered Institute of Personnel and Development	Personal or Departmental Sponsorship	April 2020		
		Fellow of Institute of Leadership	Personal or Departmental Sponsorship	October 2020		
		Safeguarding Lead for local outreach charity, Brunstad Christian Church – Huntworth, Bridgwater, Somerset	Position in Charity or Voluntary Organisation	September 2018		
		Nil Declaration				
LEWIS, Angela	Director of Culture Change	Nil Declaration				
MARSH, Rachel	Executive Director of Strategy, Planning and Performance	Nil Declaration				
MILLS, Patricia (Trish)	Director of Corporate Governance/ Board Secretary	Nil Declaration				
PARRY, Hugh	Trade Union Partner	Nil Declaration				
ROWAN, Hannah	Non-Executive Director * Chair of Academic Partnership Committee * Member of Charity Committee * Member of People & Culture Committee * Member of Remuneration Committee	Director, St Martin's Associates (Business consulting and coaching)	Directorships	04 April 2022		
		Non -Executive Director Qualifications Wales (regulator for all non degree qualifications in Wales)	Any Other Interest	01 April 2021		
		Trustee MAE Cymru (Christian charity which champions gender equality in church of Wales)	Position in Charity or Voluntary Organisation	13 November 2021	November 2023	
		Elected member, The governing body of the church in Wales (Parliament of church in Wales - voting member)	Any Other Interest	01 April 2021		
		Relative (Parent) is a Non-Executive Director for Social Care Wales	Any Other Interest	01 April 2017		
SAMMUT, Jonathan (Jonny)	Director of Digital Services [appointed 26.09.2023]	Fellow of the British Computer Society – FBCS	Any Other Interest	04 March 2024		
		Panel Member of the UK CIO Advisory Panel – Digital Health	Any Other Interest	05 July 2023		
		Federation of Informatics Professionals - Leading Practitioner	Any Other Interest	25 April 2024		
		Strategic Advisor to College of Paramedics	Any Other Interest	01 January 2020		
SWINBURN, Andrew (Andy)	Executive Director of Paramedicine	Strategic Advisor to College of Paramedics	Any Other Interest	01 January 2020		
TURLEY, Christopher	Executive Director of Finance and Corporate Resources	Treasurer of Royal Gwent Hospital League of Friends.	Position in Charity or Voluntary Organisation	01 February 2022	05 November 2024	
TURNER, Damon	Trade Union Partner	Nil Declaration				
WILLIAMS, Liam	Executive Director of Quality and Nursing [from 01 August 2022]	Chair/Director - Thornbury Carnival Community Interest Company Voluntary	Position in Charity or Voluntary Organisation	01 August 2019		
		Member Royal College Nursing	Any Other Interest	01 August 2022		
		Committee member - Royal College Nursing, Nurses in Management and Leadership Forum Steering Committee	Position in Charity or Voluntary Organisation	01 August 2022		

**MINUTES OF THE MEETING OF THE CHARITY
COMMITTEE HELD ON 2 APRIL 2025 AT CARDIFF MRD AND REMOTELY VIA
MICROSOFT TEAMS**

MEMBERS:

Peter Curran	Non-Executive Director (Committee Chair)
Ceri Jackson	Non-Executive Director (virtual)

IN ATTENDANCE:

Rhiannon Beaumont-Wood	Non-Executive Director (virtual)
Julie Boalch	Assistant Director of Corporate Governance & Risk
Lee Brooks	Executive Director of Operations(virtual)
Estelle Hitchon	Director of Partnerships and Engagement
David Hopkins	Head of Charity
Caroline Jones	Corporate Governance Officer
Jo Kelso	Head of Workforce Education and Development (virtual)
Trish Mills	Director of Corporate Governance/Board Secretary(virtual)
Hugh Parry	Trade Union Partner (virtual)
Alex Payne	Corporate Governance Manager
Liz Rogers	Deputy Director of People and Culture Directorate (virtual) [joined during 06/25]
Andy Swinburn	Executive Director of Paramedicine (virtual)
Chris Turley	Executive Director of Finance and Corporate Resources
Damon Turner	Trade Union Partner (virtual) [joined during 04/25]
Marcus Viggers	Trade Union Partner (virtual) [joined during 06/25]

APOLOGIES:

Jess Price	Head of Financial Accounting
Hannah Rowan	Non-Executive Director

01/25 WELCOME AND APOLOGIES

Peter Curran welcomed everyone to the meeting and noted apologies from Hannah Rowan and Jessica Price. Peter Curran welcomed Rhiannon Beaumont-Wood a new Non-Executive Director on the Trust Board who was attending as part of her induction. He also noted this was his first meeting of the Charity Committee as Chair.

02/25 DECLARATIONS OF INTEREST

Estelle Hitchon declared her role as an independent member of Coleg Sirgâr, affiliated with the University of Wales Trinity St David. There were no other additional declarations to those already recorded on the Trust Register of Interests.

RESOLVED: That no new declarations were received.

03/25 MINUTES OF PREVIOUS MEETING AND HIGHLIGHT REPORT

The Minutes of the meeting held on 14 January 2025 were approved as a correct record subject to the removal of the words "pressure washers" in 71/24 (para 3) and the substitution of the word "may" in place of "will" in 72/24 (para 2).

HIGHLIGHT REPORT

Peter Curran expressed his thanks to Ceri Jackson on her role as previous Committee Chair and noted that there had been insufficient time at the previous meeting for members to extend their thanks for the significant progress to date in this area under her guidance.

RESOLVED: That

- 1) the minutes of the meeting held on the 14 January 2025 were approved as a correct record subject to two minor amendments to 71/24 and 72/24 as set out above; and**
- 2) members expressed their thanks to Ceri Jackson as her role of Committee Chair.**

04/25 ACTION LOG AND FEEDBACK FROM CORPORATE TRUSTEE MEETING FROM CHAIR (JANUARY 2025)

Action 65/24a was discussed in relation to the need for indemnity for the charity against claims, particularly associated with injuries sustained during charity supported sports activities. The action remained open.

Action 65/24b relating to guidance for those undertaking charitable fundraising activities was discussed and it was concluded that activities to fundraise for the charity would be undertaken on a voluntary basis and did not require indemnity, which would be made clear within the guidance once Legal and Risk colleagues had been sighted.

Hugh Parry raised a question about the kayaks which had been funded previously but were unable to be used. David Hopkins explained that the kayaks were deemed safety-critical equipment and that a decision had been made to dispose of them due to maintenance concerns. Discussions were ongoing regarding potentially donating them to a whitewater rafting centre, in exchange for free sessions for staff.

Rhiannon Beaumont-Wood mentioned potential indemnity issues relating to overseas work such as the Wales for Africa initiative. Estelle Hitchon confirmed there was not an active offer currently and therefore such indemnity issues were not relevant for the Trust.

FEEDBACK FROM CORPORATE TRUSTEE MEETING FROM CHAIR

The approval of the charity accounts for 2023/24 was the main item of business and these were filed by the deadline of 31 January 2025. The Trustee thanked Chris Turley and his team for their work.

RESOLVED: That

- 1) the action log was reviewed and updated as set out above; and**
- 2) the approval of the accounts by the Corporate Trustee was noted.**

05/25 CHARITY STRATEGY UPDATE

Estelle Hitchon introduced the item highlighting the strategic conversations initiated since David Hopkins took up post. The strategy aimed to set clear objectives for the charity's future. Members received an update on progress against the Charity's workplan since the January meeting.

David Hopkins referred to the theory of change which was presented at the January meeting in more detail, the need to simplify this and to get the strategic direction right. The focus was on the wording of the strategic objectives, with potential projects beneath and the links to the Trust's wider strategic ambition above.

Trish Mills emphasised that maintaining and expanding the charity's position required significant structures and governance, which was the rationale behind the strategic enablers. Investing in this structure would yield important outputs including the establishment of a robust monitoring and evaluation process. This

process would ensure the impacts of the work would be monitored effectively and demonstrated in both internal and external communications. It was also noted that the current Theory of Change was not the sole communication strategy for staff and patients. There would be additional, more targeted and granular communications. For instance, the Chief Executive Officer Roadshows the following week would focus on listening to local teams to understand how the charity can support them, and how these teams could contribute to the charity through fundraising and ambassadorial roles. While the strategic document is crucial, it will be supplemented by other specific communications tailored to different audiences.

Ceri Jackson raised concerns about the use of the word "happier" in Objective one, questioning its subjectivity and appropriateness; whilst acknowledging there may be valid reasons for its inclusion. She viewed objective two positively with a focus on supporting at risk communities and promoting diversity, which aligned well with potential funding opportunities. Regarding Objective three, there was a suggestion to consider more basic patient care in addition to enhanced patient care, emphasising the balance between statutory funding and additionality. The term "innovation" was highlighted as relevant to enhanced patient care. These reflections were shared to invite further thoughts and feedback, with an overall appreciation for the work done so far. Both Damon Turner and Rhiannon Beaumont- Wood supported the use of the word "happier" linking it to broader strategies. Estelle Hitchon and David Hopkins agreed to review the wording and the inclusion of innovation.

The strategic objectives, and enablers and the theory of change were endorsed by the committee, subject to minor amendments to wording of the strategic objectives – as discussed. It was noted that the strategy would be presented to the Corporate Trustee for approval at its May 2025 meeting. The committee noted that this had been shared with Trade Union Partners at the Welsh Ambulance Services Partnership Team (WASPT) meeting in March.

The importance of the strategic enablers was emphasised to continue to strengthen governance, as was the monitoring of the objectives overall. These would be developed as the strategy comes through to the committee and the Corporate Trustee.

RESOLVED:

- 1) The update on the charity's workplan was noted;**
- 2) That the Committee endorsed the three strategic objectives for the charity supported by five strategic enablers; and**
- 3) The theory of change was endorsed by the committee with some minor amendments to the wording of the objectives.**

06/25 CHARITY PERFORMANCE REPORT

The Charity Performance Report was received showing performance against the NHS Charity Together (NHSCT) grants as of the 28 February 2025. Since the report was written the Development Grant was now closed. This grant allowed the Trust to commission the initial report, the visual branding and some of the merchandise and assets. A broader launch of the brand was anticipated from 1 May.

The Stage 3 Recovery Grant, and Ambulance Grant were being administered according to their conditions with feedback from the next meeting with NHSCT being fed back to committee at its next meeting in July. Whilst there were some elements shown as amber; members were assured that there were mitigating plans to address these, and risks were considered.

Peter Curran enquired if the grants were subject to an audit of any kind. Chris Turley confirmed that, from a financial accounting perspective, Audit Wales had reviewed those grants that have spanned multiple years as part of their Independent Examination of the 2023/24 accounts. Discussions with NHSCT focusses on what can be done to assist the Trust to maximise the benefits.

Updates were received regarding future grant opportunities available from NHS Charities Together and synergies with our clinical model. These funds include the Community Resilience Fund, the Innovation Challenge, Work Wellbeing, and Greener Communities fund.

The Community Resilience Fund of £140k had been pre allocated to the charity but still required an application by the end of August. The application would be reviewed in the context of changes to Save a Life Cymru. Andy Swinburn supported the idea of targeting under-resourced communities and mentioned the high prevalence of public access defibrillators in Wales. He suggested using the funds to deploy defibrillators more strategically in areas with higher cardiac arrest rates, aligning with the charity's objectives.

Ceri Jackson highlighted the significant progress made with the ambulance grant, specifically mentioning the recruitment of 235 community welfare responders and the training of 124 of them. She emphasised the far-reaching impact of this progress and its alignment with the charity's strategic priorities. She also mentioned the Mind Over Mountains project, acknowledging the challenges in meeting some of the targets. She suggested that moving forward, targets should be set with a more realistic lens, as funders appreciate exceeding targets. David Hopkins agreed with Ceri Jackson's points, particularly about the Mind Over Mountains target. He acknowledged that the initial target was set based on the number of walks times the maximum capacity of those walks, which made it challenging to meet the target if even one person didn't turn up. He noted that this was a valuable lesson for future grant writing.

Lee Brooks emphasised the importance of ensuring synergy between groups and avoiding internal competition within the Trust. He highlighted the need to bring all parties together to maximise opportunities and avoid pitching one group against another. David Hopkins acknowledged Lee Brooks' point and mentioned that the charity's objectives were designed to support the trust and emphasise collaboration. He noted that the charity could not achieve its goals alone and aimed to financially support the Trust's work.

Ceri Jackson suggested that the next application should be signed off by the Executive Team to ensure alignment and synergy. She stressed the importance of having complete alignment and proper governance in the bid processes, recommending that the Executive team sign off on applications before they come to the Charity Committee. Trish Mills noted the previous discussions regarding approval of grant applications, and that she would take an action to confirm what was previously agreed. She recalled that grant applications were intended to be signed off by the Executive Leadership Team rather than being brought to the Charity Committee. Trish advised that she would verify the position previously discussed and confirm it with the committee.

RESOLVED:

- 1) That the Committee noted the progress of the Charity's active grants and noted the key risks and mitigations in place; and**
- 2) The Committee noted that the Charity intends to apply for the NHSC Community Resilience Fund in 2025.**

07/25 CHARITY FUNDS FINANCE REPORT

Chris Turley highlighted two main points from the report which included:

- 1) The balance of funds held as of 28 February 2025 which was £783,964 and comprised of £214,394 unrestricted funds; £179,429 in designated funds; and £390,141 in restricted funds.
- 2) Between 01 April 2024 to 28 February 2025, the unit price of the charity's investments had increased by 2.61%, resulting in an overall gain of .c£7.3k. despite a slight dip in February. The charity current holds 1,090.14 units at a unit price of £263.7826, giving a total market value of £287.5k. The overall trend with the investments remains positive.

It was noted that the current financial position of the charity is as expected, with figures aligning with historical trends and activities. While the charity had considered seeking higher returns with greater risk in the past, a risk-averse approach was considered to be preferable, especially with donated money; and any changes to the investment strategy would require careful consideration. The

committee discussed the charity's position regarding reserves and indicated that it could be helpful to return to both the reserves policy and discussions regarding investment approaches in the coming months. The committee received the charity finance update and noted the detail provided.

RESOLVED: That

- 1) the detail of the fund balances held at 28 February 2025 were noted; and;**
- 2) the update on the COIF Charity Investment Fund was noted.**

08/25 DRAFT 2025/26 FUNDRAISING TARGETS AND EXPENDITURE BUDGETS

The discussion began with an acknowledgment from Estelle Hitchon that the current initiative was unprecedented, requiring a systematic approach to identify potential opportunities. The presented paper served as an initial framework, with the understanding that the figures provided were preliminary estimates. The volatility of both the market and the fundraising environment was highlighted, noting the challenges of diversifying income streams from a low starting point. While the ambition was high, there may be a need to temper expectations.

David Hopkins began by focusing on Appendix 1, which detailed the rationale behind the current stage of planning. He stressed that documenting the charity's ambitions and expected outcomes from staff investment was crucial. The volatility in income, particularly from legacies and NHS charities together, was highlighted. The summary of income projections showed actual figures based on audited accounts, revealing significant volatility. Most donations received since early 2020 came from NHS Charities Together, which were now nearly spent. Their grant-giving strategy was shifting to fewer, smaller, and more competitive grants. The financial model must adapt, as significant six-figure sums from NHS Charities Together were unlikely in the near future, except for the pre-allocated amount for ambulance charities through the Omaze Award and Community Resilience grant in 2025-26. This pre-allocated figure of £142,000 was considered more certain than other grants, provided an acceptable application is submitted.

For the financial year 2025-26, the breakdown included both income and estimated expenditure. Notably, several grants, particularly from NHS Charities Together, and restricted legacies have already been recognised as income. The planned spending of these funds will result in a planned in-year deficit. Many income estimates on the charitable activity were provisional, with efforts to spend these funds in a controlled manner based on bids. Some legacies, such as those from Barmouth and Colwyn Bay, were expected to carry forward into 2026-27 to ensure the restricted terms were satisfied.

David Hopkins also touched on the unpredictability of legacies in the charity sector, despite recent large six-figure legacies. It was noted that even with immediate fundraising efforts, significant results from legacies might not be seen

for at least ten years. Consequently, conservative estimates were made, with any large legacy considered an unexpected benefit. Legacies tended to be restricted, often designated for specific purposes. The plan focused on growing trust and foundations, voluntary donations, and community fundraising to mitigate the volatility of legacy income and changes in NHS Charities Together. This approach aimed to ensure a steady upward trajectory in overall income, despite potential dips in specific years.

A new annual budget of £15,000 for the Bursary Panel was proposed to address previous uncertainties in grant awarding. Additionally, a request was made for the charity committee to delegate a budget of £13,500 for core fundraising costs directly to David Hopkins, which is an adjustment to the current process which requires applying to the Bids Panel. This delegation request is intended to facilitate necessary fundraising expenditures and ensure transparency, such as the annual membership fee for NHS Charities Together, which was essential for benefiting from grants like the Community Resilience grant.

Chris Turley noted that financial planning for the charity differed significantly from that of the Trust, particularly in terms of committed spend and the ability to carry balances forward. The charity's financial planning does not adhere to the same annual cycles as the Trust, allowing for more flexibility.

Chris Turley noted that following discussions, the original steep income projections were moderated to balance ambition with realism. There was a consensus on the need to avoid over-promising and under-delivering in the first year. The revised plan represented a fair compromise, incorporating ambition while tempering expectations due to factors such as the timing of new staff recruitment.

Peter Curran raised the idea of having multiple scenarios for income projections, such as best case, worst case, and most realistic estimates, to better account for volatility. It was noted that while the current projection line was positive and showed growth, it might be beneficial to include scenarios above and below this line to represent different outcomes. The importance of having a clear, agreed-upon figure was emphasised, along with the positive return on investment. The charity's need to cover increasing salary costs for David Hopkins and other posts was highlighted, stressing the importance of ensuring sufficient income to meet these expenses. The ambition in the income projection was appreciated, and the suggestion to consider multiple scenarios was noted as a valuable thought.

The 2025/26 fundraising targets and expenditure plans were discussed and endorsed and would be presented at the May meeting for Corporate Trustee approval. The overall trajectory showed a gradual increase in income, despite a dip expected in 2026-2027 due to changes in NHS Charities Together's grant-

giving strategy.

This was the first fundraising and expenditure plan for the charity, and it was welcomed. Members emphasised the importance of monitoring and evaluating the charity's performance against these targets, with regular updates to ensure alignment with the strategic direction. Chris Turley stated that future iterations of the finance update would incorporate necessary information for the committee, with references to the annual plan. Although monthly profiling, as done with Trust budgets, was not suggested, there would be consideration of how to present this information effectively.

Ceri Jackson's asked whether the agreed timeline and funding to support the charity were discussed at the ELT meeting, and if there was any flexibility in sustaining the funding for a little bit longer if the deadline was missed. Estelle Hitchon acknowledged that the Head of Charity was six months into a two-year term, with ongoing conversations about longer-term scenarios. David Hopkins' significant contribution in the first six months was highlighted, noting that the charity's current position would not be as strong without him. The importance of evaluating the cost-benefit of his role in the longer term was noted, although final decisions were yet to be made.

Future reviews would assess how closely the plan is being delivered and the actual return on investment. The current figures reflect the existing arrangement, including central services, potential increment points, and a nominal figure for inflation. The need for ongoing evaluation and adjustment was recognised, ensuring the charity's financial planning remained responsive to changing circumstances.

RESOLVED: That

- 1) The charity endorsed the expenditure plans for 2025/26 for Corporate Trustee approval in May;**
- 2) The Corporate Trustee be asked to note the plans for years two and three;**
- 3) An annual amount of £15k was agreed for Bursary Panel applications; and;**
- 4) A delegated budget of £13,580 towards core fundraising costs was approved and formally delegated to David Hopkins as the Head of Charity.**

09/25 CHARITY RISK REGISTER

Julie Boalch gave a verbal update on the development of the charity's risk register. The risk register was being developed to closely align with the charity's strategic objectives and enablers, ensuring that potential risks were identified and managed effectively to support the achievement of these goals.

Several key risks were highlighted, including the resourcing and capacity to manage the charity, compliance with legal and regulatory frameworks, and the ability to meet fundraising targets. Other risks identified include the governance and management of funds, grants administration, and financial controls on expenditure.

The discussion emphasised the importance of having a robust risk register to guide the charity's operations and ensure that potential challenges were proactively managed. A detailed update, including a copy of the risk register, would be presented at the next meeting to provide further insights into the identified risks and the measures being taken to address them.

Julie Boalch stated that she is working closely with David Hopkins on the development of the charity risks. Overall, the development of the risk register was a critical step in professionalising the charity's operations and ensuring that it could effectively navigate potential challenges while achieving its strategic objectives.

RESOLVED: that

1) the progress to date was noted; and

2) a full detailed update would be presented at the next meeting.

10/25 COMMITTEE EFFECTIVENESS REVIEW 2024/25 FOLLOW UP

Following the discussions at the January committee meeting, the Mentimeter results, and feedback were incorporated into the annual report. The report initially presented in January had gaps due to the absence of discussions on effectiveness. The Mentimeter results were circulated and included in the new "reading room" section in Ibabs, designed to provide additional information without requiring decisions or discussions.

An amendment was noted, correcting the delegated authority amounts for the Bursary and Bids panels. The clean terms of reference were included for approval, with marked-up versions available in the reading room. Further changes may be proposed at the next meeting regarding grant approval and endorsement of income and expenditure.

Suggestions for committee membership included adding someone from the volunteer team and the Head of Commercial when appointed. Lee Brooks confirmed that the volunteer could be sought from the Volunteer Steering Group and that he would progress this request. It was noted to be important to be clear that the charity does not include volunteer fundraising activities, however.

Concerns were raised about the quorum requirement of three non-executive directors – if the membership of the committee included three non-executive directors -, and it was noted that this will be considered further – as it affects the operation of all board committees. This will be taken forward by the Board Secretary.

The committee was encouraged to consider its priorities for 2025-26, with a suggestion to limit these to two, given the existing reporting commitments. Proposed priorities included governance around the Bids and Bursary Panels' operating arrangements, including their new terms of reference, and potentially rolling over the development session planned for this year. These suggested priorities were agreed by the committee.

Following this discussion, the committee agreed the committee annual report for 2024/25, endorsed the changes to the committee terms of reference for 2025/26, and approved the cycle of business for 2025/26. It was noted that these documents would be presented to the Trust Board in May, following review by the Audit, Risk and Assurance Committee in early May.

RESOLVED: That

- 1) The annual report 2024/25 was approved;**
- 2) The changes to the terms of reference were approved;**
- 3) The 2025/26 cycle of business was approved; and**
- 4) The committee priorities for 2025/26 were agreed which were:**
 - a) governance around the Bids and Bursary Panels' operating arrangements, including their new terms of reference**
 - b) the planned development session be rolled over to this year;**

11/25 BIDS PANEL HIGHLIGHT REPORT

The AAA reports from Bids Panel meetings held on 24 February and 6 March were received. There were no bids over £5,000 for the committee to approve, and four bids related to replacement televisions for Tenby, Knighton, Ferndale and Barmouth stations were approved at circa £500 each.

Further work was underway to ensure all funds awarded had been spent and a quarterly report would now be received by the Bids Panel to effectively monitor this. Revised processes that required funding to be spent within 12 months was being introduced.

Julie Boalch presented revised terms of reference for the Bids Panel, for consideration. Ceri Jackson requested that reference should be made to the appeals process, be it that there wasn't one or include the process if there was. Julie acknowledged that, although there had been no appeals in the past, it was a valid point. She suggested making a minor amendment to the terms of reference

to either include a process for handling appeals or make it clear that there was no appeals process. This adjustment would be considered if the committee supported the terms of reference with this slight modification. Historically, there had been no appeals, but the inclusion of this provision would ensure preparedness for any future occurrences. The panel's revised terms of reference were approved.

Members thanked Julie Boalch, Assistant Director of Corporate Governance and Risk, for her work in chairing and steering the panel over the last three years. Leanne Smith, Assistant Director of Digital – Data and Analytics, would take the Chair of the Bids Panel from April onwards.

RESOLVED: That

- 1) the Bids Panel updates, relating to the meetings on 24 February and 6 March 2025 were noted;**
- 2) the revised terms of reference for Bids Panel were approved; and**
- 3) Thanks to Julie Boalch for chairing the Bids Panel was noted.**

12/25 BURSARY PANEL HIGHLIGHT REPORT

The Bursary Panel met in January 2025 and approved allocation of funding for two applications: one part funding an MSc Advanced Clinical Practice to the value of £3,000, and one-part funding an MSc Professional Practice to the value of £1,188.

The terms of reference review had not yet taken place; however, a meeting was scheduled for this on 14 April, and these would be presented to the next meeting of the committee. It was noted that a number of applications that failed to meet the threshold were due to the Statutory and Mandatory training requirement not being up to date.

RESOLVED: That the Committee noted the position.

13/25 REFLECTIONS AND SUMMARY OF DECISIONS/ACTIONS

Members reflected that the hybrid format worked well and commented on the professionalisation of the charity and the progress made over the last 12 to 18 months. It was noted that this was the first meeting with Peter Curran as the Chair, and it was agreed that the meeting was well chaired.

14/25 ANY OTHER BUSINESS

None discussed.

15/25 DATE OF NEXT MEETING

The next meeting of the Committee is scheduled for 3 July 2025.

DRAFT

**CHARITY COMMITTEE
HIGHLIGHT REPORT TO CORPORATE TRUSTEE**

This report provides the Trustees with key escalation and discussion points at the last Committee meeting. A full list of items discussed appears at the end of the report to enable members to raise any questions to the Chair which have not been drawn out in the report.

The papers for this meeting can be found by following this [link](#) to the Committee page on the Trust website.

Corporate Trustee Meeting Date	29 May 2025
Committee Meeting Date	2 April 2025
Chair	Peter Curran

KEY ESCALATION AND DISCUSSION POINTS

ALERT

(Alert the Trustees to areas of attention)

Charity Strategy

1. The Committee held discussions on the **theory of change to drive the direction of travel of the charity's strategy** at both the January and April 2025 meetings. The three strategic objectives were endorsed for the charity, supported by five strategic enablers. The strategic objectives and enablers and the theory of change were endorsed by the committee with some minor amendments to wording of the strategic objectives, and they are before the Corporate Trustee for approval at their May meeting. The committee noted that this had been shared with Trade Union Partners at the Welsh Ambulance Services Partnership Team (WASPT) meeting in March.

The importance of the strategic enablers was emphasised to continue to strengthen governance, as was the monitoring of the objectives overall. These will be developed as the strategy comes through to the committee and the Corporate Trustee.

2. The **2025/26 fundraising targets and expenditure plans** were discussed and endorsed and are presented at this May meeting for Corporate Trustee approval. The charity aims to diversify its income streams, with the focus now shifting towards growing trust and foundations, voluntary donations, and community fundraising. The income projections were felt to be realistic and achievable, considering the anticipated timeline for hiring a fundraising officer. The overall trajectory shows a gradual increase in income, despite a dip expected in 2026-2027 due to changes in NHS Charities Together's grant-giving strategy.

The introduction of a fixed budget for the Bursary Panel aims to provide more certainty and enable better future planning for grant rounds. Additionally, a delegated budget for core fundraising costs to streamline the process and support fundraising efforts effectively was supported.

This is the first fundraising and expenditure plan for the charity, and it was welcomed. Members emphasised the importance of monitoring and evaluating the charity's performance against these targets, with regular updates to ensure alignment with the strategic direction.

ADVISE

(Detail any areas of on-going monitoring, approvals, or new developments to be communicated)

Reflections

3. Members reflected that the hybrid format worked well and commented on the professionalisation of the charity and the progress made over the last 12 to 18 months. It was noted that this was the first meeting with Peter Curran as the Chair, and it was agreed that the meeting was well chaired. Rhiannon Beaumont-Wood, Non-Executive Director, joined the meeting to observe as part of her ongoing induction to the trust board.

ASSURE

(Detail here any areas of assurance the Committee has received)

4. Members were assured on progress against the **charity workplan** to date and over the next six months including:
 - Recruitment of fundraising and communications officer who it is anticipated will be start in post in July.
 - Launch of new visual identity for the charity
 - Launch of the challenge fundraising campaign, with places in various 10K, half and full marathons secured
 - Review of existing restricted and designated funds
 - Proactive fundraising strategy to compliment the strategic direction
 - Review of Bids and Bursary Panel processes and broader governance
 - Communications approach

Charity Performance

5. The Charity Performance Report was received showing performance against the NHS Charity Together (NHSCT) grants as of the 28 February 2025. This included the Development Grant, Stage 3 Recovery Grant, and Ambulance Grant. All grants are being administered according to their conditions and whilst there were some elements shown as amber; members were assured that there were mitigating plans to address these, and risks were considered.
6. Updates were received regarding future grant opportunities available from NHS Charities Together and synergies with our clinical model. These funds include the Community Resilience Fund, the Innovation Challenge, Work Wellbeing, and Greener Communities fund.

Charity Finance Update

7. The balance of funds held as of 28 February 2025 is £783,964 comprised of £214,394 unrestricted funds; £179,429 in designated funds; and £390,141 in restricted funds. Between 01 April 2024 to 28 February 2025, the unit price of the charity's investments has increased by 2.61%, resulting in an overall gain of .c£7.3k. The charity current holds 1,090.14 units at a unit price of £263.7826, giving a total market value of £287.5k. The overall trend with the investments remains positive.
8. The current financial position of the charity is as expected, with figures aligning with historical trends and activities. While the charity has considered seeking higher returns with greater risk in the past, risk-averse approach was emphasised to be preferable, especially with donated money; and any changes to the investment strategy would require careful consideration.

Bids and Bursary Panels

9. The AAA reports from Bids Panel meetings held on 24 February and 6 March were received and the panel's revised terms of reference were approved. There were no bids over £5,000 for the committee to approve, and four bids related to replacement televisions for Tenby, Knighton, Ferndale and Barmouth stations were approved at circa £500 each.
10. Further work is underway to ensure all funds awarded have been spent and a quarterly report will now be received by the Bids Panel to effectively monitor this. Revised processes that require funding to be spent within 12 months is being introduced.
11. Members thanked Julie Boalch, Assistant Director of Governance and Risk for her work in chairing and steering the panel over the last three years. Leanne Smith, Assistant Director of Digital – Data and Analytics, will now chair the panel.
12. The Bursary Panel met in January 2025 and approved allocation of funding for two applications: one part funding an MSc Advanced Clinical Practice to the value of £3,000, and one part funding an MSc Professional Practice for the sum of £1,188. The terms of reference will be reviewed at an upcoming meeting.

Committee Annual Effectiveness Review for 2024/25

13. The Committee's annual effectiveness review was held in January, and at its April meeting the 2024/25 annual report, revised terms of reference, and cycle of business for 2025/26 were approved. These will be presented to the board in May following review by the Audit, Risk and Assurance Committee in May. Priorities for the committee for 2025/26 were agreed to be a development session for the Corporate Trustees in 2025/26, and the review of the Bids Panel and Bursary Panel terms of reference and operating arrangements.

RISKS

New Risks Identified: Committee received an update on the progress of developing the Charity Risk Register and a suite of risks. A detailed update will be presented at the next meeting in July 2025. The risks identified and in development are closely linked to the Charity's strategic objectives and enablers as set



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CYMRU
NHS
WALES

Ymddiriedolaeth Brifysgol GIG
Gwasanaethau Ambiwylans Cymru
Welsh Ambulance Services
University NHS Trust

out in the new Strategy and to the topics of discussion outlined on the Committee’s agenda.

COMMITTEE AGENDA FOR MEETING		
Charity Strategy Update	Charity Performance Report	Charitable Funds Finance Report
Draft 2025/26 Fundraising Targets and Expenditure Budgets	Charity Risk Register	2024/25 Committee Effectiveness Review – Follow Up
Bids Panel AAA report	Bursary Panel AAA report	

COMMITTEE ATTENDANCE				
Name	2 April 2025	3 July 2025	2 October 2025	13 January 2025
Ceri Jackson				
Peter Curran				
Hannah Rowan				
Estelle Hitchon				
Chris Turley				
Lee Brooks				
Andy Swinburn				
Liz Rogers	From Finance Item			
Trish Mills				
Hugh Parry				
Damon Turner				
Marcus Viggers	From Performance Item			
Julie Boalch				
Jo Kelso				
David Hopkins				
Leanne Smith				

	Attended
	Deputy attended
	Apologies received
	No longer member/not member

**ACTION LOG - CHARITY COMMITTEE
WELSH AMBULANCE SERVICES NHS TRUST**

Minute Ref	Date	Agenda Item	Action Note	Responsible	Due Date	Progress/Comment	Status
65/24a	14 January 2025	Action Log	Estelle and David would follow up on the conversation with Velindre regarding overall indemnity for the charity and bring back information to the committee, likely in the next financial year, around quarter two 2025/26.	Estelle Hitchon David Hopkins	2 October 2025	<p><u>Update for July meeting</u> A document has been drafted in conjunction with Legal and Risk colleagues, and will shortly be published on Siren. A link to the document will be sent to all Charity Committee members after publication. Propose for closure.</p> <p><u>Update at April meeting</u> - the need for indemnity for the charity related to potential claims particularly injuries sustained during sports activities.</p> <p><u>Update for April Meeting</u> - The Head of Charity has had initial conversations with Velindre, with other NHS Wales charities, and with the Trust's solicitor, regarding indemnity and risk for the charity, and for staff undertaking charitable activities. These conversations are ongoing, and over the next few months a short guidance document will be drafted to summarise the key information for staff.</p>	Complete
65/24b	14 January 2025	Action Log	Estelle Hitchon and David Hopkins to provide clear guidance for staff who undertake charitable fundraising activities, ensuring they are aware of any risks and the context in which these activities should take place.	Estelle Hitchon David Hopkins	2 October 2025	<p><u>Update for July meeting</u> A document has been drafted in conjunction with Legal and Risk colleagues, and will shortly be published on Siren. A link to the document will be sent to all Charity Committee members after publication. Propose for closure.</p> <p><u>Update at April meeting</u> - Following the conversations, it was concluded that activities to fundraise for the Charity are undertaken on a voluntary basis and do not require indemnity.</p> <p><u>Update for April meeting</u> - The Head of Charity has had initial conversations with Velindre, with other NHS Wales charities, and with the Trust's solicitor, regarding indemnity and risk for the charity, and for staff undertaking charitable activities. These conversations are ongoing, and over the next few months a short guidance document will be drafted to summarise the key information for staff.</p>	Complete
06/25	2 April 2025	Charity Performance Report	Trish Mills agreed to confirm the route for the approval of grant applications and return to the committee to confirm the position. She noted that the previous position previously discussed was that they would be signed off by the Executive Leadership Team, but advised she would clarify.	Trish Mills	3 July 2025	<p><u>Update 090425:</u> Trish Mills has included the following statement in the revised Terms of Reference for the Charity Committee for 2025/26, as follows "Grant applications will be approved by the Executive Leadership Team, or by any other mechanism they determine. The outcomes of those applications will be reported to this committee for information, and the assurance on the monitoring thereof will be reported through the performance report." This amendment has been presented for approval by the committee (via chair's action), and will take effect once the revised terms of reference are approved by the Trust Board on the 29 May 2025. Action complete and proposed for closure.</p>	Complete
07/25	2 April 2025	Finance Report	The committee discussed the charity's position regarding reserves and indicated that it could be helpful to return to both the reserves policy and discussions regarding investment approaches in the coming months. The committee received the charity finance update and noted the detail provided.	Chris Turley	2 October 2025	<p><u>Update for July meeting</u> Verbal update</p>	Open

AGENDA ITEM No	6
OPEN or CLOSED	OPEN
No of ANNEXES ATTACHED	1

Charity Strategy: Delivery Plan

MEETING	Charity Committee
DATE	3 July 2025
EXECUTIVE	Estelle Hitchon, Director of Partnerships & Engagement
AUTHOR	David Hopkins, Head of Charity
CONTACT	David.Hopkins4@wales.nhs.uk

EXECUTIVE SUMMARY
<p>1. A draft Charity Delivery Plan is presented for approval. This Delivery Plan outlines how the Charity will deliver its Strategic Objectives over the next two years</p> <p>RECOMMENDATION: It is recommended that the Committee approves the Charity Delivery Plan</p>

KEY ISSUES/IMPLICATIONS
None

REPORT APPROVAL ROUTE
Charity Committee – 3 July 2025

REPORT APPENDICES
Appendix 1: Charity Delivery Plan 2025-2027

REPORT CHECKLIST			
Confirm that the issues below have been considered and addressed		Confirm that the issues below have been considered and addressed	
EQIA (Inc. Welsh language)	X	Financial Implications	X
Environmental/Sustainability	X	Legal Implications	X
Estate	X	Patient Safety/Safeguarding	

Ethical Matters	X	Risks (Inc. Reputational)	X
Health Improvement	X	Socio Economic Duty	X
Health and Safety		TU Partner Consultation	X

SITUATION / BACKGROUND

1. At a meeting of the Corporate Trustee on 29 May 2025, the Charity's Strategic Objectives and Enablers were approved. It was agreed that a Charity Delivery Plan would be created, to outline the practical steps that will help to meet the Charity's Strategic Objectives.
2. It was also initially proposed that the Charity Delivery Plan would be presented at the same time as a Fundraising Plan - however, it is now proposed that the Fundraising Plan be presented for approval at the Q3 Charity Committee meeting.
3. It has not been possible to draft a Fundraising Plan at this stage, because of delays in recruiting the Fundraising and Communications Officer. This role will work closely with the Head of Charity to draft the Fundraising Plan once they are in post. Nevertheless, even whilst the plan is in draft, fundraising will continue at pace, and income generation remains a key priority of the Charity Team's delivery plan.

ASSESSMENT

4. The Charity Delivery Plan (appendix 1) outlines the practical steps that the Charity will undertake in order to deliver its objectives, and to professionalise and grow the Charity.
5. It is intended to be an agile plan that will be amended and updated as the Charity grows, and does not exclude the possibility of engaging with unforeseen opportunities in the future.
6. The workplan tasks are divided broadly into six categories:
 - Strategic Objective 1: Wellbeing and development of staff and volunteers
 - Strategic Objective 2: Community Resilience
 - Strategic Objective 3: Enhanced patient care through additional projects and capital development
 - Strategic Enablers: Income Generation
 - Strategic Enablers: Governance and Policy
 - Strategic Enablers: Communications and Impact

7. In the three Strategic Objectives, income generation tasks are listed first, as these will be crucial to the ongoing development of the Charity's delivery.
8. In the five Strategic Enablers, the tasks have been divided into three broad categories – recognising that many of the tasks could have been listed against several categories.
9. The Charity Delivery Plan is presented for approval by Charity Committee at this meeting. Progress will be reported on a biannual basis at Charity Committee, with the next report due at the January meeting.

RECOMMENDATION: It is recommended that the Committee approves the Charity Delivery Plan.



ELUSEN

Gwasanaeth Ambiwllans Cymru

Welsh Ambulance Service

CHARITY

Charity Delivery Plan 2025 – 2027

Version 1.0: Charity Committee, 3 July 2025



Strategic Objectives and Enablers

Approved at Corporate Trustee, May 2025

Strategic Objectives

SO1: The Charity will help WAST to support the wellbeing and development of its staff and volunteers, resulting in a healthier, happier and more experienced workforce

SO2: The Charity will support WAST to build community resilience throughout Wales

SO3: The Charity will support WAST to provide enhanced patient care, through additional projects and/or capital investment, and through testing new models of delivery



Delivery Plan 2025 - 2027

SO1: Wellbeing and development of staff and volunteers

Activities	Timescale	Description / Progress	Colleagues responsible	RAG Rating
Income Generation: NHSCT Workplace Wellbeing application	tbc (expected by Dec 2025)	Timescale dependent on launch date set by NHS Charities Together	<ul style="list-style-type: none"> Head of Charity Workplace Wellbeing 	
Income Generation: Grant application to Blue Light Card Foundation	Within 12 months	Grants up to £25,000 awarded for projects supporting health and wellbeing of emergency services staff and volunteers	<ul style="list-style-type: none"> Head of Charity Workplace Wellbeing 	
Project Delivery: Delivery and evaluation of Sports Fund	Delivery by Dec 2025 / Evaluation by Mar 2026	12 teams funded in Rounds 1 and 2 At least £1,000 to be awarded in final round (plus underspends from Rounds 1 and 2)	<ul style="list-style-type: none"> Head of Charity Bids Panel Individual teams 	On track
Impact Evaluation: Closure report for Mind over Mountains project	Oct 2025 - Jan 2026	Additional evaluation report to consolidate learning from the project	<ul style="list-style-type: none"> Head of Charity OD 	
Impact Evaluation: Case studies from previous Bids Panel applications	Nov – Dec 2025	Helping to showcase impact of funding to staff / potential donors, to build support for the Charity's fundraising and reputation.	<ul style="list-style-type: none"> Fundraising and Comms Officer 	
Governance: Review of guidance for Bids Panel applications and eligibility	Within 12 months	Review of guidance in consultation with Bids Panel Approval by Charity Committee / Corporate Trustee	<ul style="list-style-type: none"> Head of Charity Chair of Bids Panel 	
Governance: Review of guidance for Bursary Panel applications and eligibility	Within 12 months	Review of guidance in consultation with Bursary Panel Timeline tbc	<ul style="list-style-type: none"> Head of Charity Chair of Bursary Panel 	
Development: Assessing potential for future grants to fund strategic workplace wellbeing projects	2026 - 2027	To include discussions with Workplace Wellbeing and Organisational Development colleagues	<ul style="list-style-type: none"> Head of Charity Workplace Wellbeing OD 	

Delivery Plan 2025 - 2027

SO2: Community resilience

Activities	Timescale	Description / Progress	Colleagues responsible	RAG Rating
Income Generation: Application to NHSCT Community Resilience Fund	By end of August 2025	Application deadline: 29 August 2025 Project delivery: April 2026 – March 2028	<ul style="list-style-type: none"> Head of Charity Project Delivery and Reporting by Clinical Directorate and Volunteer Service 	On track
Income Generation: National Lottery Community Fund application for Wish Ambulance	By end of December 2025	Towards support staff costs to increase number of referrals, and increase capacity to respond to urgent referrals	<ul style="list-style-type: none"> Head of Charity Wish Ambulance team 	On track
Impact Evaluation: Evaluation and case studies of existing NHSCT-funded volunteering projects	By end of December 2025	In line with existing reporting timelines for NHSCT-funded projects	<ul style="list-style-type: none"> Fundraising and Comms Officer Volunteer Service 	
Development: Working cross-directorate to assess potential for future community resilience projects	January 2026 onwards	Focus on projects that support improving ROSC rates, in line with Trust's priorities. To include conversations with clinical teams, Save a Life Cymru, PECL and Volunteer Service. Support to be funded by applications to Trusts and Foundations.	<ul style="list-style-type: none"> Head of Charity Colleagues across directorates 	

Delivery Plan 2025 - 2027

SO3: Enhanced patient care through additional projects and capital development

Activities	Timescale	Description / Progress	Colleagues responsible	RAG Rating
Income Generation: Application to NHSCT Greener Communities fund	By end of Sept 2025	Application deadline: 8 September. Up to £25,000 for projects to increase green spaces or biodiversity on NHS sites. If project feasibility allows, bid to be developed in conjunction with Capital Development team, and Environmental & Sustainability Manager.	<ul style="list-style-type: none"> Head of Charity Capital Development / Estates 	
Income Generation: Developing Trusts and Foundations pipeline	By end of March 2026	Establishing links cross-directorate to be able to respond when appropriate to funding opportunities.	<ul style="list-style-type: none"> Head of Charity 	
Governance: Establish processes for agreeing the Charity's project prioritisation	Oct – Dec 2025	Establishing an agreed way to prioritise the Charity's future projects, and providing assurance on additionality to statutory services. This could potentially be based on existing prioritisation work in preparation of IMTP / LDPs	<ul style="list-style-type: none"> Head of Charity 	
Project Delivery: Review of existing restricted funds – Barmouth, Colwyn Bay, Holyhead, Aberystwyth, "treatment of heart attacks"	Jan 2026	Paper to January meeting of Charity Committee to outline existing restricted funds, update on progress, and present options for approval or endorsement	<ul style="list-style-type: none"> Head of Charity 	

Delivery Plan 2025 - 2027

Enablers: Income Generation

Activities	Timescale	Description / Progress	Colleagues responsible	RAG Rating
Challenge Events programme for 2026	Ongoing	To include London Marathon (two places), plus other races across Wales. 17 places CDF10K and Cardiff Half Marathon in 2025.	• Fundraising and Comms Officer	On track
Fundraising events programme	From start of Fundraising and Comms Officer	A minimum of three bespoke fundraising campaigns over the next 12 months, to include Outrun an Ambulance and NHS Big Tea	• Fundraising and Comms Officer	
Voluntary registration with Fundraising Regulator	By end of Aug 2025	Nominal fee of <£100 per year. Provides public assurance that a charity meets the standards in the Code of Fundraising Practice. <i>Included in Risk Register action plan: CHAR-003</i>	• Head of Charity	
Improved online giving functionality, review of third-party donation platforms	By end of Sep 2025	To include review of suitable online platforms for challenge fundraising, in-memory giving, donations via QR code, regular giving, and give-as-you-live.	• Fundraising and Comms Officer	
Approval of Fundraising Plan	By end of Oct 2025	To be approved by Charity Committee.	• Fundraising and Comms Officer	On track
In-memory fundraising / Legacy giving	Resources online by end of Oct 2025	Resources available online and distributed for information to funeral directors and solicitors.	• Fundraising and Comms Officer	
Approval of 2026/27 fundraising targets	By end of Jan 2026	Annual fundraising targets to be approved by Corporate Trustee in Q4 each year, with quarterly monitoring by Charity Committee.	• Head of Charity	
Exploring options for staff lottery and/or payroll giving	By end of March 2026	To include review of Pennies from Heaven	• Fundraising and Comms Officer	

Delivery Plan 2025 - 2027

Enablers: Governance and Policy

Activities	Timescale	Description / Progress	Colleagues responsible	RAG Rating
Review of Charity's Scheme of Delegation	By end of Aug 2025	To be reviewed to align with approved delegated authorities. <i>Included in Risk Register action plan: CHAR-005</i>	<ul style="list-style-type: none"> Head of Charity Finance colleagues Corporate Governance 	
Developing staff fundraising / volunteer fundraising SOPs	By end of December 2025	To be developed in conjunction with fundraising packs and supporter materials <i>Included in Risk Register action plan: CHAR-003</i>	<ul style="list-style-type: none"> Head of Charity 	
Board Development session	February 2026	Date booked as part of forthcoming Board Development Day. <i>Included in Risk Register action plan: CHAR-003</i>	<ul style="list-style-type: none"> Board Secretary / Head of Charity 	On track
Bids Panel and Bursary Panel – review of TOR and processes	Within 12 months	Bids Panel TOR approved by Charity Committee in April 2025	<ul style="list-style-type: none"> Head of Charity Chairs of Bids Panel / Bursary Panel 	
Charitable Funds Policy	By end of March 2026	<i>Included in Risk Register action plan: CHAR-003</i>	<ul style="list-style-type: none"> Head of Charity Policy Group TU Partners 	
Long-term assessment of sustainability of Charity Team roles	By end of October 2026	<i>Included in Risk Register action plan: CHAR-005</i>	<ul style="list-style-type: none"> Corporate Trustee 	
New reserves policy / Cash Handling SOP / review of existing Charitable Funds investment policy	tbc	To be reviewed alongside new Charitable Funds policy	<ul style="list-style-type: none"> Head of Charity Finance colleagues 	

Delivery Plan 2025 - 2027

Enablers: Communications and Impact

Activities	Timescale	Description / Progress	Colleagues responsible	RAG Rating
Internal communications programme	Ongoing	To include charity attendance at each CEO roadshow, programme of station visits, building network of Charity Champions	<ul style="list-style-type: none"> Fundraising and Comms Officer 	
Recruitment of Fundraising and Communications Officer	By end of Jun 2025	Conditional offer made in June. Projected Start Date: 7 July	<ul style="list-style-type: none"> Head of Charity 	On track
Opening new social media accounts for the Charity	By end of Aug 2025	To be led by new Fundraising and Communications Officer, in conjunction with Trust's communications team	<ul style="list-style-type: none"> Fundraising and Comms Officer 	
Creation of supporter fundraising materials	By end of Sep 2025	To produce fundraising pack and guidance for in-aid-of fundraisers	<ul style="list-style-type: none"> Fundraising and Comms Officer 	
Review of Charity Commission listing	By end of Oct 2025	Reviewing whether legal name should be changed to reflect university status, adding in official "working names", and reviewing activities description to ensure it reflects the charity's emerging strategic direction Approval by Corporate Trustee	<ul style="list-style-type: none"> Head of Charity Charity Committee Corporate Trustee 	
Expanding existing pages on Trust's website	By end of Nov 2025	To include case studies on expenditure, and further ways to donate and support	<ul style="list-style-type: none"> Fundraising and Comms Officer 	
Developing stronger "case-for-support" for fundraising	By end of Dec 2025	To include new Communications Plan for demonstrating impact of charitable activity.	<ul style="list-style-type: none"> Fundraising and Comms Officer 	
Assessing options for donor CRM platform / email comms / regular giving schemes	Research by end of Jun 2026	Research into both concurrently as significant requirements for integration between the two platforms	<ul style="list-style-type: none"> Head of Charity Fundraising and Comms Officer 	



Proposed Timetable: Items for Approval

Charity Committee Meeting	Corporate Trustee Meeting	Items for Approval	RAG Rating
Q3: 2 Oct 2025	<i>n/a</i>	Fundraising Plan	
Q3: 2 Oct 2025	27 Nov 2025	Recommendations of changes to Charity Commission listing	
Q4: 13 Jan 2026	<i>n/a</i>	Review of current restricted funds Charitable Funds policy Cash Handling SOP	
Q4: 13 Jan 2026	29 Jan 2026	Annual Report and Accounts – 2024-25 2026/27 fundraising targets and expenditure budget	

Theory of Change

Approved at Corporate Trustee, May 2025

**Trust's Strategic
Ambition**

Providing the right care or advice, in the right place, every time

Charity's Vision

Better health outcomes for patients across Wales, thanks to strategic investment of charitable funds

**Strategic
Objectives**

The Charity will help WAST to support the wellbeing and training of its staff and volunteers, resulting in a healthier, happier and more experienced workforce

The Charity will support WAST to build community resilience throughout Wales

The Charity will support WAST to provide enhanced patient care, through additional projects and/or capital investment, and through testing new models of delivery

Potential Projects

Strategic health and wellbeing projects

- Designed to improve staff wellbeing and morale – therefore improving patient care through lower staff attrition / sickness absence

Bursary Panel & Bids Panel

- Renewed focus on staff welfare and wellbeing, with projects initiated by front-line staff
- Simpler, clearer application process for staff

Volunteering

- Support for CFRs, CWRs, VCDs
- WISH Ambulance

Public Engagement and Awareness

- Save a Life Cymru
- Community Awareness, public CPR or first aid training

New time-limited projects

Potential focus on health inequalities

Contributions to capital investments

- eg
- Vehicles for alternative responders
- Lifting cushions for falls
- Defibrillators (if strategically placed)

AGENDA ITEM No	7
OPEN or CLOSED	OPEN
No of ANNEXES ATTACHED	0

Charity Performance Report

MEETING	Charity Committee
DATE	3 July 2025
EXECUTIVE	Estelle Hitchon, Director of Partnerships & Engagement
AUTHOR	David Hopkins, Head of Charity
CONTACT	David.Hopkins4@wales.nhs.uk

EXECUTIVE SUMMARY
<p>The purpose of this paper is:</p> <ol style="list-style-type: none"> 1. To present to the Charity Committee with an update on the Charity's three active NHSCT grants: <ul style="list-style-type: none"> • Development Grant • Stage 3 Recovery Grant • Ambulance Grant 2. To present an update on grant opportunities in 2025, including the NHSCT Community Resilience Fund 3. To provide other updates on the external charitable governance environment, for information only.

KEY ISSUES/IMPLICATIONS
<p>RECOMMENDATION: It is recommended that the Committee notes the contents of the report and notes the key risks and mitigations in place for the Charity's active NHSCT grants.</p>

REPORT APPROVAL ROUTE
Charity Committee – 3 July 2025

REPORT APPENDICES
None

REPORT CHECKLIST			
Confirm that the issues below have been considered and addressed		Confirm that the issues below have been considered and addressed	
EQIA (Inc. Welsh language)		Financial Implications	X
Environmental/Sustainability	X	Legal Implications	X
Estate	X	Patient Safety/Safeguarding	
Ethical Matters	X	Risks (Inc. Reputational)	X
Health Improvement		Socio Economic Duty	
Health and Safety		TU Partner Consultation	

WELSH AMBULANCE SERVICES UNIVERSITY NHS TRUST
CHARITY COMMITTEE
PERFORMANCE REPORT

DEVELOPMENT GRANT

Targets	To complete visual identity rebranding project	Complete	
	To spend grant by deadline (31 March)	Complete	

Key dates	End of project	16 December 2024
	Final report	16 January 2025
	Extended spending deadline	31 March 2025

Grant award	Total awarded	£29,981
	Spend to 31 March 2025	£30,007
	Remaining spend (overspend)	-£26

4. This project is now complete, and all reporting has been submitted and approved by NHS Charities Together. The grant is now closed. There was a small overspend of £26, which will be drawn from unrestricted funds.

5. Around half of the funds were allocated towards the costs of the Tarnside strategy consultancy, and the Savage and Gray visual identity design. The rest of the funds were spent between January and March 2025 on marketing assets, merchandise and the initial set-up costs of the Charity's challenge fundraising campaigns.

STAGE 3 RECOVERY GRANT

Key dates	Check-in call with NHSCT	Completed (5 June)
	End of project	15 December 2025
	Final report	15 January 2026

Grant award	Total awarded	£88,000
	Spend to 31 May 2025	£62,782
	Remaining spend	£25,218

6. Of the £25,218 still to be spent by December 2025:
 - £7,640 has been committed towards future planned expenditure
 - £10,838 was awarded in Round 2 of the Sports Fund, but has not yet been spent. Teams are given three months from the date of award to spend this

funding.

- A further £989 will be awarded in Round 3 of the Sports Fund, along with any underspends from funds awarded to local teams in Rounds 1 and 2.
- There is an additional underspend of £5,751. This was initially allocated towards the costs of a project administrator, but instead the projects have been managed within the Trust’s existing staff capacity. It is proposed that this underspend be spent on further Sports Fund bids in Round 3, and on additional CFR training kit if required.

7. The Stage 3 grant is split into three projects:

- Volunteer Development Programme
- Mind over Mountains
- WAST Sports

Volunteer Development Programme

Targets	Recruit 200 new CFR volunteers between Sept 2023 and Sept 2025	187 CFRs recruited (Sept 2023 – May 2024)	
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8. A new model of training for Community First Responders commenced in June, and so it is still anticipated that the target of 200 will be met.

9. All funds connected to this element of the project have been spent on providing Volunteer Training Kits, which have supported the volunteering team to deliver in-person training courses to new CFR volunteers.

10. This kit will be maintained to continue to support Volunteer Training for at least the next 3 years.

11. It is proposed that some of the underspend from the project could be spent on purchasing additional kit, and conversations are ongoing to assess what further equipment would be most appropriate. This has been agreed in principle by NHS Charities Together.

Mind over Mountains

Targets	To hold 8 walks over 2 years	6 held, 3 planned by end of Oct	
	To reach 60 staff* *This target, down from the original target of 144, has been agreed by NHSCT	24 in first 6 walks	

12. Since the last report, two walks have taken place:

- Llyn Padarn, Llanberis - Saturday 5 April
- Marcross, Nash Point, Vale of Glamorgan – Tuesday 3 June

13. There are three further walks that have been funded as part of this project between July and October. The walks have been planned to remain accessible to as many staff and volunteers as possible, with careful consideration of the location, walk grading and the time of the week.

14. Internal communications will be aimed at operational staff, through local posters across nearby sites, through announcements on Siren. and through specific links with individual staff to help disseminate locally.

Date	Location	Walk Grading
Sunday 27 July	Stackpole, Pembrokeshire	Easy
Sunday 28 September	North Wales (Route location TBC)	Moderate
Saturday 11 October	Pontneddfechan, Brecon Beacons	Moderate

15. The Head of Charity, as well as colleagues from OD who are leading the project, have held extensive discussions with both the Mind over Mountains delivery team, and NHS Charities Together, to explore how attendance figures could be increased.

Date	Location	Registrations	Attendances
16 March 2024	Brecon Beacons	8	2
4 May 2024	Llanberis	12	9
24 July 2024	Garreg Ddu, Elan Valley	7	4
16 Nov 2024	Sugar Loaf, Abergavenny	4	4
5 April 2025	Llyn Padarn, Llanberis	10	1
3 June 2025	Marcross at Nash Point, VOG	12	4
TOTAL		53	24

16. The number of people signing up in advance for each walk has increased over the past six months, due to improved internal communications. However, the number withdrawing before each walk remains substantial. The structure of the project

means that once a participant has registered to attend, so that they remain anonymous to WAST, the relationship is between the participant and the Mind over Mountains team. This makes it extremely hard for the OD team or the Charity to follow up with participants ahead of a walk. Discussions are taking place to ensure that participants are supported between registration and attendance, led by the Mind over Mountains team.

17. The project performance was discussed in detail with NHSCT at the 18-month check-in meeting in June. NHSCT remains supportive of the project, and they value the learning from the project as much as the number of beneficiaries. It has been agreed that a brief evaluation paper will be produced to summarise some of the challenges of the project, including some of the potential factors influencing the withdrawal rate between registration and attendance.
18. It has been agreed with NHSCT that the formal target remains at 60 participants (down from the original maximum capacity of 144), but the Head of Charity has been clear that it is extremely unlikely that the target will be met.
19. If the target had been amended, NHSCT argued that opportunities for learning could be missed, as it wouldn't highlight to NHSCT that the current model is not effective. Missing the target will not affect future funding decisions, so long as learning can be demonstrated from the project.
20. There are currently no proposals for the Charity to fund Mind over Mountains walks beyond the final planned date of the year (11 October 2025). However, it is proposed that learning from the project, and momentum from existing internal communications, be directed towards encouraging more peer support groups to form amongst colleagues across Wales.

Sports Funds

Targets	To award £20,700 to 10 groups	£19,711 awarded to 12 groups in Rounds 1 and 2	
	To reach 150-200 staff and volunteers	Data collection ongoing – est. 200-250 across 12 teams Confirmed data so far: 63 reached in 3 teams	

21. Since the last report, Bids Panel met to discuss applications submitted during Round 2. Eleven applications were received, with seven applications awarded funding totaling £10,838.
22. The seven successful grants in Round 2 will support:
- Gym equipment at Aberaeron Station, Cardiff MRD and the HART Base
 - Yoga classes at Ty Elwy and Cardiff MRD
 - A fly-fishing group in north Wales
 - A rounders team in the Swansea area
23. The Charity will open a third and final round of applications over the summer. This will aim to award the remainder of the funds allocated to the project (£989), as well as awarding funds released due to underspends in Rounds 1 and 2. All underspends from Rounds 1 and 2 will be released by 9 September, allowing the Charity to allocate funding accordingly.
24. If there are a number of strong bids, then it will also be possible to award funds from the project administrator underspend (up to £5,751).
25. There remains a small residual risk that there will not be enough appropriate applications to spend all allocated money by the project deadline. However, based on the quality of applications received in rounds 1 and 2, this is deemed to be unlikely.
26. As part of the conclusion of the project, the Charity will work with all successful applicants to establish more sustainable funding from other sources (such as member contributions or sponsorship), so that there remain no ongoing commitments to the Charity.

AMBULANCE GRANT

Targets	Recruit, onboard and train 400 new CWR volunteers by the end of the project	235 recruited to date 159 trained / responding to calls	
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Key dates	Check-in call with NHSCT	Completed (5 June)
	End of project (extended from 1 December 2025)	28 February 2026
	Final report	28 March 2026

Grant award	Total awarded	£315,290
	Spend to 31 May 2025	£219,115
	Remaining spend	£96,175

27. This grant has supported the recruitment of 4 Volunteer Support Officers, to deliver the Trust’s Community Welfare Responder initiative.
28. Since the last meeting, NHSCT has agreed to extend the project to 28 February 2026. This considers the fact that due to initial recruitment delays, the four staffing contracts do not end until January 2026.
29. A training plan has been put in place to provide assurance that the target of 400 CWRs by the end of the project remains achievable.

NHS CHARITIES TOGETHER – FUTURE GRANT OPPORTUNITIES

Community Resilience Fund – deadline 29 August 2025

30. This fund aims to support ambulance service charities with projects improving community resilience, particularly targeting areas facing healthcare inequalities. Cardiac arrest survival rates have been cited as a major priority for the fund. Each NHSCT member ambulance charity has been allocated £142,000 (£129,091 for service delivery) from the initial £1.85m NHSCT fund, raised through their partnership with Omaze.
31. Applications for this grant will remain open until 29 August 2025. Projects must last no longer than 3 years from date of grant awarded or 31 March 2028 whichever is sooner.
32. Following conversations with colleagues in the Clinical Directorate, and in the Volunteer Service, it is currently proposed that this funding be used towards employing specific staffing roles on fixed-term contracts that could contribute towards improving ROSC rates (Return of Spontaneous Circulation).
33. After the budget has been agreed with individual Executive Leads, a full application will be submitted for approval at ELT, and will be submitted before the 29 August deadline.

Greener Communities Fund – applications open 14 July – 8 September

34. This fund will reopen in July to support projects that create and improve green spaces across the UK to benefit the health and wellbeing of NHS patients, staff and local communities. The Charity is eligible to apply for a grant of between £10,000 and £25,000. The total funds available are £200,000, and awards will be made on a competitive basis.

35. The Head of Charity has begun conversations with colleagues in Capital Development, to explore how this grant could enable the Trust to incorporate additional green spaces and biodiversity projects within existing planned capital projects. This would be in line with the Trust's commitments within its Decarbonisation Action Plan. Further work is needed to identify a potential location and to develop an application for approval at ELT.

Innovation Challenge – not applied

36. This fund's priorities were to support children and young people with mental health problems, particularly those experiencing healthcare inequalities, and supporting them to "wait well" whilst on the waiting list for CAMHS.

37. One of the barriers to submitting an Expression of Interest was the requirement that the Trust should have an existing project that could be scaled up, or a detailed Theory of Change that demonstrated an idea for testing. After consulting with relevant colleagues, it was determined that this was not the case, and so an Expression of Interest was not submitted.

Workplace Wellbeing – due to open in Wales during 2025

38. NHSCT are currently in discussions with Welsh Government about developing a set of criteria for this fund, as this fund has been developed with each devolved nation separately. There is currently no timeline for when this fund might launch in Wales. The NHS Wales Charities group has urged NHSCT on numerous occasions to ensure that charities are kept up to date with progress on this fund.

39. The range of funding for the England-only round is between £10,000 and £250,000 per project, however there is no guarantee that this will be the same for funding rounds in the devolved nations.

FURTHER UPDATES ON CHARITY GOVERNANCE

Fundraising Regulator and the Code of Fundraising Practice

40. The Fundraising Regulator is the independent regulator of charitable fundraising in England, Wales and Northern Ireland. All charities who spend more than £100,000 per annum on their fundraising costs are invited to contribute through a Fundraising Levy.

41. Charities below this threshold may also join the Fundraising Regulator, to demonstrate their commitment to fundraising standards. It is proposed that the Charity voluntarily registers to show this commitment to donors and stakeholders.

42. By registering with the Fundraising Regulator, all member charities agree to uphold the Code of Fundraising Practice. This code, first published in October

2019, has been recently updated with changes taking effect on 1 November. The Charity Team are currently reviewing the changes to the code to ensure continued compliance.

NHS Wales Charities working group

43. There are nine charities representing health boards and trusts in Wales – one for each of the seven local health boards, Velindre Cancer Charity, and the Welsh Ambulance Service Charity.
44. All nine are currently members of NHS Charities Together, but all have expressed an interest in exploring further ways to come together for mutual benefit, whilst retaining each charity's individual identity.
45. A working group has been formed to explore how NHS Charities in Wales could collaborate, such as by:
 - Establishing a formal Steering Group to coordinate joint activity amongst all NHS Wales charities, and to drive progress against key objectives
 - Sharing best practice and training resources in fundraising, project delivery, charity governance and compliance
 - Establishing joint fundraising campaigns that could reach a wider audience than might be achievable through each individual charity
 - Coordinating communications and advocacy work on behalf of the wider NHS charity sector in Wales
46. In one current example of this work, NHS Wales Charities are proposing to draft [an explainer guide](#) with the Welsh NHS Confederation, that would explain the purpose and structure of NHS charities in a concise way to key stakeholders ahead of the 2026 Senedd Cymru elections. This work is being led by WAST's Head of Charity on behalf of the nine NHS Wales charities.
47. The Head of Charity continues to be an active member of this working group and will report back on future developments to the Charity Committee.

RECOMMENDATION: It is recommended that the Committee notes the contents of the report and notes the key risks and mitigations in place for the Charity's active NHSCT grants.

AGENDA ITEM No	8
OPEN or CLOSED	OPEN
No of ANNEXES ATTACHED	0

Charity Funds Finance Update

MEETING	Charity Committee
DATE	3 rd July 2025
EXECUTIVE	Chris Turley, Executive Director of Finance & Corporate Resources
AUTHOR	Jessica Price, Head of Financial Accounting Bernadette Mitchell, Finance Assistant – Charitable Funds
CONTACT	Chris Turley, 01633 626201, Chris.Turley2@wales.nhs.uk

EXECUTIVE SUMMARY

1. To present to the Charity Committee an update on the following:
 - Summary of accounts for financial year 2024-25
 - Summary of Income & Expenditure for April 2025 – May 2025
 - Summary of Budget vs Actuals YTD (Apr-May 2025)
 - Details of fund balances held as of 31st May 2025
 - COIF Charity Investment Fund

KEY ISSUES/IMPLICATIONS

2. To present to the Charity Committee an update on the following
 - **Summary** of accounts for financial year 2024-25 (subject to IE)
 - **Summary** of Income & Expenditure and variances to budget
 - **Detail of Fund balances** of £731k held as of 31st May 2025
 - **Update on COIF Charity Investment Fund** current percentage is 39%

REPORT APPROVAL ROUTE

Charity Committee – 3rd July 2025

REPORT APPENDICES
NA

REPORT CHECKLIST			
Confirm that the issues below have been considered and addressed		Confirm that the issues below have been considered and addressed	
EQIA (Inc. Welsh language)	NA	Financial Implications	YES
Environmental/Sustainability	NA	Legal Implications	YES
Estate	NA	Patient Safety/Safeguarding	NA
Ethical Matters	NA	Risks (Inc. Reputational)	YES
Health Improvement	NA	Socio Economic Duty	NA
Health and Safety	NA	TU Partner Consultation	NA

WELSH AMBULANCE SERVICES UNIVERSITY NHS TRUST
CHARITY COMMITTEE
FINANCE UPDATE – MAY 2025

INTRODUCTION

3. This report provides the Committee with an update on fund balances held, along with an update on the COIF Charity Investment Fund Accumulation Units held by the charity, including a valuation as of 31st May 2025.
4. Included below is a summary of income and expenditure for April 2024 to March 2025 which is subject to an Independent Examination (IE) from Audit Wales later in the year, along with April 2025 to May 2025 of the current financial year.

BACKGROUND/ASSESSMENT

Summary of accounts for April 2024 - March 2025

5. Below is a summary of accounts for financial year 2024-25 (subject to IE).

	Unrestricted £	Restricted £	Endowment	Total £
Income:				
Donations & Legacies	44,231	0	0	44,231
Charitable Activities	0	0	0	0
Investment Income	22,607	0	0	22,607
TOTAL INCOME	66,838	0	0	66,838
Expenditure:				
Raising Funds	744	15,209	0	15,953
Charitable activities	68,155	162,409	0	230,564
TOTAL EXPENDITURE	68,899	177,618	0	246,517
Gains/(Losses)	(5,567)			(5,567)
Transfers				
NET MOVEMENT	(7,628)	(177,618)	0	(185,246)
Balance b/f 01.04.24	402,726	544,160	0	946,886
Balance c/f 31.03.25	395,098	366,542	0	761,640

6. Below is a summary of the income and expenditure for the period between 1st April to 31st May 2025.

Summary of income and expenditure for 1st April 2025 to 31st May 2025

	Unrestricted £	Designated £	Restricted £	Total £
Income:				
Donations	2,544	30	0	2,574
Legacies	0	0	0	0
Grant income	0	0	0	0
Interest Rec'd	0	3,225	0	3,225
TOTAL INCOME	2,574	3,225	0	5,799
Expenditure:				
Raising Funds	0	0	0	0
Charitable activities	4,414	(2,165)	0	2,249
Grant expenditure	0	0	24,257	24,257
Admin / Support	2,097	8,256	0	10,353
TOTAL EXPENDITURE	6,511	6,091	24,257	36,859
Gains/(Losses)				
Transfers				
NET MOVEMENT	(3,937)	(2,866)	(24,257)	(31,060)

7. Below is a summary of the income & expenditure compared to the budgets as approved by the Board of Trustees on 29th May 2025 for the period between 1st April 2025 to 31st May 2025.
- Please note, the budgets have been profiled based on when income & expenditure is likely to be incurred, for example, Grant income is not likely to be received until October/November.

	Annual Budget £	Budget Profiled £	Actual Apr-May25 £	Variance £	Comment
Income:					
Donations	43,813	7,302	2,574	(4,728)	Majority of fundraising/events are planned to take place from Q2 onwards.
Legacies	10,000	1,667	0	(1,667)	Included as a guide only as income received from Legacies is unpredictable.
Grant income	202,000	0	0	0	Grant income not expected until Oct/Nov 25 due to timing of applications.
Interest Rec'd	15,000	2,500	3,225	725	
TOTAL INCOME	270,813	11,469	5,799	(5,670)	
Expenditure:					
Raising Funds	37,514	1,833	0	1,833	No costs incurred to date re fundraising
Charitable activities	132,000	22,000	2,249	19,751	One bids panel meeting has taken place so far during 25/26. No expenditure incurred on legacy restricted funds to date.
Grant expenditure	241,704	27,706	24,257	3,449	Annual budget is based on expected carry forward at time of budget approval.
Admin / Support	68,918	11,486	10,353	1,133	2025-26 pay increment will not be processed until later in the year. Once processed by payroll the underspend will fall back in line with budget.
TOTAL EXPENDITURE	480,136	63,025	36,859	26,166	
NET MOVEMENT	(209,323)	(51,556)	(31,060)	20,496	

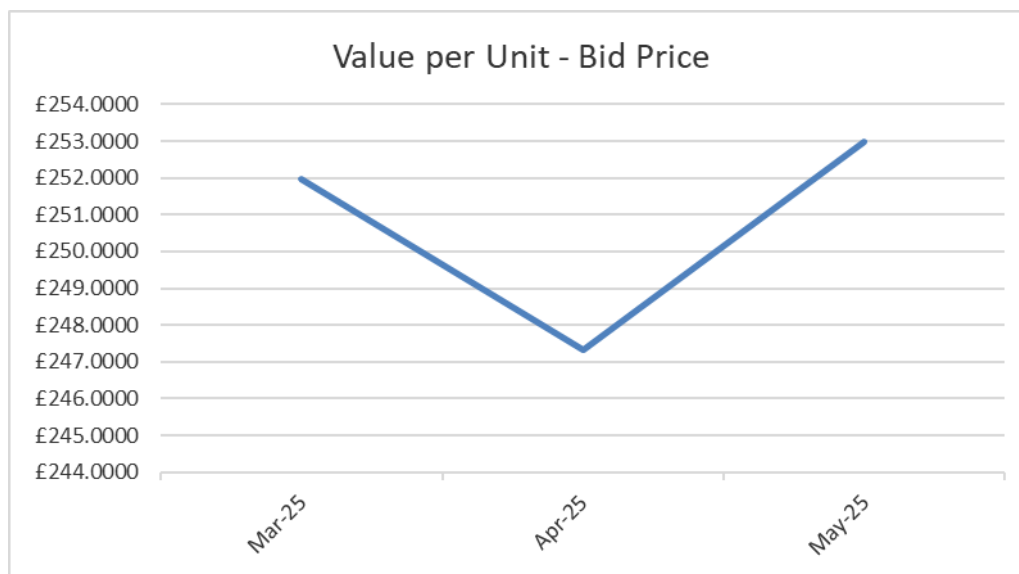
Update on Fund Balances as of 31st May 2025

8. The table on the following page is a detailed balance sheet as of 31st May 2025:

WAST Charity Balance Sheet as at 31st May 2025							
			UNRESTRICTED	DESIGNATED	RESTRICTED	TOTAL	
ASSETS	INVESTMENTS	COIF Investment Fund	£221,204	£53,468	£0	£274,672	
	CASH & BANK	COIF Deposit	£0	£145,152	£240,730	£385,882	
		PayPal	£0	£0	£30	£30	
		HIB Account	£0	£0	£53,610	£53,610	
		Current Account	£0	£0	£1,000	£1,000	
	DEBTORS	Accrued Income	£0	£0	£86,514	£86,514	
		Recoverable Tax - Gift Aid	£0	£0	£0	£0	
		Prepayments	£2,507	£0	£0	£2,507	
TOTAL ASSETS:			£223,711	£198,619	£381,884	£804,215	
LIABILITIES	CREDITORS	Trade Creditors	£3,725	£8,079	£33,579	£45,383	
		Deferred Income	£0	£0	£0	£0	
		Accruals	£9,557	£12,674	£6,021	£28,252	
				£13,282	£20,752	£39,600	£73,634
TOTAL ASSETS LESS LIABILITIES:			£210,429	£177,867	£342,284	£730,580	
FUNDS & RESERVES			UNRESTRICTED	DESIGNATED	RESTRICTED	TOTAL	
	AMBU	NORTH FUNDS	£64,137			£64,199	
	AIRA		£61				
	GPCW	CENTRAL & WEST	£23,896			£24,375	
	TENP		£480				
	GPSE	SOUTHEAST	£3,757			£5,499	
	BARY		£1,392				
	CBLT		£350				
	GPHQ	NATIONAL	£44,670			£44,670	
	BYFR	CFR's		£578		£5,824	
	CWFR			£1			
	RESP			£5,246			
	WISH	WISH		£5,690		£5,690	
	BURS	BURSARY		£11,295		£11,295	
	CENT	CENTRAL SERVICES		£155,058		£155,058	
	EMSA	EMS AMBULANCE			£137	£137	
	HHPB	HOLYHEAD PATIENT BENEFIT			£5,000	£5,000	
	HRTV	HEART ATTACK VICTIMS			£13,336	£13,336	
	AMBF	BARMOUTH AMBULANCE EQUIPMENT			£53,533	£53,533	
	CBAY	COLWYN BAY STATION			£148,886	£148,886	
	NHS2	NHSCT DEVELOPMENT GRANT			£0	£0	
	NHS3	NHSCT STAGE 3			£25,218	£25,218	
	NHS4	NHSCT AMBULANCE GRANT			£96,175	£96,175	
	ADMI	2025-26 CENTRAL COSTS APPORTIONED	-£2,097			-£2,097	
	REVL	COIF INVESTMENT REVALUATION RESERVE	£73,783			£73,783	
	TOTAL FUNDS & RESERVES:			£210,429	£177,867	£342,284	£730,580
	TOTAL LIABILITIES & FUNDS & RESERVES			£223,711	£198,619	£381,884	£804,215

Update on COIF Investment Fund as of 31st May 2025

9. Between 1st April 2025 to 31st May 2025, the unit price of the Charity's investments has increased by 0.45%, resulting in an overall small gain of c£1.1k. We currently hold 1,090.14 units at a unit price of £252.9766, giving a total market value of £275.8k.



10. As noted in previous Charity Committee meetings, we have further enhanced our scrutiny of these longer-term investments. During the recent period of market volatility, we had increased our scrutiny further from monitoring weekly to monitoring daily to allow us to react if needed. During this period, there had been a number of losses and gains, however, none of the losses resulted in our overall total equity falling below £48.8k. As the market has now somewhat stabilised, we have returned to weekly monitoring of the market value and the frequency with which the fund is updated.

RECOMMENDATIONS

9. That the committee:
- **Notes** the contents of this finance report.

AGENDA ITEM No	9
OPEN or CLOSED	Open
No of ANNEXES ATTACHED	5

RISK MANAGEMENT REPORT

MEETING	Charity Committee
DATE	03 July 2025
EXECUTIVE	Trish Mills, Director of Corporate Governance/Board Secretary
AUTHOR	Julie Boalch, Assistant Director of Corporate Governance & Risk
CONTACT	Julie.Boalch@wales.nhs.uk

EXECUTIVE SUMMARY

1. The purpose of the report is to provide an update to Members on the work undertaken to date to develop a Charity Risk Register and associated risks aligned to the Charity Committee.
2. These risks, which are described in Annex 1 of the report in the risk summary, were subject to a detailed review, discussion and challenge by the Executive Leadership Team (ELT) ahead of Committee.
3. The ELT recommended the inclusion of two new Charity risks on the Charity Risk Register (CHRR) which is detailed at Annex 2. These are **CHAR-003** *Lack of compliance with legal and regulatory framework* and **CHAR-005** *Lack of internal processes and governance structures in place to meet the conditions of grants* both of which are before members today for approval.
4. **CHAR-001** *Lack of resource and capacity to manage the Charity* is proposed for closure from the CHRR noting that the risk has been mitigated, and the residual risk has been transferred to **CHAR-008** which is in development and will be presented at the next meeting in October 2025.
5. The risk assessment forms are attached to this report at Annexes 3-5 and provide a detailed description of the risks including controls, assurances, gaps and mitigating actions that will, or have, reduced the risk to target.
6. For assurance and completeness in reporting of risk activity on the register, Members are advised that:
 - a) **CHAR-004** has been closed from the register and amalgamated into **CHAR-005**.
 - b) **CHAR-006** is a Trust risk and not a Charity risk and therefore has been removed from the register.
 - c) **CHAR-007** was previously reported to Committee and has been closed from the register.

RECOMMENDATION:

7. Members are asked to consider and discuss the contents of the report and:
- a) Receive the new Charity Risk Register.
 - b) Approve the inclusion of CHAR-003 and CHAR-005 on the register.
 - c) Approve the closure of CHAR-001 noting that the risk has been mitigated, and the residual risk has been included in CHAR-008.

KEY ISSUES/IMPLICATIONS

The key issues and implications are set out in the Executive Summary above.

REPORT APPROVAL ROUTE

Each of the Charity Risks have been considered on 09 June 2025 by the Executive Leadership Team, acting as the Charity Executive Risk Group, in the absence of any other formal mechanism to consider and approve Charity Risks ahead of presentation at Charity Committee.

REPORT ANNEXES

- Annex 1 – Summary table describing the Charity Risks
- Annex 2 - Charity Risk Register
- Annex 3 – CHAR-001 Risk Assessment Form
- Annex 4 – CHAR-003 Risk Assessment Form
- Annex 5 – CHAR-005 Risk Assessment Form

REPORT CHECKLIST

Confirm that the issues below have been considered and addressed		Confirm that the issues below have been considered and addressed	
EQIA (Inc. Welsh language)	NA	Financial Implications	NA
Environmental/Sustainability	NA	Legal Implications	NA
Estate	NA	Patient Safety/Safeguarding	NA
Ethical Matters	NA	Risks (Inc. Reputational)	NA
Health Improvement	NA	Socio Economic Duty	NA
Health and Safety	NA	TU Partner Consultation	NA

Annex 1 – Charity Risk Register Summary

CORPORATE RISK REGISTER

RISK ID	NEW RISK TITLE	NEW SUMMARY DESCRIPTION	EXECUTIVE OWNER	RISK SCORE
CHAR-001 Closed	Lack of resource and capacity to manage the Charity	<p>IF the Trust fails to recruit a Charity Manager and other necessary staff</p> <p>THEN the Charity will fail to meet its objectives</p> <p>RESULTING IN financial management difficulties and loss of reputation</p>	Director of Partnerships & Engagement	<p>4 (1x4)</p> <p>↓</p> <p>12 (3x4)</p>
CHAR-003	Lack of compliance with legal and regulatory framework	<p>IF the Trust's Charity lacks robust awareness and active monitoring of the current legislation and regulations</p> <p>THEN it is at risk of non-compliance with legal and statutory obligations</p> <p>RESULTING IN potential enforcement action including financial penalties, reputational damage and possible restrictions on charitable activities</p>	Director of Partnerships & Engagement	10 (2x5)
CHAR-005	Lack of internal processes and governance structures in place to meet the conditions of grants	<p>IF robust governance arrangements are not in place for the oversight of charity grants including due diligence, monitoring of spend and accurate reporting</p> <p>THEN there is potential for the conditions of the grant to be breached</p> <p>RESULTING IN damage to the Charity's reputation, potential for grants to be reclaimed and an inability to secure grants in the future.</p>	Director of Partnerships & Engagement	<p>6 (2x3)</p> <p>↓</p> <p>12 (4x3)</p>

RISK ID	Details	Title	Summary Description	Risk Status/Level	Executive Owner	Current Risk Score	Target Score	Notes
CHAR-001	Resource and capacity to manage the Charity	Lack of resource and capacity to manage the Charity	<p>IF the Trust fails to recruit a Charity Manager and other necessary staff</p> <p>THEN the Charity will fail to meet its objectives</p> <p>RESULTING IN financial management difficulties and loss of reputation</p>	Closed		<p>12 (3x4)</p> <p>↓</p> <p>4 (1x4)</p>	4 1x4	<p>This is approved for closure by the ELT 11/06/2025</p> <p>The risk is mitigated with the appointment of a Head of Charity.</p> <p>A new risk on resources has been developed and residual risk will transfer to CHAR-008</p>
CHAR-002	Corporate Trustee – skills, roles and responsibilities and training	Lack of training amongst the Corporate Trustee	<p>IF the role of the Corporate Trustee is not defined and understood</p> <p>THEN there is potential for failure of it to fulfil its control functions</p> <p>RESULTING IN potential for the Corporate Trustee failing to fulfil its legal and regulatory obligations</p>	Draft				<p>This risk is in draft and not yet signed off by the Charity ELT.</p> <p>This will be presented at the next Committee.</p>
CHAR-003	Compliance with legal and regulatory framework	Lack of compliance with legal and regulatory framework	<p>IF the Trust's Charity lacks robust awareness and active monitoring of the current legislation and regulations</p> <p>THEN it is at risk of non-compliance with legal and statutory obligations</p> <p>RESULTING IN potential enforcement action including financial penalties, reputational damage and possible restrictions on charitable activities</p>	Approved		10 (2x5)	5 1x5	<p>This risk is approved for inclusion on the Charity Risk Register</p>
CHAR-004	Grants – administration, meeting conditions and evidence	Lack of necessary administration, meeting conditions and providing evidence for the grants received	<p>IF the Charity fails to properly administer and meet the conditions of the grants received</p> <p>THEN there is a potential to not be compliant with the donors imposed restrictions and supplying evidence</p> <p>RESULTING IN negative impact on future funding, potential for claw back of funding, regulatory action and loss of reputation.</p>	Closed		6 (2x3)		<p>This risks has been amalgamated into Risk CHAR-005 and therefore will be removed from the Charity Risk Register</p>
CHAR-005	Governance and management of funds	Lack of internal processes and governance structures in place to meet the conditions of grants	<p>IF robust governance arrangements are not in place for the oversight of charity grants including due diligence, monitoring of spend and accurate reporting.</p> <p>THEN there is potential for the conditions of the grant to be breached</p> <p>RESULTING IN damage to the Charity's reputation, potential for grants to be reclaimed and an inability to secure grants in the future.</p>	Approved	Director of Partnerships and Engagement	6 (2x3)	3 1x3	<p>This risk is approved for inclusion on the Charity Risk Register</p>

CHAR-006	Volunteer Risk	Lack of sufficient governance, guidance, and assurance in relation to volunteer fundraising	<p>IF there fails to be sufficient governance and assurance in place in respect of volunteer funds and fundraising activities including collection, banking, spend, reporting and monitoring</p> <p>THEN there is potential for the funds to be raised unethically and inappropriately handled</p> <p>RESULTING IN damage to the Trust's and Charity's reputation, a lack of corporate oversight of the brand and an inability to provide assurance that volunteers are complying with statutory duties.</p>	<i>Corporate</i>	TBC			This is a Trust risk rather than a Charity risk and therefore will be removed from the Charity Risk Register
CHAR-007	Late filing of Charity Annual Accounts submission – Reputational Risk	Reputational damage of the Trust's Charity and Trustees due to the late filing of the Annual Return	<p>IF the Trust fails to submit its annual return and the Charity Accounts receive a qualified opinion from Audit Wales</p> <p>THEN the public register of charities will show that the Trust's annual return has been filed late</p> <p>RESULTING IN the Charity potentially being unable to attract funds because of perceived deficiencies in the Charity's reporting mechanisms</p>	<i>Closed</i>	Director of Finance & Corporate Resources	6 (2x3)		This risk was worked up in April 2024; presented to Charity Committee and now closed from the CHRR
CHAR-008	Failure to meet financial targets	Failure to meet financial targets	<p>IF the Charity fails to meet its financial targets</p> <p>THEN the Charity will be unable to sustain core staffing levels or fund key charitable projects</p> <p>RESULTING IN reduced support for NHS staff and patients, reduced staffing capacity for the Charity's governance, and a potential decline in the Charity's overall impact and credibility</p>	<i>Draft</i>	Director of Partnerships and Engagement			This risk is in draft and not yet signed off by the Charity ELT. This will be presented at the next Committee.

Reference	Exec Owner/ Directorate	BAF / Strategic	Title	Date of Initial Assessment	Rating with existing control measures							Commentary
					Likelihood x Consequences							
					Controls Assurance Rating	Q4 23/24	Q1 24/25	Q2 24/25	Q3 24/25	Q4 24/25	Target Rating	
CHAR-001	Director of Partnerships and Engagement		Lack of resource and capacity to manage the Charity	Risk Reviews	I E						4 1x4	<p>IF the Trust fails to recruit a Charity Manager and other necessary staff</p> <p>THEN the Charity will fail to meet its objectives</p> <p>RESULTING IN financial management difficulties and loss of reputation</p> <p><i>Risk has achieved target score and proposed for closure. Residual risk will transfer to CHAR-008</i></p>

Detailed Risk Assessment –

1. Risk ID	2. BAF & Strategic Aim	3. Risk Owner (Executive)	4. Source	5. Date of initial entry or Date first identified	6. Date of last review	7. Local Delivery Plan (LDP) Key Deliverable	8. Health & Care Standards and CM*/ NEPTS**Step or Core Requirement (CR)	9. Assuring Board Committee & Responsible Group
					Risk Reviews			
10. Risk Title								
Lack of resource and capacity to manage the Charity								
11. Risk Description – Cause & effect						12. Inherent risk rating (No controls in place)		
IF the Trust fails to recruit Charity Manager and other necessary personnel, THEN the Charity will fail to meet its objectives RESULTING IN financial management difficulties and loss of reputation								
						Likelihood	Consequences	Score
						4	4	16
13. Current Controls						14. Gaps in Controls		
<ol style="list-style-type: none"> Head of Charity appointed, taking up post in October 2024 Recruitment in progress for Fundraising and Communications Officer 						<ol style="list-style-type: none"> Head of Charity contract is fixed-term until October 2026 – substantive post is contingent on building a sustainable financial position through fundraising and income generation Head of Charity role encompasses governance, charity management and project delivery as well as fundraising – without dedicated fundraising role, risk of not meeting income targets is greater Without a Head of Charity, governance and management roles would need to be carried out by the Trust, placing further pressures on staff 		

	2/ Initial funding for Fundraising and Communications Officer limited to two years. 2/ Charity may fail to recruit a suitable candidate, leading to further delays in fundraising activity.			
15. Assurance on current controls (Internal (I) & External (E))	16. Gaps in Assurance Internal (I) & External (E)			
1. Head of Charity is currently in post. Funding has been approved by Corporate Trustee for two years. Work is scrutinised by Charity Committee and Corporate Trustee. 2. Funding for Fundraising and Communications Officer has been approved by Corporate Trustee for two years at AfC Band 6	1/ Roles are limited to two years and can only be sustained if the Charity is able to demonstrate increased fundraising income. 2/ Roles are limited to two years and can only be sustained if the Charity is able to demonstrate increased fundraising income. 2/ Charity may fail to recruit a suitable candidate, leading to further delays in fundraising activity.			
17. Level of Assurances on current controls (Internal (I) & External (E))	18. Current risk rating (With current controls in place & gaps in controls)			
Moderate controls in place in order to meet the Charity's objectives, however substantive funding needs to be identified in order to ensure the Charity's long-term objectives can be met.	Likelihood	Consequences	Score	
	1	4	4	
<i>This will be addressed in a new risk CHAR-008 Failure to Meet Fundraising Targets</i>				
19. Rationale for Current Risk Score	Head of Charity has been successfully recruited, however, residual risk of failing to recruit a Fundraising and Communications Officer; plus, funding for substantive posts is contingent on building a sustainable financial model for the Charity in a short space of time. <i>Risk has achieved target score and proposed for closure. Residual risk will transfer to CHAR-008</i>			
20. Risk proximity: Current/ 0-3 months/3-12 months/12 months+ When is the risk likely to materialise?	Current			
21. Further actions to reduce risk score or address gaps in controls / assurances	22. Action Owner	23. Proposed Implementation Dates/	24. Notes	25. Predicted risk reduction score
1. Appointment of a Head of Charity	DoP&E	July 2024	Complete	

2. Approval of Fundraising and Communications Officer post at Job Evaluation panel	Head of Charity	By end of March 2025	Complete			
3. Recruitment of Fundraising and Communications Officer, with targeted recruitment campaign including sector-specific job adverts	Head of Charity	By end of June 2025	Appointment due June 2025			
4. Financial plans approved for 2025-26 and 2026-27 by Charity Committee and Corporate Trustee	Head of Charity Executive Director of Finance and Corporate Resources	By end of May 2025 (2025-26) By end of March 2026 (2026-27)	May 2025 Complete			
5. Fundraising Plan to be approved to meet financial targets	Head of Charity / Fundraising and Communications Officer	By end of August 2025	Transfer to CHAR-008	Risk mitigated to target and closed.		
26. Target risk rating			27. Is this within risk appetite?	28. Target date to achieve risk rating	29. Shift in position? (↑ ↔ ↓)	30. Next review date
Likelihood	Consequence	Score	Yes / No <i>Currently no risk appetite statement. Please refer to risk scoring matrix to determine whether risk within tolerable limits.</i>		Current Risk Rating: 12	
1	4	4	Board/ ELT consideration		Target Risk Rating: 4	
31. Rationale for Target Risk Score						
32. Linked Risks						
Details						

Controls Assurance Assessment

Level of Control	Definition	Examples (Not exhaustive)
Weak	Assurances indicates poor effectiveness of controls.	<ul style="list-style-type: none"> • No active controls in place • No assurance process in place • Approved policy/procedure in place but no/minimal evidence of implementation • Compliance with Trust/National targets <50% • Internal audit opinion – Unsatisfactory / limited.
Moderate	Some assurances in place, but controls are still maturing so effectiveness cannot be fully assured currently.	<ul style="list-style-type: none"> • Evidence (Clinical / local audits) available of partial implementation of policy/procedure but not Trust-wide • Compliance with Trust/National targets at 50%-74% • Internal audit opinion - moderate assurances.
Strong	Substantial assurance provided over the effectiveness of controls.	<ul style="list-style-type: none"> • Evidence of implementation Health Board / Trust wide • Compliance with Trust/National targets >75% • Internal audit opinion – substantial assurance • External assurance / external audit / inspection / accreditation /evaluation assessment rated as substantial

Risk Scoring Matrix

Consequence:	1 Negligible	2 Minor	3 Moderate	4 Major	5 Catastrophic
Safety & Well-being - Patients/ Staff/Public	Minimal injury requiring no/minimal intervention or treatment. No time off work. Physical injury to self/others that requires no treatment or first aid. Minimum psychological impact requiring no support. Low vulnerability to abuse or exploitation - needs no intervention. Category 1 pressure ulcer.	Minor injury or illness, requiring minor intervention. Requires time off work for >3 days Increased hospital stay 1-3 days. Slight physical injury to self/others that may require first aid. Emotional distress requiring minimal intervention. Increased vulnerability to abuse or exploitation, low level intervention. Category 2 pressure ulcer.	Moderate injury/professional intervention. Requires time off work 4-14 days. Increased hospital stay 4-15 days. RIDDOR/Agency reportable incident. Impacts on a small number of patients. Physical injury to self/others requiring medical treatment. Psychological distress requiring formal intervention by MH professionals. Vulnerability to abuse or exploitation requiring increased intervention. Category 3 pressure ulcer.	Major injury leading to long-term disability. Requires time off work >14 days. Increased hospital stay >15 days. RIDDOR Reportable. Regulation 4 Specified Injuries to Workers. Patient mismanagement, long-term effects. Significant physical harm to self or others. Significant psychological distress needing specialist intervention. Vulnerability to abuse or exploitation requiring high levels of intervention. Category 4 pressure ulcer.	Incident leading to death. RIDDOR Reportable. Multiple permanent injuries or irreversible health effects. An event which impacts on a large number of patients.
Quality/ Complaints/ Assurance/ Patient Outcomes	Peripheral element of treatment or service suboptimal. Informal complaint/inquiry.	Overall treatment/service suboptimal. Formal complaint (Stage 1). Local resolution. Single failure of internal standards. Minor implications for patient safety. Reduced performance.	Treatment/service has significantly reduced effectiveness. Formal complaint (Stage 2). Escalation. Local resolution (poss. independent review). Repeated failure of internal standards. Major patient safety implications.	Non-compliance with national standards with significant risk to patients. Multiple complaints/independent review. Low achievement of performance/delivery requirements. Critical report.	Totally unacceptable level or quality of treatment/service. Gross failure of patient safety. Inquest/ombudsman/inquiry. Gross failure to meet national standards/requirements.
Workforce/ Organisational Development/ Staffing/ Competence	Short-term low staffing level that temporarily reduces service quality (< 1 day).	Low staffing level that reduces the service quality.	Late delivery of key objective/service due to lack of staff. Unsafe staffing level (>1 day)/competence. Low staff morale. Poor staff attendance for mandatory/key professional training.	Uncertain delivery of key objective/ service due to lack/loss of staff. Unsafe staffing level (>5 days)/competence. Very low staff morale. Significant numbers of staff not attending mandatory/key professional training.	Non-delivery of key objective/service due to loss of several key staff. Ongoing unsafe staffing levels or competence/skill mix. No staff attending mandatory/professional training.
Statutory Duty, Regulation, Mandatory Requirements	No or minimal impact or breach of guidance/statutory duty.	Breach of statutory legislation. Reduced performance levels if unresolved.	Single breach in statutory duty. Challenging external recommendations/improvement notice.	Enforcement action. Multiple breaches in statutory duty. Improvement notices. Low achievement of performance/ delivery requirements. Critical report.	Multiple breaches in statutory duty. Zero performance rating. Prosecution. Severely critical report. Total system change needed.

Adverse Publicity or Reputation	Rumours. Low level negative social media. Potential for public concern.	Local media coverage - short-term reduction in public confidence/trust. Short-term negative social media. Public expectations not met.	Local media coverage - long-term reduction in public confidence & trust. Prolonged negative social media. Reported in local media.	National media coverage <3 days, service well below reasonable public expectation. Prolonged negative social media, reported in national media, long-term reduction in public confidence & trust. Increased scrutiny: inspectorates, regulatory bodies and WG.	National/social media coverage >3 days, service well below reasonable public expectation. Extensive, prolonged social media. MP/MS questions in House/Senedd. Total loss of public confidence/trust. Escalation of scrutiny status by WG.
Business Objectives or Projects	Insignificant cost increase/ schedule slippage.	<5 per cent over project budget. Schedule slippage.	5–10 per cent over project budget. Schedule slippage.	Non-compliance with national targets. 10-25 per cent over project budget. Schedule slippage. Key objectives not met.	>25 per cent over project budget. Schedule slippage. Key objectives not met.
Financial Stability & Impact of Litigation	Small loss. Risk of claim remote.	Loss of 0.1–0.25% of budget Claim less than £10,000.	Loss of 0.25–0.5% of budget. Claim(s) between £10,000 and £100,000.	Uncertain delivery of key objective. Loss of 0.5-1.0% of budget. Claim(s) between £100,000 and £1 million. Purchasers failing to pay on time.	Non-delivery of key objective. Loss of >1 per cent of budget. Failure to meet specification. Claim(s) >£1 million. Loss of contract/payment by results.
Service/ Business Interruption	Loss/interruption of >1 hour. Minor disruption.	Loss/interruption of >8 hours. Some disruption manageable by altered operational routine.	Loss/interruption of >1 day. Disruption to a number of operational areas in a location, possible flow to other locations.	Loss/interruption of >1 week. All operational areas of a location compromised, other locations may be affected.	Permanent loss of service or facility. Total shutdown of operations.
Environment/Estate/ Infrastructure	Minimal or no impact on environment/service/property.	Minor impact on environment/ service/property.	Moderate impact on environment/ service/property.	Major impact on environment/ service/property.	Catastrophic impact on environment/service/property.
Health Inequalities/ Equity	Minimal or no impact on attempts to reduce health inequalities/improve health equity.	Minor impact on attempts to reduce health inequalities or lack of clarity on the impact on health equity.	Lack of sufficient information to demonstrate reducing equity gap, no positive impact on health improvement or health equity.	Validated data suggests no improvement in the health of the most disadvantaged, whilst supporting the least disadvantaged, no impact on health improvement and/or equity.	Validated data demonstrates a disproportionate widening of health inequalities, or negative impact on health improvement and/or equity.

Risk Scoring Matrix (Likelihood x Consequence = Risk Score)		Consequence:				
Likelihood:	Frequency:	1 Negligible	2 Minor	3 Moderate	4 Major	5 Catastrophic
1 Highly Unlikely: Will probably never happen/recur	Not for years	1	2	3	4	5
2 Unlikely: Do not expect it to happen/recur but it is possible	At least annually	2	4	6	8	10
3 Likely: It might happen/recur occasionally	At least monthly	3	6	9	12	15
4 Highly Likely: Will probably happen/recur, but not a persisting issue	At least weekly	4	8	12	16	20
5 Almost Certain: Will undoubtedly happen/recur, maybe frequently	At least daily	5	10	15	20	25

Risk Review Framework

Risk Score	Review Frequency	Risk Rating
15 – 25 Red	Review monthly	High
8 – 12 Amber	Review quarterly	Medium
1 – 6 Green	Review every 6 months	Low

Risk Assessment Form

Reference	Exec Owner/ Directorate	BAF / Strategic	Title	Date of Initial Assessment	Rating with existing control measures Likelihood x Consequence							Commentary
					Controls Assurance Rating	Q1 23/24	Q2 23/24	Q3 23/24	Q4 23/24	Q1 24/24	Target Rating	
CHAR-003	Director of Partnerships and Engagement		Lack of compliance with legal and regulatory framework	Risk Reviews	I E							<p>IF the Trust's Charity lacks robust awareness and active monitoring of the current legislation and regulations</p> <p>THEN it is at risk of non-compliance with legal and statutory obligations</p> <p>RESULTING IN potential enforcement action including financial penalties, reputational damage and possible restrictions on charitable activities</p>

Detailed Risk Assessment

1. Risk ID	2. BAF & Strategic Aim	3. Risk Owner (Executive)	4. Source	5. Date of initial entry or Date first identified	6. Date of last review	7. Local Delivery Plan (LDP) Key Deliverable	8. Health & Care Standards and CM*/ NEPTS**Step or Core Requirement (CR)	9. Assuring Board Committee & Responsible Group	
10. Risk Title									
Lack of compliance with legal and regulatory framework									
11. Risk Description – Cause & effect							12. Inherent risk rating (No controls in place)		
<p>IF the Trust's Charity fails to have a good awareness of the current legislation and appropriate regulations</p> <p>THEN there is potential for the Charity to breach the law</p> <p>RESULTING IN fines, penalties or censure from licensing or activity regulators.</p>							Likelihood	Consequences	Score
							4	5	20
13. Current Controls							14. Gaps in Controls		
<ol style="list-style-type: none"> Head of Charity role: a solid understanding of charity governance and regulatory requirements is an essential criteria of the role. Job Description includes that role should be seen as “subject matter expert on all Charity matters” NHS Charities Together: UK-wide network of NHS charities providing timely information on legislation changes, guidance, and access to legal advice NHS Wales charity network: WAST is a member of an informal charity network, sharing updates and advice which can then be escalated as required NHS Wales - Welsh Risk Pool: The Charity has access to advice on legal and risk from the Welsh Risk Pool Charity Commission guidance reviewed annually Dedicated regulatory horizon scanning undertaken quarterly Serious incident reporting included in the Charitable Funds Policy 							<ol style="list-style-type: none"> Fixed-Term Position: Position is fixed-term until October 2026 Single Point of Failure: Limited written guidance documents for staff and volunteers, in order to disseminate guidance in a clear and understandable way. Informal network, so cannot give formal legal or regulatory guidance, plus the ability for other members to support WAST is dependent on their capacity Advice will be included in a staff document on Siren as to which activities are covered by the WRP 		

15. Assurance on current controls (Internal (I) & External (E))		16. Gaps in Assurance Internal (I) & External (E)		
<ol style="list-style-type: none"> 1. Charity Committee oversight: The work of the Charity Team is monitored on a quarterly basis through the Charity Committee. Membership of the Charity Committee includes NEDs with third-sector expertise 2. NHS Charities Together provides access to support through workshops, webinars, an online forum, and in-person conferences and Special Interest Group meetings 3. NHS Wales charity network meets quarterly in a formal setting, as well as more regularly informally 4. Welsh Risk Pool can provide definitive legal advice where required, plus advice on where to source indemnity/public liability insurance 5 and 6 any changes would be included in the performance report assure to Charity Committee 7 Audit and monitoring compliance against the policy 		<ol style="list-style-type: none"> 1. Third-sector experience is not a requirement of Charity Committee membership, skill set will need refreshing as NEDs approach term limits – see separate risk on CHAR-002 		
17. Level of Assurances on current controls (Internal (I) & External (E))		18. Current risk rating (With current controls in place & gaps in controls)		
Moderate controls in place with further work needed to ensure that knowledge is available to all staff, volunteers and fundraisers as required		Likelihood	Consequences	Score
		2	5	10
19. Rationale for Current Risk Score		Likelihood significantly lower with the full-time Head of Charity role recruited. Further work needed to solidify this knowledge into clear, accessible documentation for all		
		Consequences remain high as failure to mitigate risk could result in substantial legal action against the Charity and/or Corporate Trustee, as well as adverse publicity for the Charity/Trust, and potential to damage relationships with donors, the public and key stakeholders.		
20. Risk proximity: Current/ 0-3 months/3-12 months/12 months+ When is the risk likely to materialise?		Current		
21. Further actions to reduce risk score or address gaps in controls / assurances	22. Action Owner	23. Proposed Implementation Dates/	24. Notes	25. Predicted risk reduction score
1. Approval of Charitable Funds policy / Cash Handling SOP	Head of Charity	By end of March 2026		
2. Written guidance to staff / volunteers about fundraising procedures	Head of Charity / Fundraising and	By end of December 2025		

			Communications Officer			
3. Clear Charity position on indemnity / public liability from Welsh Risk Pool to be published on Siren			Head of Charity	By end of August 2025		
4. Voluntary registration with Fundraising Regulator, to provide assurance to the public that Code of Fundraising Practice is being adopted and followed			Head of Charity	By end of August 2025	This will become required if fundraising expenditure (including staffing) exceeds £100K/annum	
5. Roles and responsibilities of Corporate Trustees Board Development Session			Head of Charity / DOCG	February 2026		
26. Target risk rating			27. Is this within risk appetite?		28. Target date to achieve risk rating	29. Shift in position? (↑ ↔ ↓)
Likelihood	Consequence	Score	Yes / No <i>Currently no risk appetite statement. Please refer to risk scoring matrix to determine whether risk within tolerable limits.</i>			Current Risk Rating:
1	5	5	Board/ ELT consideration			Target Risk Rating:
						10
						5
31. Rationale for Target Risk Score						
32. Linked Risks						
Details						

Controls Assurance Assessment

Level of Control	Definition	Examples (Not exhaustive)
Weak	Assurances indicates poor effectiveness of controls.	<ul style="list-style-type: none"> • No active controls in place • No assurance process in place • Approved policy/procedure in place but no/minimal evidence of implementation • Compliance with Trust/National targets <50% • Internal audit opinion – Unsatisfactory / limited.
Moderate	Some assurances in place, but controls are still maturing so effectiveness cannot be fully assured currently.	<ul style="list-style-type: none"> • Evidence (Clinical / local audits) available of partial implementation of policy/procedure but not Trust-wide • Compliance with Trust/National targets at 50%-74% • Internal audit opinion - moderate assurances.
Strong	Substantial assurance provided over the effectiveness of controls.	<ul style="list-style-type: none"> • Evidence of implementation Health Board / Trust wide • Compliance with Trust/National targets >75% • Internal audit opinion – substantial assurance • External assurance / external audit / inspection / accreditation /evaluation assessment rated as substantial

Risk Scoring Matrix

Consequence:	1 Negligible	2 Minor	3 Moderate	4 Major	5 Catastrophic
Safety & Well-being - Patients/ Staff/Public	Minimal injury requiring no/minimal intervention or treatment. No time off work. Physical injury to self/others that requires no treatment or first aid. Minimum psychological impact requiring no support. Low vulnerability to abuse or exploitation - needs no intervention. Category 1 pressure ulcer.	Minor injury or illness, requiring minor intervention. Requires time off work for >3 days Increased hospital stay 1-3 days. Slight physical injury to self/others that may require first aid. Emotional distress requiring minimal intervention. Increased vulnerability to abuse or exploitation, low level intervention. Category 2 pressure ulcer.	Moderate injury/professional intervention. Requires time off work 4-14 days. Increased hospital stay 4-15 days. RIDDOR/Agency reportable incident. Impacts on a small number of patients. Physical injury to self/others requiring medical treatment. Psychological distress requiring formal intervention by MH professionals. Vulnerability to abuse or exploitation requiring increased intervention. Category 3 pressure ulcer.	Major injury leading to long-term disability. Requires time off work >14 days. Increased hospital stay >15 days. RIDDOR Reportable. Regulation 4 Specified Injuries to Workers. Patient mismanagement, long-term effects. Significant physical harm to self or others. Significant psychological distress needing specialist intervention. Vulnerability to abuse or exploitation requiring high levels of intervention. Category 4 pressure ulcer.	Incident leading to death. RIDDOR Reportable. Multiple permanent injuries or irreversible health effects. An event which impacts on a large number of patients.
Quality/ Complaints/ Assurance/ Patient Outcomes	Peripheral element of treatment or service suboptimal. Informal complaint/inquiry.	Overall treatment/service suboptimal. Formal complaint (Stage 1). Local resolution. Single failure of internal standards. Minor implications for patient safety. Reduced performance.	Treatment/service has significantly reduced effectiveness. Formal complaint (Stage 2). Escalation. Local resolution (poss. independent review). Repeated failure of internal standards. Major patient safety implications.	Non-compliance with national standards with significant risk to patients. Multiple complaints/independent review. Low achievement of performance/delivery requirements. Critical report.	Totally unacceptable level or quality of treatment/service. Gross failure of patient safety. Inquest/ombudsman/inquiry. Gross failure to meet national standards/requirements.
Workforce/ Organisational Development/ Staffing/ Competence	Short-term low staffing level that temporarily reduces service quality (< 1 day).	Low staffing level that reduces the service quality.	Late delivery of key objective/service due to lack of staff. Unsafe staffing level (>1 day)/competence. Low staff morale. Poor staff attendance for mandatory/key professional training.	Uncertain delivery of key objective/ service due to lack/loss of staff. Unsafe staffing level (>5 days)/competence. Very low staff morale. Significant numbers of staff not attending mandatory/key professional training.	Non-delivery of key objective/service due to loss of several key staff. Ongoing unsafe staffing levels or competence/skill mix. No staff attending mandatory/professional training.
Statutory Duty, Regulation, Mandatory Requirements	No or minimal impact or breach of guidance/statutory duty.	Breach of statutory legislation. Reduced performance levels if unresolved.	Single breach in statutory duty. Challenging external recommendations/improvement notice.	Enforcement action. Multiple breaches in statutory duty. Improvement notices. Low achievement of performance/ delivery requirements. Critical report.	Multiple breaches in statutory duty. Zero performance rating. Prosecution. Severely critical report. Total system change needed.
Adverse Publicity or Reputation	Rumours. Low level negative social media. Potential for public concern.	Local media coverage - short-term reduction in public confidence/trust. Short-term negative social media. Public expectations not met.	Local media coverage - long-term reduction in public confidence & trust. Prolonged negative social media. Reported in local media.	National media coverage <3 days, service well below reasonable public expectation. Prolonged negative social media, reported in national media, long-term reduction in public confidence & trust. Increased scrutiny: inspectorates, regulatory bodies and WG.	National/social media coverage >3 days, service well below reasonable public expectation. Extensive, prolonged social media. MP/MS questions in House/Senedd. Total loss of public confidence/trust. Escalation of scrutiny status by WG.
Business Objectives or Projects	Insignificant cost increase/ schedule slippage.	<5 per cent over project budget. Schedule slippage.	5–10 per cent over project budget. Schedule slippage.	Non-compliance with national targets. 10-25 per cent over project budget. Schedule slippage. Key objectives not met.	>25 per cent over project budget. Schedule slippage. Key objectives not met.
Financial Stability & Impact of Litigation	Small loss. Risk of claim remote.	Loss of 0.1–0.25% of budget Claim less than £10,000.	Loss of 0.25–0.5% of budget. Claim(s) between £10,000 and £100,000.	Uncertain delivery of key objective. Loss of 0.5-1.0% of budget. Claim(s) between £100,000 and £1 million. Purchasers failing to pay on time.	Non-delivery of key objective. Loss of >1 per cent of budget. Failure to meet specification. Claim(s) >£1 million. Loss of contract/payment by results.

Service/ Business Interruption	Loss/interruption of >1 hour. Minor disruption.	Loss/interruption of >8 hours. Some disruption manageable by altered operational routine.	Loss/interruption of >1 day. Disruption to a number of operational areas in a location, possible flow to other locations.	Loss/interruption of >1 week. All operational areas of a location compromised, other locations may be affected.	Permanent loss of service or facility. Total shutdown of operations.
Environment/Estate/ Infrastructure	Minimal or no impact on environment/service/property.	Minor impact on environment/ service/property.	Moderate impact on environment/ service/property.	Major impact on environment/ service/property.	Catastrophic impact on environment/service/property.
Health Inequalities/ Equity	Minimal or no impact on attempts to reduce health inequalities/improve health equity.	Minor impact on attempts to reduce health inequalities or lack of clarity on the impact on health equity.	Lack of sufficient information to demonstrate reducing equity gap, no positive impact on health improvement or health equity.	Validated data suggests no improvement in the health of the most disadvantaged, whilst supporting the least disadvantaged, no impact on health improvement and/or equity.	Validated data demonstrates a disproportionate widening of health inequalities, or negative impact on health improvement and/or equity.

Risk Scoring Matrix (Likelihood x Consequence = Risk Score)		Consequence:				
Likelihood:	Frequency:	1 Negligible	2 Minor	3 Moderate	4 Major	5 Catastrophic
1 Highly Unlikely: Will probably never happen/recur	Not for years	1	2	3	4	5
2 Unlikely: Do not expect it to happen/recur but it is possible	At least annually	2	4	6	8	10
3 Likely: It might happen/recur occasionally	At least monthly	3	6	9	12	15
4 Highly Likely: Will probably happen/recur, but not a persisting issue	At least weekly	4	8	12	16	20
5 Almost Certain: Will undoubtedly happen/recur, maybe frequently	At least daily	5	10	15	20	25

Risk Review Framework

Risk Score	Review Frequency	Risk Rating
15 – 25 Red	Review monthly	High
8 – 12 Amber	Review quarterly	Medium
1 – 6 Green	Review every 6 months	Low

Reference	Exec Owner/ Directorate	BAF / Strategic Aim	Title	Date of Initial Assessment	Rating with existing control measures							Commentary
					Likelihood x Consequences							
					Controls Assurance Rating	Q4 21/22	Q1 22/23	Q2 22/23	Q3 22/23	Q4 22/23	Target Rating	
CHAR-005	Partnerships and Engagement- Director of Partnerships and Engagement		Lack of internal processes and governance structures in place to meet the conditions of grants									<p>IF robust governance arrangements are not in place for the oversight of charity grants including due diligence, monitoring of spend and accurate reporting</p> <p>THEN there is potential for the conditions of the grant to be breached</p> <p>RESULTING IN damage to the Charity's reputation, potential for grants to be reclaimed and an inability to secure grants in the future.</p>

Detailed Risk Assessment –

1. Risk ID	2. BAF & Strategic Aim	3. Risk Owner (Executive)	4. Source	5. Date of initial entry or Date first identified	6. Date of last review	7. Local Delivery Plan (LDP) Key Deliverable	8. Health & Care Standards and CM*/ NEPTS** Step or Core Requirement (CR)	9. Assuring Board Committee & Responsible Group
					Risk Reviews			
10. Risk Title								
Lack of internal processes and governance structures in place to support the application for grants and the subsequent administration of funds								
11. Risk Description - Cause & effect						12. Inherent risk rating (No controls in place)		
<p>IF there fails to be sufficient governance in place in respect of charity grants including monitoring, spend and reporting.</p> <p>THEN there is potential for the charity to be incorrectly handling grant funding applications</p> <p>RESULTING IN damage to the Charity reputation and an inability to secure grants in the future.</p>						Likelihood	Consequences	Score
						4	3	12
13. Current Controls						14. Gaps in Controls		
<ol style="list-style-type: none"> Once awarded, grants are held as legally restricted funds as part of the Charity's balance sheet, managed by the DoF and scrutinised by Audit Wales (audit or independent examination). Expenditure against restricted funds is approved by the Head of Charity, up to delegated approval limits of £25k and anything over that amount has to be approved by the Charity Committee. Head of Charity maintains a record of all grant reporting requirements, performance targets and monitoring deadlines Finance department maintains records of grant spend 						<ol style="list-style-type: none"> Charity SoRD needs to be reviewed to align with approved delegated authorities. Long-term Charity governance controls and assurance are reliant on ensuring a substantive Head of Charity position - currently fixed term until October 2026 		
15. Assurance on current controls (Internal (I) & External (E))						16. Gaps in Assurance Internal (I) & External (E)		
<ol style="list-style-type: none"> Restricted funds and associated expenditure are subject to independent examination by Audit Wales Expenditure is approved by the Head of Charity according to the budget submitted as part of the original grant application – SoRD 						<ol style="list-style-type: none"> Overspends in project budgets (particularly in project staffing costs) are sometimes outside of the control of the Charity 		

<p>3. Grant monitoring and reporting deadlines are included within the quarterly Charity Performance Report for assurance, as part of Charity Committee papers</p> <p>4. Unaudited figures reported quarterly to Charity Committee and subject to annual independent examination</p>	<p>3/ Performance against KPIs is sometimes outside of the control of the Charity, as projects are often delivered by teams within the Trust</p>			
<p>17. Level of Assurances on current controls (Internal (I) & External (E))</p>		<p>18. Current risk rating (With current controls in place & gaps in controls)</p>		
<p>Robust controls in place</p>		<p>Likelihood</p>	<p>Consequences</p>	<p>Score</p>
		<p>2</p>	<p>3</p>	<p>6</p>
<p>19. Rationale for Current Risk Score</p>		<p>Robust controls in place with financial controls and external monitoring.</p>		
<p>20. Risk proximity: Current/ 0-3 months/3-12 months/12 months+ When is the risk likely to materialise?</p>		<p>Current</p>		
<p>21. Further actions to reduce risk score or address gaps in controls / assurances</p>		<p>22. Action Owner</p>	<p>23. Proposed Implementation Dates/</p>	<p>24. Notes</p>
<p>25. Predicted risk reduction score</p>				
<p>1. Review of Scheme of Delegation</p>	<p>DOCG and DoP&E and HoC</p>	<p>August 2025</p>		
<p>2. Secure permanent role for the Head of Charity to maintain continuity of arrangements and assurance</p>	<p>DoP&E</p>	<p>October 2026</p>		
<p>3. MOU between Charity and Trust to clarify roles and responsibilities for budgeting, grant reporting and performance against targets</p>	<p>Head of Charity</p>	<p>December 2025</p>		
<p>4. MOU between Charity and individual projects to clarify maximum funding awarded to any project, and clarifying that overspends must be covered by the Trust</p>	<p>Head of Charity</p>	<p>December 2025</p>		
<p>5. Introduction of regular cycle of meetings between Charity and project leads to discuss grant performance and expenditure</p>	<p>Head of Charity</p>	<p>December 2025 (for existing grants)</p>	<p>Ongoing as new grants are awarded</p>	

26. Target risk rating			27. Is this within risk appetite?	28. Target date to achieve risk rating	29. Shift in position? (↑ ↔ ↓)	30. Next review date
Likelihood	Consequence	Score	Yes / No <i>Currently no risk appetite statement. Please refer to risk scoring matrix to determine whether risk within tolerable limits.</i>		Current Risk Rating: 6	
1	3	3	Board/ ELT consideration		Target Risk Rating: 3	
31. Rationale for Target Risk Score						
32. Linked Risks						
Details						

Controls Assurance Assessment

Level of Control	Definition	Examples (Not exhaustive)
Weak	Assurances indicates poor effectiveness of controls.	<ul style="list-style-type: none"> • No active controls in place • No assurance process in place • Approved policy/procedure in place but no/minimal evidence of implementation • Compliance with Trust/National targets <50% • Internal audit opinion – Unsatisfactory / limited.
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Risk Scoring Matrix

Consequence:	1 Negligible	2 Minor	3 Moderate	4 Major	5 Catastrophic
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Service/ Business Interruption	Loss/interruption of >1 hour. Minor disruption.	Loss/interruption of >8 hours. Some disruption manageable by altered operational routine.	Loss/interruption of >1 day. Disruption to a number of operational areas in a location, possible flow to other locations.	Loss/interruption of >1 week. All operational areas of a location compromised, other locations may be affected.	Permanent loss of service or facility. Total shutdown of operations.
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Risk Scoring Matrix (Likelihood x Consequence = Risk Score)		Consequence:				
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3 Likely: It might happen/recur occasionally	At least monthly	3	6	9	12	15
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5 Almost Certain: Will undoubtedly happen/recur, maybe frequently	At least daily	5	10	15	20	25

Risk Review Framework

Risk Score	Review Frequency	Risk Rating
15 – 25 Red	Review monthly	High

8 – 12 Amber	Review quarterly	Medium
1 – 6 Green	Review every 6 months	Low



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Gwasanaethau Ambiwylans Cymru
Welsh Ambulance Services
University NHS Trust

BIDS PANEL HIGHLIGHT REPORT FOR CHARITY COMMITTEE

Charity Committee Meeting Date	3 July 2025
Bids Panel Meeting Dates	Extraordinary Meetings held on 2 April 2025, 16 May 2025 and 23 May 2025 (combined)
Bids Panel Meeting Chair	Julie Boalch, Assistant Director of Corporate Governance & Risk

KEY ESCALATION AND DISCUSSION POINTS

ALERT

(Alert the ELT to areas of escalation)

1. There were no alerts for this meeting.

ADVISE

(Detail any areas of on-going monitoring, approvals, or new developments to be communicated)

2. Hugh Parry, Trade Union Partner, made a **Declaration of Interest** in relation to Bid Ref: 2504 - Staff Memento re: Bryn Tirion Relocation and abstained from the Bids Panel decision.

3. Outcome of Applications Considered by Bids Panel

Bid Description	Amount	Directorate	Outcome of Bids Panel
Bid 2504 – Bryn Tirion Relocation Memento	Up to £1,600	Operations	Approved [North fund]
Bid 2507 – Memorial Bench with an engraved plaque in memory of Karl Merrett (Bargoed Ambulance Station)	Up to £1,500	Operations	Approved [South East fund]
Bid 2508 – Replacement Pressure Washer (Llangefni Ambulance Station)	n/a	Operations	Rejected – Bid not appropriate for Charitable Funds. Confirmed Operations Directorate to fund.
Bid 2509 – New Furniture: 2-seater sofa and reclining chairs (Glynneath Ambulance Station)	Up to £1,500	Operations	Approved [South East fund]
Bid 2510 – Paediatric Intensive Life Support (PILS) Course for AH	n/a	Operations	Redirected – Application for course funding redirected to the Trust's Bursary Panel for consideration.

Total amount of funding awarded to approved new bids = £4,600

4. The Bids Panel received clarification from the Estates Department regarding responsibilities for the **purchase, maintenance/repair, and replacement of equipment** located at ambulance stations. It was noted that the current list of responsibilities (Appendix A) is relatively limited and does not include essential items such as furniture or pressure washing equipment. It was confirmed that the Estates Department is responsible for the installation of interceptor tanks to collect wastewater from vehicle washing. However, the responsibility for the pressure washing equipment itself lies with the Operations Directorate. The issue of responsibility for furniture remains unresolved and requires further discussion with colleagues from the Estates team.
5. The Bids Panel received an update on the **Colwyn Bay Restricted Fund**, which is approximately £150,000. As the wording of the donation is not limited to ambulance equipment, the Trust has a greater degree of flexibility in how these funds may be utilised. Initial discussions have identified a potential building project as a suitable use for the fund. A related bid has already been submitted to the Welsh Government for discretionary funding; however, the project is not currently a high priority within the Capital Development Work Programme. The Head of Charity will provide a further update at the next scheduled meeting in June 2025. This matter will remain a standing agenda item for the Bids Panel until resolved.

ASSURE

(Detail here any areas of assurance the Committee has received)

6. **Bryn Tirion Relocation Memento** – A revised proposal was approved for a suitable memento to mark the relocation of the Emergency Medical Services Control (EMSC) team from Bryn Tirion to Ty Elwy. The purchase order was placed in a timely manner to ensure delivery ahead of the scheduled visit to Ty Elwy by the High Sheriff and Board Members in early June 2025, during which the memento is intended to be presented to staff.
7. **Unused Awards** – Work continues to follow up on previously approved charitable funds awards and ensure that the charity accounts are accurate, with any assigned awards which have not been utilised being released / put back into the charity accounts.
8. **Barmouth Restricted Fund**. A shortlist of appropriate items was agreed (listed below), which have been costed to assess affordability and inform further discussions with the staff at Barmouth:
 - Quality Adult and Paediatric Mannequin
 - Cannulation Arm
 - Front of neck (plus skins)
 - Digital stethoscopes (for x2 staff with impaired hearing)
 - AED and External AED cabinet
 - Digitalised CPD Materials

Enquiries regarding the proposal to modify the station building to create a suitable space for the Education and Training Team to attend and provide training and support to staff on site, continues to be explored with the Estates Department.

Consideration is also being given to whether some of the funding could be utilised to install additional AEDs within the local community as part of the Save a Life Campaign (SALC) and potential for training to be provided by the Trust. Investigations into potential locations and guardian responsibilities is being progressed.

A final decision regarding expenditure will be made at the next scheduled Bids Panel Meeting on 4 June 2025, by which time feedback from staff at Barmouth Ambulance Station regarding their preferred priorities, and updates on other proposed schemes should be available. A proposal will then be presented to Charity Committee at its meeting on 3 July 2025.

9. There is no requirement on the Charity Committee to approve any of the bids highlighted in this report given they are all within the Bids Panel approved expenditure limits as set out in its Terms of Reference.
10. Committee can be assured that the Bids Panel, when making decisions about charitable expenditure has given due regard to the guidance on public benefit and applied it when approving bids within its remit.
11. The Bids Panel continues to:
 - a. Act within its powers.
 - b. Act honestly and with good intentions, and only in the charity's interest.
 - c. Be sufficiently informed, taking any necessary advice.
 - d. Take account of all relevant factors.
 - e. Ignore irrelevant factors.
 - f. Manage conflicts of interest.
 - g. Make a decision that is within a range of decisions that the panel could make.
12. The panel applied the HFMA guidance to each application to assure itself that the bid was being considered in relation to benefits such as for the relief of sick patients as well as staff and patient benefit.

13. Risks:

- 18.1 **Unspent funding awards** – risk identified and treatments in progress to mitigate risk
- 18.2 **Blaenau Ffestiniog Kayaks** – risk identified and action being taken to resolve the risk.
- 18.3 **NHSCT Grant: Paddleboards** – risk identified and application rejected retrospectively, with alternative options being explored.

APPENDICES

Appendix 'A'	Division of Responsibilities: Estates and Operations
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MEETING AGENDA ITEMS

Dashboard: Review Action Log & Decision Log	Barmouth Restricted Fund [Standing agenda item]	Colwyn Bay Restricted Fund
Bryn Tirion Relocation Memento – Alternative Bid	Division of responsibilities re: equipment on ambulance stations	New Bid Applications (x4 new bids - Bid Refs: 2507-2510 incl.)
Key Messages for Committee	Any Other Business	Dates and Times of Future Meetings (2025/26 schedule)

ATTENDANCE						
Meeting Date:	22/01/2025	24/02/2025	06/03/2025 [Ex-ord]	02/04/2025 [Ex-ord]	16/05/2025 [Ex-ord]	23/05/2025 [Ex-ord]
Julie Boalch [Chair]						
Lisa Trounce						
Lois Hough						
Bernadette Mitchell	(Until 11am)					
Karen Jones						*
Luke Watkins		Replaced by Elliot Miller Feb25				
Elliot Miller	Joined Feb25					
Aled Williams						
Kataya Miura						Ian McMurtrie
Damon Turner						
Hugh Parry						
David Hopkins						
OTHER ATTENDEES						
Greg Lloyd			Barmouth Restricted Fund	Barmouth RF		
Jo Kelso						

*Indicates where Bids Panel members who were unable to attend the meeting considered the bids submitted and provided comments in advance of the meeting.

	Attended
	Deputy Attended
	Apologies Received
	No longer member



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Gwasanaethau Ambiwylans Cymru
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University NHS Trust

BIDS PANEL HIGHLIGHT REPORT FOR CHARITY COMMITTEE

Executive Leadership Team	25 June 2025
Charity Committee Meeting Date	3 July 2025
Bids Panel Meeting Dates	4 June 2025
Bids Panel Meeting Chair	Julie Boalch, Assistant Director of Corporate Governance & Risk

KEY ESCALATION AND DISCUSSION POINTS

ALERT

(Alert the ELT to areas of escalation)

1. There were no alerts for this meeting.

ADVISE

(Detail any areas of on-going monitoring, approvals, or new developments to be communicated)

2. Declarations of Interest

Name (Position)	Bid	Declaration
Bernadette Mitchell (Finance Assistant – Charitable Funds)	NHSCT S3-R2-05 Fly Fishing (North Wales)	Bernadette, being the applicant, was recused from the Panel vote.
Aled Willams (Assistant Director of Digital – OCT Infrastructure)	NHSCT S3-R2-09 WAST Rugby Team (South East)	Aled declared a potential conflict of interest, noting that his son plays for the team. He therefore recused himself from the Panel vote.
David Hopkins (Head of Charity)	NHSCT S3-R2-08 Yoga Sessions (Cardiff Ambulance Station) NHSCT S3-R2-10 Pro Spin Bike (Cardiff Ambulance Station)	In the interests of full transparency, David explained that he was based in Cardiff Ambulance Station and had provided general advice on the bids. As he was not directly involved in the applications, it was agreed that he could participate in the Panel vote.

3. Outcome of General Charitable Fund Applications Considered by Bids Panel

Bids Panel received five new general charitable fund applications for consideration. The Panel's decisions on each of these applications are detailed overleaf.

Bid Description	Amount Awarded	Directorate	Outcome of Bids Panel
Bid 2511 – Picnic Benches x2 (Hawthorn Ambulance Station)	£1,000.00	Operations	Approved [South East fund]
Bid 2512 – Wellbeing Room (Cwmbwrla Ambulance Station)	£735.00	Operations	Approved [C&W fund] pending clarification regarding whether there are any spare refrigerators in storage within the Trust.
Bid 2513 – Electrical Equipment (National Resource Wales Base Station, Neath)	£600	Operations	Approved [C&W fund] pending confirmation regarding intended location of requested DAB radio (as radio stations available via SMART TV), and provision of a durable toaster ideally with a commercial warranty.
Bid 2514 – Promotional Lanyards (WISH Ambulance)	£619.50 (Bids Panel approved uplift of the award if required)	Operations	Approved [WISH fund] pending inclusion of the WAST Charity logo in the design, Welsh language option to be available, supply of 2 quotes to provide assurance competitive price.
Bid 2515 – Wellbeing Garden (Cardiff Ambulance Station)	£1,350.00	Operations	Approved [South East fund] pending advice from Estates and Infection Prevention and Control Teams in relation to potential risks (composting and rodents).

Total amount of funding awarded to approved new General CF bids = £4,304.50

4. NHS Charities Together Sports Fund Applications – Round 2

A total of 11 applications were received for NHSCT Sports Fund grant monies. The Panel's decisions on each of these applications are detailed overleaf.

Application Description	Amount Awarded	Outcome of Bids Panel
S3-R2-01 ~ Gym Equipment (HART Base, Brynmenyn)	£1,838.93	Approved
S3-R2-02 ~ Introduction to Yoga (Ty Elwy)	£650.00	Approved
S3-R2-03 ~ Gym Equipment (Aberaeron Wellbeing Station – Ceredigion Area)	£1,000.00	Approved

S3-R2-04 ~ White Water Rafting Team Building Day (Swansea & Neath Localities)	Nil	Rejected: One-off event therefore does not meet NHSCT criteria.
S3-R2-05 ~ Fly Fishing (North Wales)	£1,976.00	Approved
S3-R2-06 ~ Rapid Rafting (North Wales)	Nil	Rejected: One-off event therefore does not meet NHSCT criteria.
S3-R2-07 ~ Men of the North Walking Group (North Wales)	Nil	Rejected: NHSCT does not allow personal issue of clothing or kit, therefore application does not qualify.
S3-R2-08 ~ Yoga Sessions (Cardiff Ambulance Station)	£2,000.00	Approved
S3-R2-09 ~ WAST Rugby Team (South East)	Nil	Deferred: Application to be resubmitted containing clarification on the following: 1) The team currently has £900 unspent funds from Round 1 award; 2) How many kits does the team already have? 3) Previous application related to Pan Wales team, latest application states South East, but also makes reference to establishing a team in the North?
S3-R2-10 ~ Indoor Spin Bike (Cardiff Ambulance Station)	£2,000.00	Approved NB: Bids Panel awarded more than was requested to enable purchase of a higher specification item which would be durable and withstand use by multiple people over time.
S3-R2-11 ~ Rounders Team (Swansea)	£1,373.00	Approved

Total amount of NHSCT Sports Fund grants awarded to approved new applications = £10,837.93

ASSURE

(Detail here any areas of assurance the Committee has received)

5. Since previous discussions at Bids Panel regarding the **Blaenau Ffestiniog Kayaks**, further legal advice had been received clarifying that, due to the risks posed if this unmaintained equipment were to be used, and the organisation's liability as they were stored on Trust premises, disposal of these items was required at the earliest opportunity to resolve this risk. Bids Panel was assured that the risks and Trust's position on this equipment, had been clearly communicated to staff. The Locality Manager at Blaenau Ffestiniog Ambulance Station was arranging for the kayaks to be moved into secure storage off site until appropriate disposal could be arranged.
6. **Barmouth Restricted Fund.** It had not been possible for the Trade Union Partner and Locality Manager to meet with staff at Barmouth Ambulance Station in April/May 2025 as planned, to discuss and propose the quantities of items to be purchased from the agreed list below:

- Quality Adult and Paediatric Mannequin
- Cannulation Arm
- Front of neck (plus skins)
- Digital stethoscopes (for x2 staff with impaired hearing)
- AED and External AED cabinet
- Digitalised CPD Materials

A meeting had therefore been arranged for 1 July 2025, following which feedback would be received to inform the plan to be presented to Charity Committee at its meeting on 3 July 2025.

7. As clinical equipment and training materials would only utilise part of the restricted fund, Bids Panel agreed the inclusion of ICT equipment for training purposes. The potential purchase and installation of 3-4 additional defibrillators for the Barmouth community and surrounding area, was also still being explored. Bids Panel was reminded that the Trust had agreed to provide training for the proposed defibrillators. Additionally, the option of repurposing an area for a designated training space at Barmouth Ambulance Station is also still being explored, but this is dependent on the completion of work at Dolgellau which had not yet commenced, therefore this was more of a long term option.
8. David Hopkins (Head of Charity) outlined the legal position – Charity law states that trustees of a charity should not hold onto monies for long periods of time without a spending plan being in place. Therefore this matter remains a risk, mitigated by a draft plan being in development.
9. In view of the historical nature of this agenda item, Julie Boalch (Assistant Director of Corporate Governance and Risk) will continue to co-ordinate discussions until a firm plan is agreed. In the meantime, assurance to be provided to both the Executive Leadership Team (ELT) later in June 2025, and Charity Committee at its meeting on 3 July 2025.
10. A final decision regarding expenditure will be made at the next scheduled Bids Panel Meeting, by which time feedback from staff at Barmouth Ambulance Station regarding their preferred priorities, and updates on other proposed schemes should be available. A proposal will then be presented to Charity Committee at its meeting on 3 July 2025.
11. **Unused Awards** – Work continues to follow up on previously approved charitable funds awards and ensure that the charity accounts are accurate, with any assigned awards which have not been utilised being released / put back into the charity accounts.
12. There is no requirement on the Charity Committee to approve any of the bids highlighted in this report given they are all within the Bids Panel approved expenditure limits as set out in its Terms of Reference.
13. Committee can be assured that the Bids Panel, when making decisions about charitable expenditure has given due regard to the guidance on public benefit and applied it when approving bids within its remit.
14. The Bids Panel continues to:
 - a. Act within its powers.
 - b. Act honestly and with good intentions, and only in the charity's interest.
 - c. Be sufficiently informed, taking any necessary advice.

- d. Take account of all relevant factors.
- e. Ignore irrelevant factors.
- f. Manage conflicts of interest.
- g. Make a decision that is within a range of decisions that the panel could make.

15. The panel applied the HFMA guidance to each application to assure itself that the bid was being considered in relation to benefits such as for the relief of sick patients as well as staff and patient benefit.

16. Risks:

- 18.1 **Blaenau Ffestiniog Kayaks** – risk identified and action being taken to resolve the risk.
- 18.2 **Barmouth Restricted Fund** – risk identified and action being taken to resolve the risk.
- 18.3 **Unspent funding awards** – risk identified and treatments in progress to mitigate risk.

APPENDICES

None	
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MEETING AGENDA ITEMS

Introduce New Bids Panel Chair – Leanne Smith (Assistant Director, Health Informatics)	Declarations of Interest	Dashboard: Review Action Log & Decision Log
Feedback from Charity Committee (held on 02.04.25)	Outstanding Awards – Quarterly Report (verbal update)	Charitable Funds Account Balances (as of 31.05.25)
New General CF Applications (x5) for consideration	NHSCT Sports Fund Applications – Round 2 (x11 applications)	Barmouth Restricted Fund [Standing agenda item]
Colwyn Bay Restricted Fund [Deferred to next meeting]	Liability [Deferred to next meeting]	Draft Bids Panel AAA Highlight Report (020425/160525/230525) to Charity Committee 03.07.25
Key Messages for Committee	Any Other Business	Dates and Times of Future Meetings (2025/26 schedule)

ATTENDANCE						
Meeting Date:	24/02/2025	06/03/2025 [Ex-ord]	02/04/2025 [Ex-ord]	16/05/2025 [Ex-ord]	23/05/2025 [Ex-ord]	04/06/2025
Julie Boalch [Chair]						
Lisa Trounce						
Lois Hough						
Bernadette Mitchell						
Karen Jones					*	
Elliot Miller						*
Aled Williams						
Kataya Miura					Ian McMurtrie	
Damon Turner						
Hugh Parry						
David Hopkins						
OTHER ATTENDEES						
Greg Lloyd		Barmouth Restricted Fund	Barmouth RF			
Jo Kelso						

**Indicates where Bids Panel members who were unable to attend the meeting considered the bids submitted and provided comments in advance of the meeting.*

	Attended
	Deputy Attended
	Apologies Received
	No longer member

BURSARY PANEL REPORT TO CHARITY COMMITTEE

Charitable Funds Meeting Date	03 July 2025
Bursary Panel Meeting Date	14 April 2025
Chair	Jo Kelso, Head of Workforce Education & Development

KEY ESCALATION AND DISCUSSION POINTS

ALERT

(Alert the Committee to areas of escalation)

1. No items to Alert

ADVISE

(Detail any areas of on-going monitoring, approvals, or new developments to be communicated)

2. The Bursary Panel was convened to review the Terms of Reference. These have been revised and are presented to the Charity Committee for approval.
3. The Bursary Panel confirmed the opening of the first of two proposed Bursary Rounds for 2025. Providing a second round will depend on funds remaining unspent from the first round. An extended window was opened for submissions supported by a sustained promotion across a number of communications channels to engage widely. The opportunity closed on 09.06.2025 with a total of 35 submissions lodged. Scoring is due to take place in the next 2 weeks.

ASSURE

(Detail here any areas of assurance the Panel has received)

4. The Bursary Panel continues to:
 - a. Act within its powers.
 - b. Act honestly and with good intentions, and only in the charity's interest.
 - c. Be sufficiently informed, taking any necessary advice.
 - d. Take account of all relevant factors.
 - e. Ignore irrelevant factors.
 - f. Manage conflicts of interest.
 - g. Make a decision that is within a range of decisions that the panel could make.

RISKS

5. Risks Discussed: None
6. New Risks Identified: None



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PANEL AGENDA FOR XX JULY 2025 MEETING

1. Scoring of Round 1 2025/26 submissions	2.
3.	4.

Name	28.04.23	Interim funding arrangements in place whilst Trust Charity is revised	03.04.2024	13.01.2025	14.04.2025			
Jo Kelso	Green			Green	Green	Green		
Judith Bryce	Green			Black	Black	Green		
Jill Gill	Red			Red	Black	Black		
Bernie Mitchell	Green			Green	Red	Green		
Jessica Price	Green			Green	Green	Green		
James Gough	Green			Green	Green	Red		
Kerry Robertshaw	Green			Green	Black	Black		
Hannah Lowther	Black			Black	Green	Green		
Faz Tahir	Red			Red	Black	Black		
Hugh Parry	Red			Green	Red	Red		
Damon Turner	Green			Green	Green	Green		
Marcus Viggers	Red			Green	Green	Green		
Claire West	Green			Green	Green	Green		
Sian Jones	Black			Black	Green	Green		
Luke Watkins	Green			Green	Red	Red		
Andrew Morgan	Green			Green	Green	Green		
Martin Mulholland	Green			Green	Green	Green		
David Hopkins					In attendance			
Deb Armstrong					Red			

Green	Attended
Yellow	Deputy attended
Red	Apologies received
Black	No longer member



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BURSARY PANEL TERMS OF REFERENCE

TO BE APPROVED BY CHARITY COMMITTEE ON 03 July, 2025

1. PURPOSE BACKGROUND

1.1. The Bursary Panel (the "Panel") is a formal group established by the [Charitable Funds Committee](#) to consider and approve applications in respect of the Trust's charitable funds.

1.2. The Panel will ensure that there is a consistent and equitable approach to how funds are awarded and to the level and types of expenditure the fund supports.

1.3. The Panel will also consider opportunities to promote the scheme to all staff in the Trust.

1.4. It will ensure that all funding decisions align with local and national charity fund guidance by applying the [Healthcare Financial Management Association \(HFMA\) guidance Using NHS Charitable Funds](#), and the [HFMA guidance on Charitable Expenditure on Staff](#), when making decisions on applications and allocation of funding.

1.5. The Panel must comply with the [Charity Commission requirements and regulations to ensure good governance is adhered to and that activity is appropriate, fair, and consistent in fund distribution](#). The Panel will be responsible for ensuring that processes comply with [Charity Commission requirements at all times](#).

1.1-1.6. The Panel will operate within the approved [Scheme of Delegation](#), ensuring that funding decisions are made at the appropriate level of authority. It should escalate bids exceeding delegated financial limits of £3,000 to the [Executive Leadership Team \(ELT\)](#) for endorsement and the [Charity Committee](#) for final approval.

1.2. The Panel will report regularly to the [Charitable Funds Committee](#), providing assurances and updates on the use and application of the charitable funds. The Panel will also monitor and report progress on how new processes are working and recommend to the [Committee](#) any required changes to procedures and guidance.

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- ~~Consider and approve bursary applications in respect of the Trust's charitable funds (up to £5,000 per application);~~
- ~~Ensure that all applications are treated consistently and equitably;~~
- ~~Provide regular reports and assurance to the Charitable Funds Committee on use and application of the fund and performance in respect of spending plans;~~
- ~~Ensure the Trust complies with Charity Commission requirements;~~
- ~~Consider current practices and procedures in respect of charitable funds and recommend to the Charitable Funds Committee any required changes;~~
- ~~Any other matter in relation to the Panel's purpose and responsibilities.~~

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3. MEMBERSHIP

3.1. The membership of the Panel:

- Head of Workforce Education Transformation & Development (Chair)
- Finance Officer - Charitable Funds Accountant
- Assistant Director of Operations – National Ops & Support
- Head of Education, Professional & Clinical Practice (Nursing)
- Head of Culture & OD
- Head of Quality Improvement
- Professional Development Lead – Advanced Practice
- Trade Union Partners (3)

Representatives from other directorates to be co-opted as appropriate.

- Any other representative as determined by the Panel.

3.2 Members may send deputies in their absence who will act with their full authority. All deputies must be notified to the Chair in advance of the meeting. The Chair will appoint another member to chair meetings when they are absent. The Head of Education Transformation will be the Chair of the Panel. If not present, the Chair may nominate any other member to chair the meeting in their absence.

3.3 Members who could be subject to a conflict of interest by virtue of a submission from a direct report, must abstain from scoring the submission.

3.2. Members may send deputies in their absence who will act with their full authority.

3.4 Invitations may be extended to others to attend all or part of a meeting, both from within or outside the organisation, to assist with its discussions on any particular matter. The Chair must be notified of any such invitations in advance of the meeting. Others may be invited to attend meetings as and when appropriate as determined by the Chair.

4. QUORUM OPERATING ARRANGEMENTS

4.1. The quorum of any meeting of the Panel should be at least 3 core members and the Chair (or someone deputising as Chair) and should include a Trade Union Partner.

4.1. The Chair and at least 3 members, one of whom must be a Trade Union Partner, must be present to achieve a quorum

4.2. Meetings will be held at least twice a year (to support Bursary Panel rounds) or as otherwise directed by the Chair.

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4.3. The agenda and papers for the meeting will be uploaded to the Teams site at least 3 working days before the meeting. Any papers submitted past that day will only be added with the approval of the Chair.

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4.4. The Bursary Panel will be supported administratively by the Chair's directorate support team and will:

a) Arrange meetings and coordinate meeting logistics including providing invitations to members.

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b) Collaborate with the Chair to develop the agenda.

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c) Call for, collate, and distribute meeting papers.

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d) Maintain a Bursary Panel Teams channel including an up-to-date repository of the terms of reference, actions and decisions logs, and meeting papers which are accessible to all members.

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e) Serve as a point of contact for members.

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f) Notify the Chair ahead of a meeting of attendees (including that of non-members) and apologies received.

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g) Maintain an actions and decision log ensuring that all actions are updated ahead of meetings.

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h) Maintain the register of bursary applications and outcomes.

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i) Prepare correspondence to inform applicants of the outcome of decisions by the Panel.

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j) Preparing Alert, Advise and Assure (AAA) Reports for submission to the Charity Committee.

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NB: Formal minutes are not necessary for the Panel

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4.2. Members of the Panel must be present in order to be quorate, which includes participating in the meeting from a separate location by means of conference telephone or other communication equipment which allows those participating to hear each other.

5. FREQUENCY OF MEETINGS REPORTING

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5.1 The Bursary Panel shall report to the Charity Committee by way of an Alert, Advise, Assure (AAA) highlight report after each meeting prepared by the Chair. Guidance on the use of the AAA report can be found here AAA Report Guidance (April 2024) Meetings will be held at least twice a year (i.e. following each round of bursary applications).

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4.2. ~~5.2~~ The Chair must ensure appropriate escalation arrangements are in place to alert the Executive Leadership Team of matters in the remit of this group. Meeting agendas, papers and minutes shall be circulated seven days prior to each meeting.

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6. AUTHORITY REVIEW

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6.1. ~~6.1.~~ These Terms of Reference and operating arrangements shall be reviewed annually. The Panel discharges the authority of the Charitable Funds Committee, in respect of the functions detailed in these terms of Reference and in accordance with the limit stated in section 2.1.

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AGENDA ITEM No	12
OPEN or CLOSED	Open
No of ANNEXES ATTACHED	1

Charity Committee – Committee Priorities and Cycle of Business Monitoring report

MEETING	Charity Committee
DATE	3 July 2025
EXECUTIVE	Trish Mills, Director of Corporate Governance/Board Secretary
AUTHOR	Steve Owen, Corporate Governance Officer
CONTACT	Trish.mills@wales.nhs.uk

EXECUTIVE SUMMARY

1. The report updates the committee on progress against its priorities and against the agreed cycle of business.
2. The cycle of business for the committee has been amended in line with the revised terms of reference following the 2024/25 effectiveness review. Reporting frequency was discussed in the April 2025 meeting and has been reflected in the cycle of business for 2025/26.
3. The two priorities for the committee in 2025/26 are:
 - 3.1. Governance of the Bids and Bursary Panels' operating arrangements, including their new terms of reference; and
 - 3.2. A development session for the Corporate Trustee, initially planned for last year, which has now been rescheduled with Withers Worldwide for February 2026 to explore the role of the Corporate Trustee.
4. There are no matters to escalate with respect to the priorities.

RECOMMENDATION:

Members are asked to note the 2025/26 cycle of business monitoring report.

KEY ISSUES/IMPLICATIONS

As set out above

REPORT APPENDICES




Annex 1 – Committee cycle of business monitoring report





REPORT CHECKLIST

Confirm that the issues below have been considered and addressed		Confirm that the issues below have been considered and addressed	
EQIA (Inc. Welsh language)	NA	Financial Implications	NA
Environmental/Sustainability	NA	Legal Implications	NA
Estate	NA	Patient Safety/Safeguarding	NA
Ethical Matters	NA	Risks (Inc. Reputational)	NA
Health Improvement	NA	Socio Economic Duty	NA
Health and Safety	NA	TU Partner Consultation	NA

PAPER	PRE or POST-C'EE FORUM	FREQUENCY	Q1	Q2	Q3	Q4	LEAD	PURPOSE	COMMENT/COMPLIANCE
CHARITY COMMITTEE - CYCLE OF BUSINESS 2025-26									
TERMS OF REFERENCE NOTED IN RED TEXT									
STRATEGY DEVELOPMENT AND DELIVERY									
Initial strategy	ELT/Trustees	One-Off					DPE	Endorsement	Committee will oversee initial strategy development and periodic reviews of strategy. First strategy due in Q2 2025.
Strategy implementation	ELT/Trustees	Bi-annually from Q4					DPE	Assurance	Reporting to be developed in 2025/26 from Q4 but thereafter bi-annually in 2026/27
FUNDRAISING									
Fundraising plan	ELT/Trustees	One-Off					DPE	TBC	Fundraising plan to align to charity strategy and first plan due in Q2 2025
Fundraising implementation	ELT/Trustees	Each Meeting from Q3					DPE	Assurance	Reporting will be combined with charity performance report from Q3 2025/26 (not separate report) and re-evaluate in 2026/27
CHARITABLE FUNDS AND INVESTMENT									
Income and expenditure budget	ELT/Trustees	Annually					HoC/EDOF	Endorsement	For approval by Corporate Trustee
Financial accounts and annual report	ELT/Trustees	Annually					EDOF	Endorsement	For final submission to Charities Commission by 31 January each year.
Auditors report on accounts	ELT/Trustees	Annually					Auditors	Assurance	Independent examination by Audit Wales
Finance Update	ELT	Each Meeting					EDOF	Assurance	Includes income and expenditure, and investment performance
Charity Performance Update	ELT	Each Meeting					DPE	Assurance	To include grants and reporting on fundraising as above (see note 4)
Sub-committee highlight (AAA) reports	Relevant Committee	Each Meeting					Relevant Chair	Assurance/Escalation	Bids Panel and Bursary Panel
Lived experience Bids or Bursary Panel	Relevant Committee	Each Meeting					Relevant Chair	Assurance	Template required: see note 3 and note 4
Applications as appropriate from time to time	Bids/Bursary Panel	Ad Hoc					Relevant Director	Approval	See note 3 re demonstrating adherence to guidance on public benefit
Investment strategy	ELT/Trustees	Annually					EDOF	Approval	As charity strategy develops an investment strategy to be developed also, together with appointment of external fund managers. Review this in 2026/27. In the interim the finance report serves as an update on the investment
Investment report	TBC	Each Meeting					EDOF	Assurance	Report encompassed in finance report for 2025/26 as above
POLICY									
Set reserves policy annually	N/A	Annually					EDOF	Approval	See note 4
Policies for review and approval	Policy Group/ELT	Ad Hoc					Relevant Director	Approval	To include fundraising policy, investment policy, etc
RISK AND AUDIT									
Charity Risk Register	Trustees	Each meeting					DCG	Assurance	
Audit tracker reporting	ADLT	Each meeting					DCG	Assurance	Only where charity audits are in place
Audits within purview of Committee	Audit Committee	Ad Hoc					Relevant Director	Assurance	
GOVERNANCE									
Committee effectiveness review annual report	Audit/Board	Annually					DCG	Approval	
Review of Terms of Reference	Audit/Board	Annually					DCG	Approval	
Committee Cycle of Business	N/A	Annually					DCG	Approval	
Committee Cycle of Business Monitoring	N/A	Each Meeting					DCG	Approval	
Committee Review of Annual Priorities	None	Quarterly					DCG	Assurance	
PROMPTS									
External Reports	n/a	As required					TBC	TBC	

EDOF = Executive Director of Finance
DPE = Director of Partnerships and Engagement
DCG = Director of Corporate Governance/Board Secretary

Key: Pre-agenda setting
 Cycled for each meeting
 Ad hoc item - prompt for agenda setting
 Reporting developing

Key: Post-agenda setting
 Presented as cycled
 Ah hoc / item considered - not programmed
 Item deferred
 Reporting developing

No.	General	These cycles are developed with reference to the specific lines of the TOR for this Committee. This methodology seeks to ensure that all responsibilities in the TOR are discharged by the Committee on behalf of the Board.
1	Approval of expenditure	When making decisions about charitable expenditure Bids Panel, Bursary Panel, CC and Trustees must have regard to the guidance on public benefit and be able to demonstrate that in decisions - see TOR 4.2
2	Lived Experience	It was agreed in the October Committee agenda setting meeting that it was necessary to develop a template for the lived experience items so that contributors understand what is required. Additionally, it was agreed that if it isn't possible for an appropriate experience to be agreed then it wouldn't be programmed; alternating meetings would be acceptable.
3	Reporting	Reporting should include tangible examples of how funds have benefited patients and staff.
4	Reserves policy	Reserves policy should be set annually. This is not an actual policy document, but a policy position on reserves. See CC 2 April 25 meeting discussion on reserves policy.