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UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT BY TRUST BOARD COMMITTEE TO TRUST BOARD

DATE OF TRUST BOARD MEETING: 7 September 2017

COMMITTEE: Charitable Funds Committee (CFC)  
CHAIRMAN: Mr A Johnson, Non-Executive Director  
DATE OF COMMITTEE MEETING: 3 August 2017

**RECOMMENDATIONS MADE BY THE COMMITTEE FOR CONSIDERATION BY THE PUBLIC TRUST BOARD:**

- Minute 30/17 (Emergency Floor Project Report) – that the recommendations of the Charitable Funds Committee in relation to this item be supported and formally approved by the Trust Board (as Corporate Trustee).

**OTHER KEY ISSUES IDENTIFIED BY THE COMMITTEE FOR NOTING BY THE PUBLIC TRUST BOARD:**

- None.

DATE OF NEXT COMMITTEE MEETING: 5 October 2017

Mr A Johnson – Non- Executive Director and Chairman of the CFC  
1 September 2017

## UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

### MINUTES OF THE CHARITABLE FUNDS COMMITTEE MEETING HELD ON THURSDAY 3 AUGUST 2017 AT 2.00PM IN SEMINAR ROOMS A/B, CLINICAL EDUCATION CENTRE, LEICESTER GENERAL HOSPITAL

**Present:** Mr A Johnson – Non-Executive Director (Chair)  
Mr B Patel – Non-Executive Director  
Mr K Singh – Trust Chairman  
Mr M Traynor – Non-Executive Director  
Mr P Traynor – Chief Financial Officer

**In Attendance:** Mrs G Belton – Corporate and Committee Services Officer  
Ms J Burdett – Matron, ESM (for Minute 30/17)  
Mr T Diggle – Head of Fundraising  
Ms J Edyvean – Out-Patient Transformation and Reconfiguration Programme Manager (for Minute 30/17)  
Mr D Gorrod – Patient Partner (non-voting member)  
Mrs M Hough – Administration and Legacy Manager (for Minute 36/17/2)  
Dr E Laithwaite – Consultant, ESM (for Minute 30/17)  
Ms T Madge – Project Manager, Strategy (for Minute 30/17)  
Ms L Naylor – Senior Project Manager (for Minute 30/17)  
Mr N Sone – Financial Controller / Charity Finance Lead  
Mr S Ward – Director of Corporate and Legal Affairs  
Mr M Wightman – Director of Communications, Integration and Engagement  
Ms J Woolley – Charity Finance Manager

### RECOMMENDED ITEMS

#### **30/17 EMERGENCY FLOOR PROJECT REPORT**

Ms J Edyvean, Out-Patient Transformation and Reconfiguration Programme Manager and colleagues attended to present paper C, which provided a position statement on charitable funds requirements in relation to the delivery of Phase 1 and Phase 2 of the Emergency Floor (EF) Project. A summary of the final account for Phase 1 enhancements, with supporting evidence, was provided in order that funds could now be drawn down. Expenditure against charitable funds commitments for Phase 1 was £582,010.32. The commitment against the £300,000 Thomas Cook Children's Charity donation was £254,495.46 leaving a small underspend of £45,504.54. The commitment in the delivery of Phase 1 against the original £350,000 donated by the RVS was £327,514.86 (including the commitment to funding Pearson Lloyd signage as agreed by the Charitable Funds Committee in February 2017), resulting in a remaining balance of £22,485.14 to contribute towards Phase 2 Frailty enhancements.

A business case requesting £360,475.86 (excluding VAT on some items) for Phase 2 enhancements was provided at Appendix A to the report. This was to ensure that the benefits identified in the Full Business Case through the delivery of a frailty friendly Emergency Floor (EF) that responded to the growing demand for older people's services and the associated improvements in patient experience, were fully realised.

The report sought the following from the Charitable Funds Committee:-

- a) approval of the request to draw down funds against the Thomas Cook Children's Charity and RVS donations to the value of £174,213.46 and £327,514.86 respectively (noting the supporting evidence associated with Phase 1 expenditure and the level of confidence that had been confirmed as sufficient to satisfy audit requirements as well as information that the charities might require);
- b) support for the request for funding to a final value of £360,475, excluding VAT on some items, for Phase 2 enhancements;
- c) to note the small underspend against the Thomas Cook Children's Charity donation of £45,504.54;
- d) agreement that the remaining balance of £22,485.14 RVS funds should contribute

towards the request for Phase 2 Frailty enhancements, and  
e) to note that £10,000 had been pre-committed funding, and agreement to underwrite the risk on expenditure of £239,400 in order that the infrastructure and construction plan could proceed as planned.

In discussion on this item, members:

- (i) sought assurance that the items of expenditure did represent enhancements – Ms Edyvean confirmed this to be the case, noting that they were above and beyond standard decoration and specifically took account of the needs of vulnerable and frail patients;
- (ii) queried the level of risk around the project – the Head of Fundraising considered this represented a fairly low risk to the Charity given the opportunities available in terms of groups / charities from which Leicester Hospitals Charity could seek assistance. The issue was the timeframe within which such assistance could be accessed, hence the request for the underwriting of the risk on expenditure (members noted the potential need, therefore, not to commit this funding elsewhere until EF2 had alternative confirmed funding);
- (iii) noted the Director of Communications, Integration and Engagement's comments regarding the need for the models of care within ED to change at the same time and pace as the environment – in response, Dr Laithwaite acknowledged that processes did need to change, however fairly robust models of care were currently in place and there needed to be co-location for these to work. Dr Laithwaite and Ms Madge noted the work currently on-going to ensure that the frailest patients were appropriately directed to the right services and noted that GPAU would change the way of working from November 2017. Ms Madge noted the intention of the team to demonstrate the impact of the Full Business Case (FBC), in terms of measurable indicators. Accordingly, she noted that the team would be in a position to submit a report detailing the impact of the FBC (for the purpose of evidence-basing the investment) at a future CFC meeting in approximately one year's time;
- (iv) sought assurance that specific needs were being catered for in the progression of this project – in response, Ms Madge drew members' attention to page 8 of the business case and noted that a consultation event had taken place and the team had worked with different groups for this purpose. This would be re-visited as part of the evaluation. Dr Laithwaite also noted that she was meeting with patient focus groups, and
- (v) in concluding discussion on this item, the CFC Chairman confirmed that (1) subject to Trust Board approval, and specifically in relation to EF Phase 1, the Committee approved the request to drawn down funds against the Thomas Cook Children's Charity and RVS donations to the value of £174,213.46 and £327,514.86 respectively (2) subject to Trust Board approval, the Committee supported the request for funding to a final value of £360,475 excluding VAT on some items, for Phase 2 enhancements (3) noted that there remained a small underspend against the Thomas Cook Children's Charity of £45,504.54 (use of this underspend towards phase 2 would not be sought as phase 2 did not encompass the treatment / care of children) (4) agreed that the remaining balance of £22,485.14 RVS funds should contribute towards the request for Phase 2 Frailty enhancements (to be managed by the Head of Fundraising and in accordance with the donor's wishes) (5) noted that £10,000 had been precommitted funding and agreed to underwrite the risk on expenditure of £239,400 in order that the infrastructure and construction plan could proceed as planned and (5) agreed that the Director of Communications, Integration and Engagement would draft a letter to the EF Team, on behalf of the CFC Chairman, referencing the expectation of the Committee that the investment and enhancements would also lead to a change to relevant models of care.

**Project  
Manager,  
Strategy**

The CFC Chairman thanked the EF team for their attendance at today's meeting and for their jointly authored report, which had provided complete clarity.

**Recommended** – that (A) the contents of this report be received and noted,

(B) the request to draw down funds against the Thomas Cook Children’s Charity and RVS donations to the value of £174,213.46 and £327,514.86 respectively be approved (noting the supporting evidence associated with Phase 1 expenditure and the level of confidence that had been confirmed as sufficient to satisfy audit requirements as well as information that the charities might require);

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(C) the request for funding to a final value of £360,475, excluding VAT on some items, for Phase 2 enhancements, be supported,

HoF/PM(S)

(D) it be agreed that the remaining balance of £22,485.14 RVS funds should contribute towards the request for Phase 2 Frailty enhancements (to be managed by the Head of Fundraising, as appropriate, and in accordance with donor’s wishes),

HoF

(E) it be noted that there remained a small underspend against the Thomas Cook Children’s Charity donation of £45,504.54,

(F) it be noted that £10,000 had been pre-committed funding and the underwriting of the risk on expenditure of £239,400 be agreed, in order that the infrastructure and construction plan could proceed as planned,

(G) the Project Manager (Strategy) be requested to submit a report detailing the impact of the FBC (for the purpose of evidence basing the investment) at a future CFC meeting, and

PM(S)

(H) the Director of Communications, Integration and Engagement be requested to draft a letter to the EF Team on behalf of the CFC Chairman referencing the expectation of the Committee that the investment and enhancements would also lead to a change to the relevant models of care.

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### **RESOLVED ITEMS**

#### **31/17 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Col (Ret’d) I Crowe, Non-Executive Director, Mr R Moore, Non-Executive Director and Ms J Smith, Chief Nurse.

#### **32/17 MINUTES**

**Resolved** – that the Minutes of the 1 June 2017 Charitable Funds Committee meeting (papers A1 and A2 refer) be confirmed as a correct record.

#### **33/17 MATTERS ARISING FROM THE MINUTES**

##### **33/17/1 General Matters Arising**

Paper B detailed both the actions from the most recent meeting, and also any which remained outstanding from previous Committee meetings. Discussion took place regarding the specific entries outlined below.

- Minute 23/17 of 1 June 2017 (relating to the action for the Director of Corporate and Legal Affairs to contact the Director of Estates and Facilities to seek confirmation of his support for application 6352 as submitted to the Charitable Funds Committee on 2 February 2017) – the Director of Corporate and Legal Affairs reported verbally to advise that he had contacted the Director of Estates and Facilities, who had confirmed his support for this application, subject to the CMG contacting the Estates and Facilities department in relation to taking forward the contemplated building works. It was agreed that this action could be RAG-rated ‘5’ in the next iteration of the matters arising log and then closed accordingly, and
- Minute 25/17/4 of 1 June 2017 (relating to the Head of Fundraising’s planned

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meeting with the Assistant Chief Nurse and the Reconfiguration Programme Director to discuss issues associated with the Golden Appeal) – the Head of Fundraising noted that initial discussions had taken place and further discussions would be held at an appropriate future point when there was further clarity in relation to bed numbers at the LRI.

**Resolved – that (A) the matters arising report (paper B refers) be confirmed as a correct record and any associated actions, as noted above, be appropriately progressed, and**

**(B) verbal updates on progress provided at today’s meeting be incorporated into the next iteration of the matters arising log.**

CCSO

33/17/2 Matter Arising relating specifically to Minute 25/17/1 from 1 June 2017

**Resolved - that this Minute be classed as confidential and reported in private accordingly.**

**34/17 APPROVALS**

34/17/1 Items for Approval

Paper D outlined the grant applications received since the June 2017 Charitable Funds Committee meeting, noting that all bids received had been pre-reviewed as per current guidelines. The Charity Finance Lead considered that all applications fell within the scope of the funds, were affordable, and had been appropriately authorised by the fund managers and CMG leads.

Applications totalling £129,863 had been approved by the Charity Finance Lead under the scheme of delegation (they did not, therefore, require additional Charitable Funds Committee approval), and were detailed in appendix 1 of paper D.

Appendix 2 detailed applications that had been rejected.

The Committee undertook detailed consideration of the following new applications for funding (sections 2.4 and 2.5 of paper D refers):-

- (i) application 6604 (appendix 3) was an application for £21,285 from the Surgery Restricted Legacy Fund to fund a Research Nurse within the Thoracic Surgery service – the Committee approved this application on the basis of a one year fixed term appointment only (after which time the post would need to be funded from another source or removed);
- (ii) application 6605 (appendix 4) was an application for £23,963 from an Oncology fund to create an oncology pre-assessment clinic – this was approved;
- (iii) application 6586 (appendix 5) was an application for £25,704 from a Renal fund to fund the cost of an Attitudes and Beliefs Study – following consideration, the Committee did not approve the application at this stage, but agreed to invite the author (and relevant colleagues) to the next meeting of the Charitable Funds Committee to explain the purpose of this study and respond to questions from CFC members (such as why the study only focussed on attitudes and beliefs to organ donation specifically within the Sikh community, rather than including all South Asian communities and how this study linked in with the group within UHL who promoted donorship within the BME community) in order that this application could be further considered;
- (iv) application 6610 (appendix 6) was an application for £40,824 from the Ward 27 OurSpace fund to fund patient monitoring equipment – this was approved, subject to confirmation of support from the Medical Equipment Executive and inclusion of on-going maintenance costs in relation to this equipment within the CMG budget;
- (v) application 6609 (appendix 7) was an application for £20,544 from the Heartwise Fund to fund Heartwise project costs – this was approved;
- (vi) application 6476 was an application for £25,908 from general purpose

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charitable funds to fund a CT Body Phantom – this was approved on the basis of £20k being sourced from the relevant restricted purpose research fund and £6k from general purpose charitable funds. In discussion on this particular application, it was also agreed that the Director of Communications, Integration and Engagement would brief Mr Archer, Head of Operations (CSI) of the potential opportunity to income-generate through the loan of CT Body Phantom to other Trusts;	<b>CFL</b>
(vii) application 6582 (appendix 9) was an application for £33,061 from general purpose charitable funds for an Autism LiA Project – following discussion, this was approved on a one-year basis only (subject to a fixed term contract or secondment), and	<b>DCIE</b>
(viii) application 6569 (appendix 10) was an application for £9,322 from general purpose charitable funds for mini PCNL instruments – the Committee did not approve this application at this stage, but agreed to consider it again outwith the meeting (via the agreed process for approvals outwith the CFC meeting) upon receipt of confirmation of CMG support / Medical Equipment Executive support and confirmation of the existence (or otherwise) of restricted funds to utilise for this purpose.	<b>CFL</b>
Section 3.1 of the report detailed two short term funds (Q843 for a fundraising appeal to support a study combining physical activity and peer support to improve the lives of women who had undergone treatment for cervical cancer, which had an anticipated closure date of January 2021 and Q844 for a fundraising appeal for the expansion of the diabetes centre at the LGH, which had an anticipated closure date of June 2019) the establishment of which had been requested and required the approval of the Charitable Funds Committee for such. The Committee approved the establishment of both funds for closure on the dates specified, subject to any future requests for extension.	<b>CFL</b>
<b><u>Resolved</u> – that (A) the contents of paper D and its appendices be received and noted;</b>	
<b>(B) application numbers 6604 and 6582 be approved on a one-year basis only;</b>	<b>CFL</b>
<b>(C) application numbers 6605 and 6609 be approved;</b>	<b>CFL</b>
<b>(D) application 6610 be approved, subject to confirmation of MEE support and inclusion of on-going maintenance costs within the CMG budget,</b>	<b>CFL</b>
<b>(E) application number 6476 be approved on the basis of £20k being sourced from the relevant restricted purpose research charitable fund and £6k from general purpose charitable funds,</b>	<b>CFL</b>
<b>(F) (also in relation to application 6476) the Director of Communications, Integration and Engagement be requested to brief Mr Archer, Head of Operations (CSI) of the potential opportunity to income-generate through the loan of the CT Body Phantom to other Trusts,</b>	<b>DCIE</b>
<b>(G) application 6586 not be approved at the current time, but the author (and relevant colleagues) to be invited to attend the next meeting of the CFC to explain the purpose of the study and respond to questions from CFC members in order that this application could be further considered,</b>	<b>CFL</b>
<b>(H) application 6569 not be approved at this stage, but agreement be given to considering it again outwith the meeting (via the agreed process for approvals outwith the CFC meeting) upon receipt of confirmation of CMG support / Medical Equipment Executive support and confirmation of the existence (or otherwise) of restricted funds to utilise for this purpose, and</b>	<b>CFL</b>
<b>(E) the establishment of new funds Q843 and Q844 be approved.</b>	<b>CFL</b>

34/17/1 George Davies Vascular Surgery Fund

The Head of Fundraising presented paper J, which documented the major gift from George Davies to undertake research into vascular treatment, particularly involving lower limb loss as a complication of diabetes. Working with the vascular team, Leicester Hospitals Charity had agreed that part of the gift would be used to fund a circulation assessment unit at the Glenfield Hospital. The donor had requested regular progress reports during the lifetime of the project (5 years), without which funds would not be forthcoming and the Vascular Team were aware of the need to provide prompt reports. All parties had also agreed that this project would not place any cost pressures on the Trust's revenue position. The bulk of the funding was for staff (as detailed in the business case attached to the report) however there was a requirement to purchase a scanner for the clinic at a quoted price of £43,000, which was fully supported by the Medical Equipment Executive.

Following discussion, including the seeking of appropriate assurances regarding the robustness of the business case and the close involvement of the CMG, the Committee approved the purchase of the scanner at a cost of £43,000, to allow the clinic to be operational by the end of September 2017.

**Resolved** – that (A) the contents of this report be received and noted, and

**(B) the purchase of a scanner at a cost of £43,000 from this restricted purpose fund be approved.**

35/17 **CHARITY GOVERNANCE**

35/17/1 Charity Fund Investment Managers Report

The Charity Finance Lead presented paper E, which detailed an update from the Charity's Investment Managers and outlined the performance of the Charity's investment portfolio since the previous meeting and identified any risks and opportunities for the portfolio going forward. The monthly position statement for June 2017 was included as appendix 1 to the report and a slide pack from a recent training session was included as appendix 2.

Members received and noted the contents of this report. In discussion, the Chief Financial Officer / Charity Finance Lead were requested to brief all CFC members regarding the advanced investment training to be held on September 2017, and thereafter agree the nominated attendees from UHL.

CFO/CFL

**Resolved** – that (A) the contents of this report be received and noted,

**(B) the Chief Financial Officer / Charity Finance Lead be requested to brief all CFC members regarding the advanced investment training to be held on September 2017, and thereafter agree the nominated attendees from UHL.**

CFO/CFL

35/17/2 Report from the Charity Finance Lead

**Resolved** – that this Minute be classed as confidential and reported in private accordingly.

35/17/3 Finance and Governance Report

The Charity Finance Lead presented paper F, which provided an update on the Charity's financial position and the general purposes fund for the month ending 30 June 2017 (the latter being provided within appendix 1 to the report).

A query was raised in relation to progress with the Arts and Artefacts post discussed previously at the Committee, in response to which it was noted that an update report was due to be scheduled for the August 2017 ESB meeting.

The Head of Fundraising noted the need to revise the plan such that it noted the latest position in respect of the Golden Appeal.

**Resolved – that the contents of this report be received and noted.**

**36/17 FUNDRAISING**

36/17/1 Report from the Head of Fundraising

**Resolved – that this Minute be classed as confidential and reported in private accordingly.**

36/17/2 Fundraising Update – Performance Report

The Head of Fundraising presented paper H, which referenced recent fundraising and promotional activities, plus upcoming events and plans with individual contributions made to the report by members of the Charitable Fundraising Team. Particular points of note from the report included the new Charity shop at the LGH which was due to open in August 2017, with an official opening in September 2017. This marked a new development in the Trust's ability to secure unrestricted income. Particular discussion took place regarding the reclaiming of Gift Aid and till systems which could assist in this respect. As requested at a previous CFC meeting, income relating to the Staff Lottery (and the associated number of participants) had been reflected separately within the report.

In discussion, the Head of Fundraising and Charity Finance Lead were requested to ensure reconciliation between the financial figures presented in the Finance and Governance report and Fundraising Performance report (ensuring both were measuring against the same plan). The Head of Fundraising was also requested to include an appendix within future iterations of the Fundraising Performance report which listed all the major on-going appeals.

Mrs M Hough, Administration and Legacy Manager attended to give a presentation to the Committee on the specific area of work she undertook for the Charity, which was legacy fundraising (a copy of which was appended to paper H). In discussion, Mr Traynor, Non-Executive Director, suggested a possible contact for Mrs Hough to follow up in her work, who already had an association with the Trust. Making relevant connections through Solicitors and also the Chaplaincy (where appropriate) was also discussed. In further discussion, note was made of the need for organisational-wide thinking on celebrations for the NHS at 70.

**Resolved – that (A) the contents of this report and related presentation be received and noted,**

**(B) the Head of Fundraising and Charity Finance Lead be requested to ensure reconciliation between the financial figures presented in the Finance and Governance report and Fundraising Performance report (ensuring both were measuring against the same plan), and**

HoF/CFL

**(C) the Head of Fundraising be requested to include an appendix within future iterations of the Fundraising Performance report which listed all the major on-going appeals.**

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36/17/3 Post Project Grant Evaluation

The Head of Fundraising presented paper I, which detailed a post project evaluation of application 6190 (Harnessing the Power of Social Media – Combining Medical Education with Medical Entertainment).

Members received and noted the contents of this report, noting the positive impact of the project.



**Resolved** – that the contents of this report be received and noted.

**37/17 ANY OTHER BUSINESS**

**Resolved** – that there were no additional items of business.

**38/17 DATE OF NEXT MEETING**

**Resolved** – that the next meeting of the Charitable Funds Committee be held on **Thursday 5 October 2017 from 2pm in Seminar Rooms A&B, Clinical Education Centre, Leicester General Hospital.**

The meeting closed at 4.27pm.

Gill Belton  
Corporate and Committee Services Officer

**Cumulative Record of Members' Attendance (2017-18 to date):**

*Voting Members*

<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% attendance</i>	<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% attendance</i>
<i>S Crawshaw</i>	2	0	0	<i>K Singh</i>	3	3	100
<i>I Crowe</i>	3	2	67	<i>J Smith</i>	3	1	33
<i>A Johnson (Chair)</i>	3	2	67	<i>M Traynor</i>	3	3	100
<i>R Moore</i>	3	1	33	<i>P Traynor</i>	3	3	100
<i>B Patel</i>	3	3	100				

*Non-Voting Members*

<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% attendance</i>	<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% attendance</i>
<i>T Diggle</i>	3	3	100	<i>C Sutton</i>	3	0	0
<i>D Gorrod</i>	3	3	100	<i>S Ward</i>	3	3	100
<i>N Sone</i>	3	3	100	<i>M Wightman</i>	3	3	100