

# Charitable Funds

Fri 23 September 2022, 10:00 - 12:00


Teams

## Agenda

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10:00 - 10:00    **1. PRELIMINARY MATTERS**

0 min

 CF Committee Agenda 230922.pdf (2 pages)

**1.1. Welcome and apologies**

**1.2. Declarations of interest**

**1.3. Minutes from the previous meeting held on 14 June 2022 for approval**

 CF\_Item\_1.3a\_Charitable Funds Unconfirmed Minutes\_14June22.pdf (8 pages)

**1.4. Charitable Funds Action Log**

 CF\_Item\_1.4\_Action Log.pdf (4 pages)

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10:00 - 10:00    **2. ITEMS FOR APPROVAL/RATIFICATION/DECISION**

0 min

**2.1. Bid for Approval**

 CF\_Item\_2.1\_Bids for Approval.pdf (7 pages)

**2.2. NHS Charities Together Funding: COVID Response fund approved applications (for ratification) & Grant Update**

 CF\_Item\_2.2\_Applications to COVID response fund.pdf (13 pages)

**2.3. Expenditure approved under delegated authority since the last meeting (for ratification)**

 CF\_Item\_2.3\_Ratification of expenditure approved by those with relevant delegations Apr 22 - Aug 22.pdf (4 pages)

**2.4. Charity Strategy 2022-2025**

 CF\_Item\_2.4\_Charity Strategy.pdf (21 pages)

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10:00 - 10:00    **3. ITEMS FOR DISCUSSION**

0 min

**3.1. RIIC Hub innovation fund proposal**


 CF\_Item\_3.1\_RIC Hub Charitable Funds Proposal.pdf (15 pages)

**3.2. Charity activity & income report**

 CF\_Item\_3.2\_Charity Activity Report.pdf (16 pages)

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### 3.3. Charitable funds financial summary report

 CF\_Item\_3.3\_Financial Summary Report as at 300622.pdf (10 pages)

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10:00 - 10:00  
0 min

## 4. ITEMS FOR INFORMATION


### 4.1. Investment manager update report

 CF\_Item\_4.1\_22 Q2 Trustee Report - SECURE.pdf (27 pages)

### 4.2. Project evaluations

 CF\_Item\_4.2\_a\_HORIZON draft evaluation framework JW 280622.pdf (10 pages)

 CF\_Item\_4.2\_b\_HORIZON Project Progress UPDATE SUMMARY Report 27 Jun 2022.pdf (15 pages)

 CF\_Item\_4.2\_c\_RESEARCH MIDWIFE Charitable funds Evaluation form template v1 (002) 2022.pdf (10 pages)

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10:00 - 10:00  
0 min

## 5. OTHER MATTERS

### 5.1. Any other urgent business

### 5.2. Date of next meeting:

7 December 2022 via Microsoft teams

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**POWYS TEACHING HEALTH BOARD  
CHARITABLE FUNDS COMMITTEE  
FRIDAY 23 SEPTEMBER 2022  
10:00AM - 12.00PM  
VIRTUAL MEETING**



**GIG  
CYMRU  
NHS  
WALES**

Bwrdd Iechyd  
Addysgu Powys  
Powys Teaching  
Health Board

**AGENDA**

Item	Title	Timing	Presenter
<b>1</b>	<b>PRELIMINARY MATTERS -</b>		
1.1	Welcome and apologies	N/A	Chair
1.2	Declarations of interest	N/A	All
1.3	Minutes from the previous meeting for ratification		Chair
1.4	Action log from previous meetings		Chair / Charity Manager
<b>2</b>	<b>ITEMS FOR APPROVAL/RATIFICATION/DECISION -</b>		
2.1	Bid for Approval		Charity Manager
2.2	NHS Charities Together funding 1. COVID response fund approved applications (for ratification) 2. Grant updates		Charity Manager
2.3	Expenditure approved under delegated authority since the last meeting (for ratification)		Head of Financial Services
2.4	Charity Strategy 2022-25		Charity Manager
<b>3</b>	<b>ITEMS FOR DISCUSSION -</b>		
3.1	RIIC Hub innovation fund proposal		Charity Manager

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3.2	Charity activity & income report		Charity Manager
3.3	Charitable funds financial summary report		Head of Financial Services
4	<b>ITEMS FOR INFORMATION –</b>		
4.1	Investment manager update report		Brewin Dolphin
4.2	Project evaluations		Charity Manager
5	<b>OTHER MATTERS –</b>		
5.1	Any other urgent business	Oral	Chair
5.2	Date of the next meeting: <ul style="list-style-type: none"> <li>7<sup>th</sup> December 2022</li> </ul>		

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**UNCONFIRMED**

**MINUTES OF THE CHARITABLE FUNDS COMMITTEE MEETING  
HELD ON TUESDAY 14 JUNE 2022  
VIA MICROSOFT TEAMS**

**Present:**

Vivienne Harpwood  
Rhobert Lewis  
Frances Gerrard  
Pete Hopgood  
Claire Madsen

Chair (Committee Chair)  
Independent Member (Committee Vice Chair)  
Independent Member (University)  
Director of Finance and IT  
Director of Therapies and Health Science

**In Attendance:**

Abe Sampson  
Paula Walters  
Sarah Pritchard  
Andrew Gough  
Tom Richards  
Shania Jones  
Alice Rushby

Charity Manager  
Associate Director of Corporate Business  
Head of Financial Services  
Deputy Director of Finance  
Senior Assistant Accountant  
Charity Administrative Support Officer  
Audit Wales

**Apologies**

Carol Shillabeer

Chief Executive Officer

CF/22/05	<p><b>WELCOME &amp; APOLOGIES FOR ABSENCE</b></p> <p>The Chair welcomed members to the Committee. Apologies for absence were noted as recorded above.</p>
CF/22/06	<p><b>DECLARATIONS OF INTEREST</b></p> <p>The Chair INVITED any declarations of interest in relation to items on the agenda. No interests were declared.</p>
CF/22/07	<p><b>MINUTES OF PREVIOUS MEETING HELD ON 01 DECEMBER 2021 and 26 APRIL 2022</b></p> <p>The minutes of the meeting held on 01 December 2021 and 26 April 2022 were RECEIVED and AGREED as being a true and accurate record.</p>

CF/22/08	<p><b>MATTERS ARISING FROM THE MINUTES OF THE LAST MEETING</b></p> <p>The Head of of Financial Services confirmed that the annual accounts agreed on 26 April 2022 was signed by the auditor general for Wales and had been submitted to the Charity Commission in May 2022.</p>
CF/22/09	<p><b>ACTION LOG</b></p> <p>The Committee received the action log, and the following updates were provided.</p> <p>CF/21/86 - This item was delayed allowing for the Board Development session in May to take place. This will return as an item for a future Board Development session later in the year.</p> <p>CF/21/25 – The Board Development session took place on the 13<sup>th</sup> May and additional information on the delegation levels has been included in the most recent meeting papers. The item was marked as completed.</p>
<b>ITEMS FOR APPROVAL, RATIFICATION OR DECISION</b>	
CF/22/10	<p><b>GENERAL BIDS FOR RATIFICATION</b></p> <p>The Committee discussed the following Bids seeking approval from General Funds:</p> <ul style="list-style-type: none"> <li>• <b>Easy read copy training</b> The Charitable Funds Committee was asked to provide funding for five places on a training course to produce EasyRead materials for £630. EasyRead materials are produced to support individuals with learning disabilities, but they can also benefit groups such as, those who are profoundly deaf, those whose first language is not English/Welsh, those with neurologically diverse conditions such as ADHD, Dyslexia, and those suffering with mental health conditions which affect concentration and processing information.</li> </ul> <p>Powys Teaching Health Board (PTHB) does not have the ability to create these documents, as there is no statutory requirement to do so and no central process for this. It is also costly, as it requires an external specialist for each document.</p>

	<p>This training would allow the Health Board to develop an internal resource to produce these documents for departments in a similar fashion to how Welsh language documents are produced.</p> <ul style="list-style-type: none"> <li>• <b>Tree nursery and wildflower programme</b></li> </ul> <p>This proposed bid is the implementation of a tree nursery and wildflower programme across all of PTHB's hospital sites. The cost of the project is £1,800 for an automated watering system which would cut down on the additional man hours required to maintain the existing programme, as well as the production of signage for green areas and wildflower seeds to establish to new habitats at each hospital site.</p> <p>Maintenance will be carried out by the estates/facilities teams and is less work-intensive for the planned areas versus traditional ground maintenance. The project has been designed as part of the PTHB biodiversity plan and ongoing seed harvesting plan is planned as part of the PTHB Green Bees group activities.</p> <p>It was noted that the cost of signage is high due to the amount needed to cover all hospital sites within Powys in addition to the costs for translation.</p> <p>The Committee DISCUSSED and APPROVED both bids.</p>
CF/22/11	<p><b>GRANT APPLICATION FROM THE CHARITY TO NHS CHARITIES TOGETHER</b></p> <p>The Charity Manager presented the paper which outlined the proposed application from the Charity team and Workforce team.</p> <p>NHS Charities Together had ringfenced £55,000 of funding for the Charity to utilise in Powys for organisational recovery and resilience related to COVID, which required an application to access.</p> <p>The proposal for the funding is to provide a two-year Band 7 post to project manager the delivery of a project across PTHB services. The proposed project will be the delivery of team-based working training. This training was developed</p>

	<p>as an open resource by University College Dublin. It is a team-based working toolkit which will help to embed the work and develop excellence in leadership and across all PTHB service areas to support teams to become more resilient to the impacts of the pandemic.</p> <p>This application was supported by the Executive Committee on the 4<sup>th</sup> May and has come to the Charitable Funds Committee for ratification. The outcome of the bid is anticipated over the next couple of months.</p> <p>The Committee DISCUSSED and RATIFIED the Grant application from the Charity to NHS Charities Together.</p>
CF/22/12	<p><b>EXPENDITURE APPROVED UNDER DELEGATED AUTHORITY SINCE THE LAST MEETING</b></p> <p>The Head of Financial Services presented the report to the Committee. The Charitable Funds Committee was requested to NOTE items with a combined value of £6,000 attached that had been approved for expenditure during the period of September 2021 to March 2022.</p> <p><i>Could assurance be provided that these items are within the Charity's criteria and fits within the remit of 'above and beyond'?</i></p> <p>The Head of Financial Services explained that items such as the digital charging desktop provided an enhanced service to accompany the Digital Health Record system which is funded by Powys Teaching Health Board.</p> <p>The Charity Manager explained that every application will be reviewed by the Charity Manager and Finance team to ensure they meet the eligibility criteria for funding before being processed.</p> <p>The Committee DISCUSSED and RATIFIED the expenditure approved under delegated authority.</p>
CF/22/13	<p><b>AGREED SCHEDULE OF ADDITIONAL CHARITABLE FUNDS COMMITTEE DECISION MAKING MEETINGS</b></p> <p>The Charity Manager presented the proposal for scheduling additional meetings of the Charitable Funds Committee</p>



	<p>which will take place in-between the currently scheduled quarterly meetings.</p> <p>These meetings would be brief (30-minute) meetings reserved for approving any time-sensitive or critical proposals. The meetings will help to avoid lengthy delays for time sensitive projects and will allow the charity to plan and avoid standing up additional meetings at short notice.</p> <p><i>There is a concern that if these meetings were to take place for decision making only, what stops the meeting being used for other business?</i></p> <p><i>Have other options been explored, for example a Chair's action or sub-group instead of holding a committee meeting? This could potentially use up critical free time within Committee members calendars therefore, other options need to be considered first.</i></p> <p><i>What is the definition of 'time critical'? Could an outline be provided on what would be considered 'time critical' for the Committee proposals.</i></p> <p><i>A review will be needed if Charitable Funds Committee moves from being a virtual meeting to in-person, as standing up a meeting at short notice could affect attendance.</i></p> <p>It was suggested by the Director of Finance and IT that the Committee puts this in place for a trial period in order to see if this proposal will work effectively and/or if there are other issues which have not yet been considered.</p> <p>The proposal for additional Charitable Funds meetings was APPROVED subject to:</p> <ul style="list-style-type: none"> <li>• A trial period being put in place with the intention to review the process at a later date.</li> <li>• And a clear definition of 'time critical' proposals for the Committee.</li> </ul>
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### ITEMS FOR DISCUSSION

CF/22/14	<p><b>CHARITY ACTIVITY &amp; INCOME REPORT</b></p> <p>The Charity Manager presented the Charity Activity and Income Report to the Committee. It was highlighted that for a period at the start of 2022 the Charity was supporting the CEO Office which caused some delays to the most</p>
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	<p>recent workplan and social media engagement figures. However, since the team has returned to their posts in March/April 2022 there has been a significant improvement.</p> <p>The team is currently focusing on a fundraising campaign (NHS Big Tea) which is set to take place in July, this includes a series of events and fundraising opportunities.</p> <p>The Charity has an opportunity to apply for a £30,000 development grant from NHS Charities Together at the end of 2022. This grant is designed to help charities to build capacity and allow them to become more robust. The Charity team will be developing the proposal over the next few months and will have more information to share with the Committee in September.</p> <p>The Charity has made its first corporate partner during the period with the Original Factory Shop in Machynlleth choosing to support PTHB Charity as its official Charity. We have also since received support from the local business, Prints of Wales, who have chosen to support Brecon Hospital through purchases of their stock.</p> <p>The Committee DISCUSSED and NOTED the Charity activity &amp; income report.</p>
CF/22/15	<p><b>CHARITABLE FUNDS FINANCIAL SUMMARY REPORT</b></p> <p>The Head of Financial Services presented the Committee the financial summary report which highlighted the expenditure profile of the Charitable Funds for the period from 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022.</p> <p>It was noted that the Charity income is higher than expenditure, which is a result of the Charity receiving a legacy donation of just under £360,000 for Welshpool Hospital general purposes in 2021, which is a significant amount.</p> <p>The Committee:</p> <ul style="list-style-type: none"> <li>• DISCUSSED and NOTED financial summary.</li> <li>• NOTED the current level of income received and expenditure of funds from 1st April 2021 to 31<sup>st</sup> March 2022.</li> <li>• NOTED any actions or recommendations linked to the financial position of the funds.</li> </ul>

ITEMS FOR INFORMATION	
CF/22/16	<p><b>INVESTMENT MANAGERS UPDATE REPORT AND PRESENTATION</b></p> <p>The Head of Financial Services presented the Committee the most recent quarterly report from Brewin Dolphin, which covers the period of 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022.</p> <p>The report was created on the 17<sup>th</sup> April therefore, much of the narrative is around the Ukraine/Russian conflict and a shift towards combatting inflation from global policymakers and the effects on the investment markets. Based on their projections, the Investment Managers have not indicated that the Charity's portfolio or target income will be negatively impacted in the coming year.</p> <p>The portfolio has achieved an income target of £110k for the financial year (21/22) vs a £99k target and Brewin Dolphin is forecasting income of £109k for the present financial year (22/23) against a target of £105k.</p> <p><i>If there are multiple small amounts, are all the funds pooled together into a general investment pot and then upon return divided back into individual funding pots?</i></p> <p>The Head of Financial Services explained that the Charitable Funds Committee three years ago approved the process that any investment earning will be returned to the Powys General Funds. The Committee agreed as any earnings from investment would be used as widely as possible across Powys. Also, any costs in association with running of the Charity are also financed through the Powys General Fund.</p> <p>The Investment Managers update was DISCUSSED and NOTED by the Committee.</p>
CF/22/17	<p><b>PROJECT EVALUATION UPDATES</b></p> <p>The Charity Manager presented a summary of recent project evaluations for some of the Charity's smaller projects across a series of slides. These were created following a survey of the project leads and follow up discussions.</p>

	<p>Some notable mentions were the 'Books for People Living with Cancer' project as part of the Improving the Cancer Journey partnership and the support for a programme of 'cardiac rehabilitation at home' during the pandemic.</p> <p>The Committee DISCUSSED and NOTED the project evaluation updates.</p>
CF/22/18	<p><b>FOLLOW DOCUMENT UP RE: GOVERNANCE/FUNDING DECISION MAKING</b></p> <p>The Charity Manager presented to committee a paper which outlined the funding approval process and delegated authority for Charitable Funds.</p> <p>Currently, delegated approval can only be given by Assistant Directors/Executive Directors and up to a threshold of £5,000. There was previously a threshold of £10,000 but this was brought down to £5,000 to ensure consistency with other Health Board policies regarding expenditure following the recommendations of the Charity's Auditors.</p> <p>In the case of the Powys General Purposes Fund, all funding requests must come to the Committee for approval regardless of value.</p> <p>The Committee DISCUSSED and NOTED the Governance and Funding Decision Making diagram.</p>
<b>OTHER MATTERS</b>	
CF/22/19	<p><b>ANY OTHER URGENT BUSINESS</b></p> <p>No other urgent business was declared.</p>
CF/22/20	<p><b>DATE OF NEXT MEETING</b></p> <p>Thursday 15<sup>th</sup> September 2022, 10:00AM, Via Microsoft Teams</p>

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Key:

Completed
Not yet due
Due
Overdue

## CHARITABLE FUNDS COMMITTEE ACTION LOG (September 2022)

CF Minute	Meeting Date	Action	Responsible	Progress	Completed
CF/21/86	1 December 2022	The Charity Manager will follow up with Brewin Dolphin regarding the ethical investment criteria, with a view to bringing the next steps and decision-making process on the new policy to a future board development meeting.	Charity Manager / Investment Managers	<p><u>23 September 2022</u> A date for Brewin Dolphin to attend a Board Development session has not yet been set but the investment managers will be invited to the December Charitable Funds Committee Meeting to further discuss the Charity's investments with a view to a date for the BD session being confirmed prior to this meeting.</p> <p><u>14 June 2022</u> This item was delayed to allow for the initial Board Development</p>	

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				session in May to take place. This will return as an item for a future Board Development session later in the year.	
<b><u>ACTIONS PREVIOUSLY AGREED AS COMPLETED</u></b>					
CF/21/25	3 December 2020	The Charity Manager to bring additional guidance and information on the context for core and non-core expenditure in addition to the set delegation levels for the Committee to review.	Charity Manager	<u>14 June 2022</u> The Board Development session took place on the 13 <sup>th</sup> May and additional information on the delegation levels has been included in the most recent meeting papers.  <u>01 December 2021</u> This item will return for discussion at a forthcoming Board Development session.  <u>23 September 2021</u> This work has been split into separate items with a new framework for approving expenditure being developed.  <u>02 June 2021</u>	

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CF Minute	Meeting Date	Action	Responsible	Progress	Completed
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<p>Jones Shania 20/09/2022 15:28:27</p> <p>Charitable Funds Committee Action Log Updated June 2022</p>				<p>The Governance review was intended for the Committee meeting in June. Due to time restrictions the item was pushed back and will be taken to the next Committee meeting in September.</p> <p><u>04 March 2021</u> Information on the delegation levels will be presented with clarity on</p>	

CF Minute	Meeting Date	Action	Responsible	Progress	Completed
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CF/21/59	2 June 2021	Provide confirmation regarding the extension details on funding just under the delegated threshold for the telehealth facilitator.	Charity Manager and Head of Financial Services	<u>23 September 2021</u> The extension expenditure noted at the June meeting was from the agreed extension in December 2020. This additional funding loophole had been flagged prior to approval.	
CF/21/62	2 June 2021	Review the investment portfolio ethical policy criteria and discuss with the	Director of Finance and IT	<u>23 September 2021</u> Following a discussion with the Investment	

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Charitable Funds Committee Action Log  
Updated June 2022

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Charitable Funds Committee  
14 June  
Agenda item



**AGENDA ITEM: 2.1**

<b>Charitable Funds Committee</b>		<b>DATE OF MEETING: 23 September 2022</b>
<b>Subject:</b>	<b>Bids for Approval</b>	
<b>Approved and Presented by:</b>	Charity Manager	
<b>Prepared by:</b>	Charity Manager	
<b>Considered by Executive Committee on:</b>	N/A	
<b>Other Committees and meetings considered at:</b>	N/A	

**PURPOSE:**

Receive items for approval from the Powys General Fund and any items from Local Funds or COVID Response Fund over **£5,000** in total value.

**RECOMMENDATION(S):**

The Charitable Funds Committee is requested to APPROVE requests for funding for the following:

- **Pottery sessions- £6,990 Felindre Ward**

<b>Approval/Ratification/Decision<sup>1</sup></b>	<b>Discussion</b>	<b>Information</b>
✓	x	x

<sup>1</sup> Equality Impact Assessment (EiA) must be undertaken to support all organisational decision making at a strategic level

**THE PAPER IS ALIGNED TO THE DELIVERY OF THE FOLLOWING STRATEGIC OBJECTIVE(S) AND HEALTH AND CARE STANDARD(S):**

Strategic Objectives:	1. Provide Early Help and Support	
	2. Tackle the Big Four	
	3. Enable Joined up Care	
	4. Develop Workforce Futures	✓
	5. Promote Innovative Environments	✓
	6. Put Digital First	✓
	7. Transforming in Partnership	
Health and Care Standards:	1. Staying Healthy	✓
	2. Safe Care	✓
	3. Effective Care	✓
	4. Dignified Care	✓
	5. Timely Care	✓
	6. Individual Care	✓
	7. Staff and Resources	✓
	8. Governance, Leadership & Accountability	✓

**EXECUTIVE SUMMARY:**

This paper is to request the Charitable Funds Committee approve the following application to the AMI Legacy Fund:

- **Pottery sessions Felindre Ward- £6,990**

**DETAILED BACKGROUND AND ASSESSMENT:**

All items of expenditure from Charitable Funds must not be committed prior to the approval of expenditure from either the Charitable Funds Committee or the Assistant /Directorate Managers delegated with this responsibility in line with the Charitable Funds Strategy and Policy document. Items requesting funding from the Powys General Purposes Fund can only be approved by the Charitable Funds Committee.

Proposals with a value over **£5,000** from local funds and from the COVID Response Fund must also receive approval from the Charitable Funds Committee as it is above the delegated limit set by the Committee.

Details of the bids to the AMI Legacy Fund can be found at Appendix 1.

**NEXT STEPS:**

None as a result of this paper.

**The following Impact Assessment must be completed for all reports requesting Approval, Ratification or Decision, in-line with the Health Board's Equality Impact Assessment Policy (HR075):**

IMPACT ASSESSMENT				
Equality Act 2010, Protected Characteristics:				
	No impact	Adverse	Differential	Positive
Age	✓			
Disability	✓			
Gender reassignment	✓			
Pregnancy and maternity	✓			
Race	✓			
Religion/ Belief	✓			
Sex	✓			
Sexual Orientation	✓			
Marriage and civil partnership	✓			
Welsh Language	✓			
<b>Statement</b>  <i>Please provide supporting narrative for any adverse, differential or positive impact that may arise from a decision being taken</i>				
Risk Assessment:				
	Level of risk identified			
	None	Low	Moderate	High
Clinical	✓			
Financial	✓			
Corporate	✓			
Operational	✓			
Reputational	✓			
<b>Statement</b>  <i>Please provide supporting narrative for any risks identified that may occur if a decision is taken</i>				

## Appendix 1 – Pottery sessions

### Charitable Funds – Request for Approval to commit Charitable Funds Expenditure

APPLICATION FOR CHARITABLE FUNDS APPROVAL
<b>For completion by person requesting funding:</b>
<b>Location:</b> Felindre Ward
<b>Hospital / Clinic:</b> Bronllys Hospital
<b>Requested By:</b> Millie Griffiths
<b>Fund Account No/Description:</b> Charitable funds
<b>Date:</b> 26/04/2022
<b>Demonstrate how this request will improve the patient and patient support environment within the tHB and complies with the Charitable Funds Strategy (Please include a statement on need and expected impact):</b>
<p>We currently have a potter who attends the ward twice a week (budget code;8140-2122-02). This application is to continue these sessions, original application submitted on 10/06/2021</p> <p>Pottery is a session/group which has been popular amongst patients for many years and has had been well attended by those on the ward. At the start of the pandemic pottery was stopped until we could put a plan in place and once it returned it was noted in the patient council minutes that a patient feedback that it was 'Good to have Pottery back.' By having 2 sessions it has enabled people to start and finish projects quicker which is better for those who have short admissions.</p> <p>Due to the popularity of discharged patients wanting to attend community groups the potter has also added extra pottery sessions to his community groups.</p> <p>There has been research into mental health benefits and pottery and some of the outcomes found the following;</p> <ul style="list-style-type: none"><li>• <b>Creative outlet</b> – There are both physical and mental benefits from expressing yourself by creating something. Art offers an outlet and a release from all of that. With pottery, you can produce something and express yourself in some way.</li><li>• <b>Increase optimistic outlook</b> – Pottery enables for improvements in flow and spontaneity, provides an outlet for grief, and helps you with self-identification and self-expression, bolstering confidence and self-esteem.</li></ul>

- **Improve focus** – Pottery allows you to escape the worries of life and shift your focus toward your creation. During the process, outside influences don't affect your work so you dedicate your time to your creation. Being able to fully focus something helps the mind relax and expand, which will help you focus on other tasks in your daily life as well.
- **Exploring and experimentation** – Pottery helps you to express your creativity, which is essential to expand who we are and how we connect to ourselves and our environment. It's a good way for people of all ages to explore the things they can do. You may be more creative than you think, besides there's no right or wrong way to participate in pottery.
- **Can help reduce pain and discomfort from arthritis** – The movement of making pottery is gentle yet strengthening to the hands, wrists, and arms. This can be beneficial to those prone to arthritis in the hands, as it promotes joint movement and dexterity.
- **Encourage sociability** – Pottery rouses mental activity as much as physical and is often the perfect hobby for those who prefer to expend their energy internally. While partaking in group pottery. The usually casual atmosphere helps people relax and can help start a conversation. Plus there is community pottery groups which can be signposted too.

<https://www.healthfitnessrevolution.com/top-10-health-benefits-pottery/>

All the above points enable us to further assess patients in a calm, structured, relaxed manner which also links to recovery through activity program which we are trying to further implement on the ward however sessions such as pottery require a trained potter. Creative activity is part of everyday life involving risk taking, problem solving and therefore has the power to foster autonomy and competence (Schmid, 2005). Through the use of creative tasks, we are able to assess a patient's mental state, ability to follow instructions and concentration. The versatility of creative activity allows it to be used effectively in 1:1 and group interventions (Griffiths and Corr, 2007) as well aiding OTs to assess functional performance (Mitchell and Neish, 2007).

In the last charitable funds strategy, there's an allocation which includes £10,000 p/a for therapeutic activities on Felindre Ward. The detail of the entry states: *It is important to offer patients constructive activities to enhance their therapeutic experience when on our in-patient units. This leads to a meaningful day, reduces boredom, enhances skills and promotes recovery. Activities include continuing with the pottery and cookery classes on Felindre as well as looking to develop similar occupational opportunities. These will be commissioned throughout the year following consultation with patients.*

Martin the potter also previously ran woodwork sessions on the ward, and the tools used are still in the pottery room unused. Examples of sessions he used to run include framing, which

would enable patients to make a frame for other art work they may have completed in other sessions as well as making things such as bird boxes. If funding was secured and there was a week where by no one wanted to undertake pottery Martin has stated he would be happy to be flexible and offer woodwork sessions if there was a demand as this is a session he has previously ran and would provide an alternative creative activity on the ward. This would then enable us to link into groups such as mens shed as this is currently an activity we don't offer on the ward and would again require someone who knows what they're doing.

**Description of item requested (please attach supporting documentation eg EDOF form/quotes:**

Further £60 a week to cover the cost of Martin the potter to run a second session a week on a Monday as well as his current Thursday session.

**Please find previous invoice from other sessions attached.**

**Estimated Cost (If known):**

£60 a session – **2 sessions a week totalling £120**

Plus, an additional £750 a year for materials.

**Has assistance been obtained from the Procurement Department**    No  
(Please delete)

**Ongoing Revenue Costs (if Applicable)**

**For completion by Fund Manager:**

**Comments on Proposal:**

**Signed:**

**Date:**

**For completion by appropriate Director/Locality Manager (or designated deputy):**

**Funding request supported / not supported (delete as appropriate)**

**Signed: Joy Garfitt**



**Date: 14.06.2022**

**When completed by all parties please forward to:**

Bids for Approval

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**Charitable Funds Committee**  
**23 September 2022**  
**Agenda Item: 2.1**

## Charitable Funds, Finance Department, Bronllys Hospital

Jones, Shania  
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Bids for Approval

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**Charitable Funds Committee**  
**23 September 2022**  
**Agenda Item: 2.1**

**AGENDA ITEM: 2.2**

<b>Charitable Funds Committee</b>		<b>DATE OF MEETING: 23 September 2022</b>
<b>Subject :</b>	<b>Applications to the COVID Response Fund (for ratification)</b>	
<b>Approved and Presented by:</b>	Charity Manager	
<b>Prepared by:</b>	Charity Manager	
<b>Considered by Executive Committee on:</b>	N/A	
<b>Other Committees and meetings considered at:</b>	N/A	

**PURPOSE:**

To receive for approval and ratification, bids supported and approved under delegated authority by the Executive Committee or those approved by the Committee via Chair's action under the COVID Response Fund, established via grant funding from NHS Charities Together.

**RECOMMENDATION(S):**

The Committee is requested to NOTE and RATIFY the 2 bids with a combined value of £25,648 attached that have been approved for expenditure under delegated authority, and via Chair's action by the Committee itself as part of the COVID Response Fund up to September 2022.

**Approval/Ratification/Decision<sup>1</sup>**

**Discussion**

**Information**

<sup>1</sup> Equality Impact Assessment (EiA) must be undertaken to support all organisational decision making at a strategic level



✓	x	x
---	---	---

**THE PAPER IS ALIGNED TO THE DELIVERY OF THE FOLLOWING STRATEGIC OBJECTIVE(S) AND HEALTH AND CARE STANDARD(S):**

Strategic Objectives:		
	1. Provide Early Help and Support	x
	2. Tackle the Big Four	x
	3. Enable Joined up Care	✓
	4. Develop Workforce Futures	✓
	5. Promote Innovative Environments	✓
	6. Put Digital First	✓
	7. Transforming in Partnership	✓
Health and Care Standards:		
	1. Staying Healthy	✓
	2. Safe Care	✓
	3. Effective Care	✓
	4. Dignified Care	✓
	5. Timely Care	✓
	6. Individual Care	✓
	7. Staff and Resources	✓
	8. Governance, Leadership & Accountability	✓

**EXECUTIVE SUMMARY:**

**The Committee is requested to RATIFY 2 proposals that have been approved under delegated authority by the PTHB Executive Committee and the Charitable Funds Committee as part of the COVID Response Fund.**

**The project at Appendix 1, was approved by the Executive Committee in 2021 pending it meeting the necessary Digital Governance requirements. This process has now been completed and the project is proceeding, hence its inclusion for ratification.**

**The project at Appendix 2 was recently approved remotely via Chair's action by members of the Charitable Funds Committee in August 2022 and is presented here for Ratification.**

**DETAILED BACKGROUND AND ASSESSMENT:**

In April 2020, the PTHB Charity became members of NHS Charities Together, benefitting from their national COVID fundraising appeal. As part of the appeal, the PTHB Charity has received an initial allotment of £49,500 of funding to distribute in order to support staff and patients impacted by COVID-19. The grant was the first in a series that will continue to be distributed throughout the year, focusing on different areas of support. The Charity received a further £50,000 of funding in August 2020 and a third grant of £50,000 in January 2021. All of this funding has been designated as Stage 1 funding from NHS Charities Together.

In order to distribute the funds effectively, new guidelines and a new application process were outlined and implemented, with all proposals to the fund being reviewed and approved on a weekly basis by the COVID-19 GOLD Group.

All items of expenditure must not be committed prior to the approval from either the GOLD Group or those delegated with this responsibility in line with the COVID Response Fund Guidelines.

Items over £5,000 must also receive approval from the Charitable Funds Committee as it is above the delegated limit set by the Committee.

To date, £152,000 of the Stage 1 funding has been committed to projects with some of those projects delayed or with some underspend following completion.

PTHB Charity project applications for Stage 3 and 2 funding will be progressing to NHS Charities Together in September and December 2021 respectively. Stage 3 will be funding available for staff to support resilience to COVID-19, allowing us to implement initiatives such as mental health first aid training over a two-year period. Stage 2 will be a community partnership project developed in partnership with PAVO and the RPB. Both projects will be delivered over a two-year period.

Details of the proposals approved under delegated authority and via Chair's action by the Charitable Funds Committee can be found at **Appendix 1-2**.

#### **NEXT STEPS:**

None as a result of this paper.

**The following Impact Assessment must be completed for all reports requesting Approval, Ratification or Decision, in-line with the Health Board's Equality Impact Assessment Policy (HR075):**

#### **IMPACT ASSESSMENT**

COVID Response Fund bids for  
Approval & Ratification

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**Charitable Funds Committee**  
**23 September 2022**  
**Agenda Item: 2.2**

Equality Act 2010, Protected Characteristics:					
	No impact	Adverse	Differential	Positive	<p align="center"><b>Statement</b></p> <p align="center"><i>Please provide supporting narrative for any adverse, differential or positive impact that may arise from a decision being taken</i></p>
Age	✓				
Disability	✓				
Gender reassignment	✓				
Pregnancy and maternity	✓				
Race	✓				
Religion/ Belief	✓				
Sex	✓				
Sexual Orientation	✓				
Marriage and civil partnership	✓				
Welsh Language	✓				
Risk Assessment:					
	Level of risk identified				<p align="center"><b>Statement</b></p> <p align="center"><i>Please provide supporting narrative for any risks identified that may occur if a decision is taken</i></p>
	None	Low	Moderate	High	
Clinical	✓				
Financial	✓				
Corporate	✓				
Operational	✓				
Reputational	✓				

Jones, Shania  
20/09/2022 15:10

## Appendix 1 – MOHO OT mental health assessment toolkit & licenses

### PTHB Charitable Funds CV-19 Response Fund 3

**Please choose which category this request falls under:**

Supporting staff	<input checked="" type="checkbox"/>
Supporting patients	<input checked="" type="checkbox"/>
Increasing accessibility	<input checked="" type="checkbox"/>
Supporting adversely impacted groups	<input checked="" type="checkbox"/>
Other (please specify below)	<input type="checkbox"/>

**What is the title of this project/request?**

Standardised outcome measures and assessments to maximise the patient experience of online and face to face OT in mental health settings during CV-19 pandemic, and Recovery through activity group work.

**Who will benefit?** Explain how the beneficiaries have been impacted by COVID-19 and try to estimate approximately how many people could benefit from the grant. (max 250 words)

**Mental health patients aged 18 onwards have had drastically reduced access to occupational therapy assessment and intervention during the cv-19 pandemic. Mental health patients, and new mental health referrals to the services are unlikely to have a face to face appointment as the use of online formats is used. CV-19 increases the vulnerability and social isolation of mental health patients, and impacts on their ability to form safe relationships and roles in their day to day lives. The Activity through recovery group is part of an all Wales mental health project for the Bevan Exemplary using online access.**

**How will this funding enhance service provision and improve accessibility?** What kind of difference can this grant make? Are there any potential long-term benefits? (max 250 words)

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COVID Response Fund bids for  
Approval & Ratification

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**Charitable Funds Committee**  
**23 September 2022**  
**Agenda Item: 2.2**

The Model Of Human Occupation (MOHO) is a world-wide standardised OT mental health outcome measures for assessments and review of interventions. It enables patient / service user and therapist to maintain clear view of the service user goals and wishes. The assessments and outcome measures are internationally recognised and are service user friendly, making the process of on-line assessment more accessible and shared. The assessments can be sent out by post, and service users can have time to prepare and maximise their time with the OT on line. The assessments cover physical health, mental health, roles, relationships, environments, and service user view of their skill in completing these areas, and their value and motivation to complete these areas of daily life.

The group work book Recovery Through Activity (RTA) is already very successfully used on the ward, and in 1 CMHT and is being piloted on line for the Bevan Exemplary for all Welsh health boards Adult CMHT. The assessments and group book enable service user and OT to work together to build self- management skills in managing mental health issues, and the impact on all areas of the person's day to day function. The combination of assessments are from The Model Of Human Occupation and provide in depth assessment information and planning by self -assessment and OT assessment. All OTs will have used these assessments within their initial training, and will enable the most effective use of virtual and face to face assessments and interventions to support service users to self- manage and maintain or rebuild lost areas of function or occupational performance.

The long term benefits are the standardised and effective assessments for service users, reflecting their own views and the unification of mental health OT role within mental health whilst supporting their strength as generic workers. The challenges of CV-19 impacting on face to face meetings mean efficacy and accessibility of services is paramount to enable service users to build skills, confidence, motivation in self -management of their mental health.

**What items are you requesting?** Try to provide a detailed breakdown of the funding required, including quantities, cost per item and a total.

Jones, Shania  
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**The assessments are only available on line in digital format from MOHO Web**

MOHOST manual – 12 copies – 1 per team base of OT staff adult / older adult community team and adult ward / IAS / \$40:00 ( approx. £29.12 on exchange rate 17/8/21) for unlimited use per therapist

**Total = \$480 / approx. £349.40**

License for MOHO Role Checklist version 3 – 12 copies \$44:00 / copy for unlimited use per therapist

**Total =\$528/ approx. £384.34**

License for OSA and OSA-SF – 12 copies - \$40:00 / copy for unlimited use per therapist

**Total =\$480 / approx. £349.40**

License for OCAIRS – 12 copies \$40:00 / copy for unlimited use per therapist

**Total =\$480 / approx. £349.40**

License for Assessment package containing all 14 assessments, including school and vocational assessments relevant to eating disorder setting 1 copy for Eating Disorders Ageless Service \$300 / £218.38 ( exchange rate calculated 18/8/21)

**Total = \$300.00 / £218.38**

**(\$21.43 / £15.60 per assessment for unlimited use)**

We are able to provide inhouse learning for these outcome measures from out existing team of OT, and connection with all Wales mental health OT network. Initial training session arranged for 29<sup>th</sup> September 2021.

Recovery through Activity work book – 6 copies – 1 per adult and IAS setting where OT staff are based – Available from WH Smith £37.04 / copy.

**Total = £222.24**

**Approximate total = £1,873.16**

**For unlimited use of licence.**

**How will you evaluate the success of this project?** Try to think of ways that you might record the number of beneficiaries or capture photos or stories that showcase its impact.

Evaluation can be done through service user feed back questionnaires, and through staff groups. The Bevan Exemplar will be formally written up and is Lead by Nicky Thomas Head OT mental health Hwyl Dda University Health Board.

With permission from staff and service users we could record images and stories of journeys using the outcome measures and assessment, and RTA group work on line and share. As Professional Lead OT for mental health I would like to write an article for OT news journal as a reflection piece. In Powys mental health OT we do not use a standardised assessment and the reflection on service user experience, adaption to online therapy, and the professional development of OT staff and the evidence base provided for MDT teams and managers needs to be developed and demonstrated to describe the value of OT as a generic and specialist mental health intervention across adult and older adult and IAS areas.

### Contact details

Name: Kirsten Davidson

Email address: kirsten.davidson@wales.nhs.uk

Phone number: 07970248741

Delivery address (if applicable): Defynnog Mental Health Unit, Bronllys Hospital, Bronllys, Powys, LD3 0LU

### Declaration

I have read the PTHB Charity criteria and guidance document for this fund.	<input checked="" type="checkbox"/>
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I have read the FCP (INTERIM) – COVID 19 Decision Making & Financial Governance document found <a href="#">here</a> .	<input checked="" type="checkbox"/>
---	-------------------------------------

I confirm that this funding will only be used for the purposes specified in this application.	<input checked="" type="checkbox"/>
---	-------------------------------------

Applicant	
<b>Name:</b> Kirsten Davidson	<b>Role:</b>
Professional Lead Occupational Therapist Mental Health	
<b>Signature:</b> KP Davidson	<b>Date:</b> 21/2/21/
updated 17/8/21	
Authorising manager/executive	
<b>Name:</b>	<b>Role:</b>
<b>Signature:</b>	<b>Date:</b>

Please email this completed form to [abe.sampson@wales.nhs.uk](mailto:abe.sampson@wales.nhs.uk)

Jones, Shania  
20/09/2022 15:10



## Appendix 2 – Diolch Powys staff event

### PTHB Charitable Funds CV-19 Response Fund 3

**Please choose which category this request falls under:**

Supporting staff	<input checked="" type="checkbox"/>
Supporting patients	<input type="checkbox"/>
Increasing accessibility	<input type="checkbox"/>
Supporting adversely impacted groups	<input type="checkbox"/>
Other (please specify below)	<input type="checkbox"/>

**What is the title of this project/request?**

'Diolch Powys' staff appreciation and thank you event

**Who will benefit?** Explain how the beneficiaries have been impacted by COVID-19 and try to estimate approximately how many people could benefit from the grant. (max 250 words)

- Proposal to develop and deliver a face-to-face engagement 'thank you' and commemorative event for a group of c.320 individuals comprising PTHB staff, volunteers, and representatives from partner public sector organisations. The event will be in recognition of their work to support Powys Teaching Health Board (PTHB) and the population of Powys over the course of the COVID-19 pandemic.
- A further series of 'roadshow' events will follow afterwards to engage as many PTHB staff as possible across our 11 largest sites/localities and will feature much of the content developed for the main commemorative event, but it will be delivered on a smaller scale and supported by a Board Director and Independent Member at each site.
- PTHB staff, and those working in support of the direct COVID-19 response and wider health and care system in voluntary and public sector roles, have worked tirelessly in this endeavour since early 2020.
- The system pressures continue, and staff are continuing to respond. This activity will acknowledge and celebrate the efforts of all those involved in the health and care response.

**How will this funding enhance service provision and improve accessibility?** What kind of difference can this grant make? Are there any potential long-term benefits? (max 250 words)

- The 'Diolch Powys' late summer event will provide a platform for visible and compassionate leadership, enabling leaders to recognise and say thank you to staff for their historic and continued efforts in the COVID-19 pandemic and subsequent recovery and renewal phases.
- The event will also provide a platform for the Chief Executive and outgoing Chair to meet as many staff as possible, including those at key health board locations following the main event, in a series of visits supported by Directors and Independent Members.
- It will provides an opportunity for the CEO and Executive Team to do a light touch engagement with staff on our organisational priorities as we continue through recovery and renewal, setting out the approach for continuing high quality care as we enter what is expected to be another challenging winter period.
- The event and supporting roadshows will provide a staff engagement opportunity, delivering moments of reflection on what has passed, thanks for the achievements, and optimism as the organisation looks forward beyond COVID-19 with its staff and local delivery partners help.

**What items are you requesting?** Try to provide a detailed breakdown of the funding required, including quantities, cost per item and a total.

Financial support to fund the entirety of the proposed programme of activity. Spend will be modest, while also creating assets that can be shared as widely as possible with staff who were unable to join the event, to ensure that they still benefit.

Currently activity and planning is focused on delivery of the event on 16 September, are operating under a planning cost envelope of £15-20,000. The main costs are estimated as follows:

- Venue hire: £2895 + VAT (£3,474 inclusive)
- Equipment hire (to include audio visual event support, transport costs and furniture): £5,000
- Purchase and/or production of print and digital content to support the delivery of the event, subsequent roadshows and sharing with the wider staff group: £3,500
- Filming and production of edited event video: £4,000
- Any associated licensing costs for Mentimeter or similar online service: £500
- Subsistence costs for event team (e.g. overnight accommodation): £500
- Event catering, including staff costs: £3,500

**Diolch Powys event on 16 September TOTAL: £20,474 inclusive of VAT**

Costs for delivery of the roadshow are estimated as follows:

- Roadshow estimated transportation/mileage costs: £1,600
- Roadshow staff catering (estimated based on 400 staff attending events across all sites at £2.50 per head to include tea/coffee and a cake/biscuit, plus the provision on sealed cake portions for a further 800 staff across all sites at an estimated cost of £0.80 per head): £1,700

**Diolch Powys Roadshows TOTAL: £3,300 inclusive of VAT**

**Grand Total (16 September event and roadshows): £23,774**

**NOTES:**

1. It is expected that staff that attend the event as guests will charge any mileage/subsistence costs to their own team/division/directorate budget codes.
2. The Communications and Engagement team non-pay budget does not cover costs such as accommodation and subsistence for events and activities and budget will need to be identified for cover these

**How will you evaluate the success of this project?** Try to think of ways that you might record the number of beneficiaries or capture photos or stories that showcase its impact.

**Experiential:**

- Photos from the event, including a digital sharing 'wall'
- Post event videos (and staff feedback)
- Staff feedback from intranet and staff Facebook channel posts
- Feedback from stakeholders that attended

**Reporting and KPIs:**

- Total attendances vs. sign-ups
- Post event staff questionnaires to gauge out-takes, outcomes, and organisational impact
- Overall spend (actual vs budget)

**Contact details**

Name: James Field

Email address: [james.field3@wales.nhs.uk](mailto:james.field3@wales.nhs.uk)

Phone number: 07968952363

Delivery address (if applicable): n/a

**Declaration**

I have read the PTHB Charity criteria and guidance document for this fund. ☒

I have read the FCP (INTERIM) – COVID 19 Decision Making & Financial Governance document found [here](#). ☒

I confirm that this funding will only be used for the purposes specified in this application. ☒

**Applicant**

**Name: James Field**

**Role: Head of Communications**

<b>Signature:</b> 	<b>Date:</b> 3 August 2022
<b>Authorising manager/executive</b>	
<b>Name:</b> Adrian Osborne	
<b>Role:</b> Assistant Director (Engagement and Communication)	
<b>Signature:</b> BY EMAIL	<b>Date:</b> 8 August 2022

Please email this completed form to [abe.sampson@wales.nhs.uk](mailto:abe.sampson@wales.nhs.uk)

Jones, Shania  
20/09/2022 15:10



**Agenda item: XX**

<b>Charitable Funds Committee</b>		<b>Date of Meeting:</b> <b>23<sup>rd</sup> September 2022</b>
<b>Subject :</b>	<b>RATIFICATION OF EXPENDITURE APPROVED BY THOSE WITH RELEVANT DELEGATIONS</b>	
<b>Approved and Presented by:</b>	<b>Head of Financial Services</b>	
<b>Prepared by:</b>	<b>Head of Financial Services</b>	
<b>Other Committees and meetings considered at:</b>	<b>None</b>	

**PURPOSE:**

To receive for information items of expenditure approved by those with relevant delegations during April 2022 to August 2022.

**RECOMMENDATION(S):**

The Charitable Funds Committee is requested to NOTE items with a combined value of £21,609 attached that have been approved for expenditure during April 2022 to August 2022.

<b>Approval/Ratification/Decision<sup>1</sup></b>	<b>Discussion</b>	<b>Information</b>
✓		

<sup>1</sup> Equality Impact Assessment (EiA) must be undertaken to support all organisational decision making at a strategic level

**THE PAPER IS ALIGNED TO THE DELIVERY OF THE FOLLOWING STRATEGIC OBJECTIVE(S) AND HEALTH AND CARE STANDARD(S):**

Strategic Objectives:	1. Focus on Wellbeing	✓
	2. Provide Early Help and Support	x
	3. Tackle the Big Four	x
	4. Enable Joined up Care	x
	5. Develop Workforce Futures	x
	6. Promote Innovative Environments	x
	7. Put Digital First	x
	8. Transforming in Partnership	x
Health and Care Standards:	1. Staying Healthy	✓
	2. Safe Care	✓
	3. Effective Care	✓
	4. Dignified Care	✓
	5. Timely Care	✓
	6. Individual Care	✓
	7. Staff and Resources	✓
	8. Governance, Leadership & Accountability	✓

**EXECUTIVE SUMMARY:**

All items of expenditure from Charitable Funds must not be committed prior to the approval of expenditure from either the Charitable Funds Committee or the Executive Directors/Assistant Directors delegated with this responsibility in line with the Charitable Funds Strategy and Policy document.

**DETAILED BACKGROUND AND ASSESSMENT:**

It is a requirement that all items of expenditure are notified to the committee for information at its next available committee meeting. Items with a combined value of £21,609 attached have been approved for expenditure during April 2022 to August 2022.

This listing is provided at Appendix A.

Jones, Sian  
20/09/2022 15:28:27

This excludes expenditure approved against the Covid Fund which is subject to a separate reporting to the committee.

Delegated managers are Assistant Directors/Executive Directors in line with the Charitable Funds revised Financial Control Procedure approved at the June 2020 meeting.

#### **NEXT STEPS:**

There are no next steps required as a result of this paper.

Jones, Shania  
20/09/2022 15:28:27

## Appendix A

**Powys Teaching Health Board**  
**Charitable Funds**  
**Items Approved April 2022 to August 2022**

<b>Fund</b>	<b>Item</b>	<b>Reason for purchase</b>	<b>£</b>	<b>Approved</b>
<b>Items Approved Apr 2022</b>				
North Powys DNs	Doppler machine	Enhanced machine for service to increase the efficiency and ability to see more patient at clinics in comparison to current hand held device.	2,820	S Powell
AMI Legacy	Dishwasher Ty Iltyd	To enable sanitisation of crockery following clients attendance	300	J Garfitt
<b>Items Approved May 2022</b>				
Knighton General Purposes	Raised beds planters	Cottage View residents have requested this, this will enable to enjoy the outdoor and it will be part of the activities to plant vegetable and flowers.	100	S Powell
Llandrindod Clywedog Ward	Patient activities for 3 months	purchases to enable patients to engage in activities on the ward	180	J Garfitt
<b>Items Approved Jun 2022</b>				
Newtown General Purposes	Under Counter larder fridge for OPMH	Additional increased facilities for staff related food storage	185	J Garfitt
Bronllys Care of the Elderly	2 x Hydroflex seats	Enhanced chair adjustable recliner seating to enable patients to sit out of bed more to aid recovery & rehabilitation	7,382	S Powell
AMI Legacy	Newspaper AMI Ward	Inpatients newspapers will enable patients to keep up to date with the outside world. This will also provide a subject of communication within the ward.	270	J Garfitt
AMI Legacy	OT activity sessions & ward activities	To improve facilitation of cooking group and purchase essential resources for art & crafts and gardening.	1,560	J Garfitt
Palliative Care	2022 Advanced Pain and Symptom Management course	To improve Continued Professional Development of team based on most recent to approach complex symptom management.	350	H Thomas
<b>Items Approved July 2022</b>				
Palliative Care	Clinical Supervision South & North Specialist Palliative Care Teams	The PTHB Specialist Palliative Care Team provide support and guidance to patients and health care professionals where symptom control and end of life care is complex in nature, this involves regular exposure to potentially distressing situations.	3,360	S Powell
Machynlleth General Purposes	Daily/weekly newspapers	The provision of local newspapers will reduce boredom and help to maintain and regain both physical mental functions. This will aid health and wellbeing in hospital.	500	S Powell
Palliative Care	European Certificate in Essential Care	The course will patients / those important to them, the wider MDT and the Specialist Palliative Care Team as a whole with sharing of information.	475	H Thomas
Palliative Care	Clinical Supervision Mid Specialist Palliative Care Team	The PTHB Specialist Palliative Care Team provide support and guidance to patients and health care professionals where symptom control and end of life care is complex in nature, this involves regular exposure to potentially distressing situations.	1,080	S Powell
Newtown General Purposes	Brynheulog rise/recline chair	Enhanced chair adjustable recliner seating to enable patients to sit out of bed more to aid recovery & rehabilitation	2,696	H Thomas
<b>Items Approved August 2022</b>				
Palliative Care	2022 Advanced Pain and Symptom Management course	To improve Continued Professional Development of team based on most recent to approach complex symptom management.	350	H Thomas
<b>TOTAL</b>			<b>21,609</b>	

Jones, Shania  
20/09/2022 15:28:27



## AGENDA ITEM: 2.4

Charitable Funds Committee		DATE OF MEETING: 23 September 2022
<b>Subject :</b>	<b>PTHB Charity Strategy</b>	
<b>Approved and Presented by:</b>	Charity Manager	
<b>Prepared by:</b>	Charity Manager	
<b>Considered by Executive Committee on:</b>	September 2022	
<b>Other Committees and meetings considered at:</b>	N/A	

### PURPOSE:

To outline the proposed PTHB Charity strategy for comment and approval.

### RECOMMENDATION(S):

The Charitable Funds Committee is requested to review and APPROVE the following the documents:

- **PTHB Charity Strategy 2022-25**

Approval/Ratification/Decision <sup>1</sup>	Discussion	Information
✓	x	x

### THE PAPER IS ALIGNED TO THE DELIVERY OF THE FOLLOWING STRATEGIC OBJECTIVE(S) AND HEALTH AND CARE STANDARD(S):

<sup>1</sup> Equality Impact Assessment (EiA) must be undertaken to support all organisational decision making at a strategic level

Strategic Objectives:	1. Provide Early Help and Support	✓
	2. Tackle the Big Four	✓
	3. Enable Joined up Care	✓
	4. Develop Workforce Futures	✓
	5. Promote Innovative Environments	✓
	6. Put Digital First	✓
	7. Transforming in Partnership	✓
Health and Care Standards:	1. Staying Healthy	✓
	2. Safe Care	✓
	3. Effective Care	✓
	4. Dignified Care	✓
	5. Timely Care	✓
	6. Individual Care	✓
	7. Staff and Resources	✓
	8. Governance, Leadership & Accountability	✓

## EXECUTIVE SUMMARY:

This paper provides information on the following:

- **PTHB Charity Strategy 2022-25**

The strategy outlines key strategic priorities for the Charity across the next three years in line with the objectives of the Health Board's IMTP and the overall vision and values of the Charity.

## DETAILED BACKGROUND AND ASSESSMENT:

The Charity has developed its new three-year strategy which is presented here for review and approval prior to seeking approval from the Board.

The Charity team has developed the medium-term strategy to help guide the direction of charitable funds activity over the next three years.

The strategy has been developed to link together with the key objectives of the Health Board's recently approved Integrated Medium-Term Plan (IMTP) 2022-2025 and created utilising the input of Board members and the Charity's other key stakeholders.

The full details can be found at Appendix 1.

## NEXT STEPS:

If the Charity strategy is Approved it will progress to the Board for final approval.

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The following Impact Assessment must be completed for all reports requesting Approval, Ratification or Decision, in-line with the Health Board's Equality Impact Assessment Policy (HR075):

IMPACT ASSESSMENT				
Equality Act 2010, Protected Characteristics:				
	No impact	Adverse	Differential	Positive
Age	✓			
Disability	✓			
Gender reassignment	✓			
Pregnancy and maternity	✓			
Race	✓			
Religion/ Belief	✓			
Sex	✓			
Sexual Orientation	✓			
Marriage and civil partnership	✓			
Welsh Language	✓			
<b>Statement</b>  <i>Please provide supporting narrative for any adverse, differential or positive impact that may arise from a decision being taken</i>				
Risk Assessment:				
	Level of risk identified			
	None	Low	Moderate	High
Clinical	✓			
Financial	✓			
Corporate	✓			
Operational	✓			
Reputational	✓			
<b>Statement</b>  <i>Please provide supporting narrative for any risks identified that may occur if a decision is taken</i>				

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## Appendix 1



# PTHB CHARITY STRATEGY 2022-2025

**September 2022**

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## 1. Background

Powys Teaching Local Health Board Charitable Fund was formally created on the 28th May 2004 by a 'Deed of Arrangement' and replaced the Powys Health Care NHS Trust Charitable Fund, which had been in existence since 26th July 1996, following the transfer of charitable funds from Dyfed Powys Health Authority. The Charity has an umbrella charity registration under which funds are registered together under a single 'main' registration number (charity no 1057902).

Charitable funds donated to the Charity are accepted, held and administered as funds and property held on trust for purposes relating to the health service in accordance with the National Health Service Act 1977 and the National Health Service and Community Care Act 1990.

The Powys Teaching Local Health Board is the Corporate Trustee of the Charitable Funds governed by the law applicable to Local Health Boards, principally the Trustee Act 2000 and also the law applicable to Charities, which is governed by the Charities Act 2006. The Board devolves responsibility for the on-going management of the Charity to the Charitable Funds committee, who administer the funds on behalf of the Corporate Trustee.

Charitable funds in the NHS originate from a variety of different sources including donations, legacies and through fundraising and may be for a specific or general purpose. To be deemed charitable, funds held by the Health Board must have purposes which are for the general public good. The Health Board Deed for Powys Teaching Local Health Board Charitable Fund also allows charitable monies to be applied for purposes relating to the National Health Service and therefore, funds are used for the benefit of patients and staff.

There are three main types of charitable funds recognised in law, including: -

- (a) Endowment Funds – where the 'lump sum' donation remains the same and only the interest is available for use;
- (b) Restricted Funds – where the donation has been made for a specific purpose, and
- (c) Unrestricted Funds – where the donation was general and as such is available for any charitable purpose.

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Charitable funds are typically used for, but are not limited to, the following purposes:

- Patients Expenditure: Purchase of items of equipment, provision of services facilities not normally purchased or paid for by or in addition to the normal NHS provision.
- Staff Expenditure: a) Motivation of staff by improving staff facilities and by providing services that improve staff wellbeing;  
b) Education of staff by providing education over and above what would normally be provided by the NHS.

As laid down within Charity Commission Guidance all expenditure must fulfil a 'public benefit' criterion i.e. should provide benefit to as wide a group of people as possible.

### Principles that Apply

Charitable funds must be applied for the purposes set out in the Health Board

Deed as highlighted above and for no other purposes. The following principles apply:

- (a) the income and property of the Charity must be applied with fairness and to persons who are properly qualified to benefit from it;
- (b) the Trustee must act reasonably and prudently in all matters relating to the charity and must always bear in mind the interests of the Charity;
- (c) personal views or prejudices must not affect conduct;
- (d) the same degree of care in dealing with the administration of the Charity should be exercised as would be exercised in managing Health Board's other affairs.

### Changes to the Charity

The Corporate Trustee and/or its representatives have a legal duty to notify the Charity Commission of any changes in the registered particulars of the umbrella charity.

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## 2. The Charity's role in improving the health and wellbeing of Powys

The remit and scope of PTHB Charity has increased dramatically since appointing its first dedicated full-time staff member in early 2020. The Charity team has continued to expand along with its presence and reach amongst NHS staff and the public throughout the pandemic. Being the official NHS charity for Powys during this challenging time saw an increased relevance for its work. The Charity will, therefore, build upon this moving forward as it implements its new strategy.

As an NHS charity, PTHB Charity can help to develop new partnerships between the public health sector and the voluntary health sector. The Charity can be a catalyst for partnership projects and programmes that help reduce the number of people who get ill and need statutory health intervention and help improve the health and wellness of those with long-term health conditions.

The NHS workforce provides the foundation for health care in Powys. By supporting and providing for a better working environment and better outcomes for NHS staff, the Charity can help ensure better outcomes for NHS patients and their families. This has been a vital area for the Charity in the past and will continue to remain a significant priority for support following the impact of COVID-19.

Where possible, the Charity will look to learn from the most influential and impactful third sector organisations from across the UK, particularly those in the field of healthcare and medical support and leading grant giving charities. More locally, the Charity will also look to work with other health board charities in Wales on relevant issues and to coordinate campaigns and communications for the widest possible impact.

The support network that has been created and maintained by NHS Charities Together across the last two years has allowed for greater collaboration between NHS charities. Maintaining a strong relationship and open dialogue, particularly with Welsh NHS and third sector colleagues, can ensure the Charity is as knowledgeable, responsive and effective as possible within its field.

## 3. Fundraising and investment

### Investment Strategy

The overall aim in investing the Health Board's charitable funds is to maximise total return whilst balancing risks and the requirement for income. The first priority, however, must be the use of funds for the benefit

of the health and wellbeing of Powys. The Charity will continue to annually review the investment strategy, taking advice as appropriate.

The Health Board's charitable funds can be invested in a number of different forms and the balance between each will depend on the following, although cash holdings will usually be preferred for short term commitments:

- (a) the anticipated expenditure flows and therefore the need for liquidity;
- (b) the forecast returns from different investment instruments as advised by the Health Board's investment advisers in the light of current stock market trends;
- (c) other requirements such as the ethical policy and;
- (d) the need to balance the interests of present and future beneficiaries.

The Charity has a responsibility to ensure that it has sufficient monies held to meet all its commitments and obligations. Although the intention of the Charity is to utilise funds in a timely manner there are instances where balances can be accumulated, and it is important that these balances are considered for placement on capital investment to ensure the best income return for the monies. All balances in investment and short-term accounts will be monitored by the Charity.

### Ethical Policy

The Charity and its Corporate Trustee, Powys Teaching Health Board, in line with the ethos of patient care, will attempt to consider that all investments are ethically and environmentally sound and are not opposed to the purpose of the Charity. Examples of current considerations include:

- Direct investment in companies which provide alcohol products  
*"Derives greater than 10% of its turnover from the production or distribution of alcohol."*
- Direct investment in companies which provide tobacco products  
*"Derives greater than 10% of its turnover from the production or distribution of tobacco or from support towards the tobacco industry."*
- Direct investment in companies which are involved in the arms trade  
*"Produces whole weapons systems, derives greater than 10% of its turnover from military activities or derives greater than 5% of its turnover from the production or sale of civilian firearms."*

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- Direct investment in companies which have a poor record in human rights
- Direct investment in companies which have a poor record in child exploitation
- In addition, investment in companies that demonstrate compliance with the principles of the Equality Act 2018 should be supported  
*"A company's response to material allegations of human rights conventions, child labour or discrimination, either within the company or in its supply chain must be graded by EIRIS as at least 'intermediate' in nature to justify retaining it within the portfolio."*

The Charity will continue to monitor and review its ethical policy on a regular basis to ensure it reflects the values and the expectations of its audiences and stakeholders.

### Attitude to Risk

The Charity's objectives are to achieve a balanced return between income and capital, adopting a medium risk approach and complying with the Trustee Investment Acts. The Charity's investment portfolio management is led by its appointed investment managers, Brewin Dolphin.

Investment portfolio objectives are to be achieved using the following considerations:

**Expected return:** The Charity recognises that the average long run (15 year) anticipated total return from a Brewin Dolphin Risk Category 6 portfolio is 7.5% per annum.

**Operational risk:** The Charity is a going concern without input from its investment funds. The operational risk of the funds is linked to the amount of income payable to the beneficiaries. Consequently, inflation is the principal operational risk.

**Timescale:** The Charity considers the funds to be long-term investment funds.

**Diversification:** The Charity recognises that financial assets are volatile and that their value can go down as well as up. The investment manager's risk measures for a Category 6 portfolio falls between 9% and 15%.

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**Income:** Income yield is to be targeted at circa 3% per annum.

**Cashflows:** The Charity does not anticipate any cashflow requirements in the short-term or near future.

## Fundraising

With growing scope and ambition, the Charity has a view to building on its current fundraising strengths and addressing known areas of weakness. The Charity saw an increased focus and attention as a result of the COVID-19 pandemic in 2020, which positively impacted fundraising and income generation. Annual income almost doubled from £208k to £392k with income streams also diversifying to incorporate community donations, national fundraising appeals in partnership with other charities, and accessing grant funding, in addition to legacy donations.

Moving forwards, the challenge for PTHB Charity is to maintain this increased level and diversity of income and ensure it retains sustainable levels of income and expenditure in the medium to long term.

Key fundraising aims for the Charity include:

- to develop both internal and external perceptions about PTHB Charity;
- to mainstream a commitment to promoting PTHB Charity as a key charity in Powys, with clear charitable objectives, and;
- to provide focus for activities and clarity of purpose and direction for staff, volunteers, and community members.

To achieve the above, the Charity will attempt to maximise the potential of its new brand in engaging new audiences whilst ensuring it retains its existing invested supporters. The Charity has expanded its core staff team in line with its increased resources and ambitious aims. It will continue to seek opportunities to sustainably scale up which will also allow it to generate additional income to secure its long-term sustainability and viability.

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#### **4. The Charity's vision and values**

Wherever possible, the Charity will strive to support the health and wellbeing of the people of Powys in the following ways:

##### Accessible

- Ensure that wherever possible the Charity's investment in local health care brings benefit to the community, the wider NHS and beyond.

##### Collaborative

- Look to support health improvement projects and cultivate partnerships which enable people to live healthy lives.

##### Inclusive

- Embrace equality and diversity by ensuring the Charity is of, by, and for, the people of Powys.

##### Innovative

- Play a key role in the development of greatly improved health care for Powys.

##### Sustainable

- Utilise the Charity's existing and future assets to strengthen its strategic priorities and deliver positive long-term impacts for Powys.

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## 5. Strategic priorities and key deliverables

The following priorities and objectives will outline a clear and consistent identity for the Charity. They will help to build its profile and increase the impact of its work through greater engagement and strategic investment. This strategy will ensure PTHB Charity remains relevant and sustainable for the next three years and beyond.

The priorities for this strategy have been identified through consultation with the Charity's stakeholders, which includes PTHB staff and Board members, third sector partners, patients and their families, as well as members of the community. They reflect our stakeholders' expectations of what Powys' Health Board Charity can deliver and are linked to the strategic objectives of Powys Teaching Health Board's Integrated Medium-Term Plan (IMTP) 2022-2025.

Demonstrating Responsible Leadership	
What our Stakeholders said:	What we will deliver:
<i>Ensure the Health Board's Charitable Funds are managed responsibly to deliver sustained health and wellbeing improvements for many years to come in Powys.</i>	<ul style="list-style-type: none"><li>- A commitment to swift and responsive decision making whilst maintaining high standards of good governance.</li><li>- An increase in the scale of Charity operations which ensures long-term sustainability and viability.</li><li>- New grant funding programmes to respond to emerging health and wellbeing priorities in a timely manner.</li><li>- Additional guidance which allows PTHB staff and independent members to navigate and work alongside the Charity with ease.</li><li>- Annual reviews of existing governance and bidding arrangements, audit for vulnerabilities and implement operational efficiencies.</li><li>- A clear long-term investment strategy which adopts a responsible and balanced approach to risk and ethical imperative.</li></ul>

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	<ul style="list-style-type: none"> <li>- A dedicated digital resource hub to help NHS staff and patients to find project funding in Powys.</li> </ul>
<p><u>Linked PTHB IMTP Objectives:</u></p> <p>25. Implement key governance improvement priorities embedding risk management, effective policies, procedures and guidance; audit and effectiveness; Board effectiveness and systems of accountability.</p>	
<h2>Upholding Our Civic Mission</h2>	
<p>What our Stakeholders said:</p>	<p>What we will deliver:</p>

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<p><i>There is a vital civic leadership role that the Health Board and the Charity has within the community, which needs to be a key priority.</i></p>	<ul style="list-style-type: none"> <li>- Better outcomes for communities struggling with socio economic deprivation in Powys (lack of access to services, a lack of adequate digital infrastructure or geographic disparity).</li> <li>- Increased accessibility and more equitable opportunities for foundational economy training, support, and careers in Powys.</li> <li>- A commitment to embed proactive environment and sustainability initiatives in all Charity activity.</li> <li>- Collaboration with existing PTHB services to ensure they are sustainable.</li> </ul>
<p><u>Linked PTHB IMTP Objectives:</u></p> <p>1. Take action to reduce health inequalities and improve population health.  17. Enhance the health board's role in partnership and citizenship, maximising opportunities for volunteering and healthcare careers.  20. Implement ambitious commitments to carbon reduction, biodiversity enhancement and environmental wellbeing</p>	
<h2>Enhancing NHS Services</h2>	
<p>What our Stakeholders said:</p>	<p>What we will deliver:</p>
<p><i>The Charity can provide transformational opportunities for learning, training and initiatives that can greatly improve the working environment for staff and enhance patient experience.</i></p>	<ul style="list-style-type: none"> <li>- An enhanced patient experience, particularly for those undergoing long stays in community hospitals.</li> <li>- More digitally enabled NHS services through the provision of additional kit and equipment.</li> <li>- New pilot schemes which to encourage innovation in healthcare.</li> <li>- An additional programme of support for NHS staff wellbeing.</li> </ul>

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	<ul style="list-style-type: none"> <li>- Bursary schemes across multiple Health Board service areas for Powys community members which provide beneficiaries the opportunity to learn as they work.</li> <li>- A commitment to equitable support and investment for all services and service areas.</li> </ul>
<p><u>Linked PTHB IMTP Objectives:</u></p> <p>4. Improve access to high quality sustainable primary care.          6. Improve access to high quality, equitable prevention and early intervention services for children, young people, and their families.          12. Support improved access to and outcomes from specialised services.          16. Enhance access to high quality education and training across all disciplines, specifically focusing on 'grow our own'/apprenticeships.          18. Implement clinical digital systems that directly enable improved care, including cross border clinical records sharing, clinical service priorities (nursing, eye care, prescribing), and telecare.          21. Implement capital, estate and facilities improvements that enhance services to patients/public and wellbeing/experience of staff.          24. Implement value-based healthcare, to deliver improved outcomes and experience, effective deployment and management of resources.</p>	
<h2>Establishing a Culture of Collaboration</h2>	
What our Stakeholders said:	What we will deliver:
<p><i>Through strong partnerships with other local organisations and projects, the Charity can help ensure greater joined up planning across health services. The Charity is also uniquely poised to support cross sector collaborations between the public and voluntary sectors.</i></p>	<ul style="list-style-type: none"> <li>- A strong and successful brand for PTHB Charity which is of, by, and for our stakeholders (staff, service users, volunteers, Powys residents and third sector partners).</li> <li>- Smarter and more effective use of combined resources through new collaborations with public and voluntary sector partners in the community.</li> </ul>

	<ul style="list-style-type: none"> <li>- Greater fundraising presence in the community with more resources and opportunities for those who want to raise funds for their local NHS services.</li> <li>- An established development pathway for the Charity, which includes a new volunteering network for those who want a more active role in shaping the Charity's future.</li> <li>- Engaging campaigns to widen PTHB Charity's reach to new audiences by sharing and celebrating the impact of charitable funds projects.</li> <li>- Improved project coordination across service areas and hospitals by building upon existing regional partnerships with stakeholders such as Powys' Leagues of Friends.</li> <li>- An innovative approach to health and wellbeing engagement by leveraging the expertise of the STEAM (science, technology, engineering, arts, mathematics) sector to engage staff and patients.</li> </ul>
<p><u>Linked PTHB IMTP Objectives:</u></p> <p>15. Deliver improvements to staff wellbeing and engagement, working closely with Trade Unions in Social Partnership on key joint priorities.</p> <p>23. Develop and implement key actions to enhance integrated/partnership system working in Wales and England.</p>	

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## 6. Delivery and Monitoring

This strategic plan, along with the accompanying risk register will be kept under regular review as and when needed by the Charity in order to inform decision making and future developments. Any updates will be noted accordingly.

Delivery of this strategy will be led by the Charity team and overseen by the Charitable Funds Committee and the Powys Teaching Health Board.

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## Appendix 1a – PTHB Charity Strategy Risk Assessment

RISK DESCRIPTION	Mitigation	Score
Disruption to the Charity's operations due to poor governance	<ul style="list-style-type: none"> <li>Board agreed Committee structure and Risk Management Framework.</li> <li>Assurance Framework – Board agreed principles and approach.</li> <li>Policies related to – gifts and hospitality, donations, use of charitable funds, legal fees, concerns etc.</li> <li>Regular internal audit arrangements in place and focused on risk areas.</li> <li>Annual external audit arrangements in place following review from Audit Wales (2022).</li> <li>Annual Governance Programme has been agreed by the Board.</li> <li>Self-assessment against ICO 12-steps undertaken.</li> <li>Health Board Electronic Information Asset Register developed, piloted and populated with pilot services assets.</li> <li>Mandatory IG e-learning training updated to reflect GDPR for all service areas across the HB.</li> <li>Updated Intranet and Internet GDPR pages with fair processing / privacy notices (patients and staff).</li> <li>Appointment of a Charity Manager to more closely manage policy and governance.</li> </ul>	<p>Likelihood = 2 Impact = 4</p> <p>Risk rating = 8</p>
Mismanagement of charitable funds	<ul style="list-style-type: none"> <li>Financial control measures are in place to ensure there are appropriate levels of delegation and authority with regards to the funds (approval and procurement).</li> <li>An Annual Charity Workplan has been created, with detailed actions to review and improve governance and strategy which has been approved by the Board and CF Committee.</li> <li>Appointment of a Charity Manager to more closely manage policy and governance.</li> <li>Up to date Charitable Funds policy and guidance (FCP) for staff.</li> </ul>	<p>Likelihood = 2 Impact = 4</p> <p>Risk rating = 8</p>

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RISK DESCRIPTION	Mitigation	Score
<p>Providing funding for services or projects which should fall under the 'core' provision of the NHS/Health Board.</p>	<ul style="list-style-type: none"> <li>Financial control measures are in place to ensure there are appropriate levels of delegation and authority with regards to the funds (approval and procurement).</li> <li>Appointment of a Charity Manager to more closely manage policy and governance.</li> <li>A clear has been created, with detailed actions to review and improve governance and strategy which has been approved by the Board and CF Committee.</li> <li>Regular review of the Charity's terms of reference and governing documents to ensure its ongoing compliance with legal and regulator requirements.</li> <li>Ongoing dialogue with internal and external auditors with regards to decision making processes.</li> <li>Participation in all-Wales and all-NHS discussion regarding funding criteria and decision making and channels to disseminate communications to Board members.</li> <li>Regular guidance and training for new and existing Board members with regards to the definition of core and non-core expenditure.</li> </ul>	<p>Likelihood = 2 Impact = 4  Risk rating = 8</p>
<p>Brand / reputational damage to the Charity and or Health Board</p>	<ul style="list-style-type: none"> <li>Creation of a comprehensive Charity strategy and accompanying action plan, to establish an appropriate and engaging Charity brand as well as developing stronger relationships with key stakeholders.</li> <li>Investment fund managers (Brewin Dolphin) appointed with a clear remit to manage investment of the Charity's funds responsibly and cautiously, which is regularly monitored.</li> <li>Generation of positive news coverage through newly established social channels and press releases.</li> <li>Collaboration with third sector partners to develop a more effective response to emerging health priorities, such as COVID-19 response and recovery.</li> </ul>	<p>Likelihood = 2 Impact = 4  Risk rating = 8</p>
<p>Inability to fulfil criteria of designated funding</p>	<ul style="list-style-type: none"> <li>Creation of bespoke delivery plans for harder to access and restricted funds.</li> <li>Clear guidance provided for donors and staff members to clarify the legal remit of charitable funds.</li> <li>Control measures in place to ensure donor details and declarations are recorded at the point of donation.</li> </ul>	<p>Likelihood = 3 Impact = 2  Risk rating = 6</p>

RISK DESCRIPTION	Mitigation	Score
	<ul style="list-style-type: none"> <li>Supporting information on legacy donations and appropriate Health Board contacts available from the Health Board website.</li> </ul>	
Charity becomes unsustainable	<ul style="list-style-type: none"> <li>Appointment of Investment Managers to responsibly manage the investment of Charitable Funds.</li> <li>Implementation of a sound investment strategy with an appropriate level of risk, which is regularly reviewed.</li> <li>Development of a comprehensive Fundraising strategy to maximise income generation opportunities for the Charity and develop stronger relationships with stakeholders.</li> </ul>	Likelihood = 2 Impact = 5 Risk rating = 10
Beneficiaries are unable to access funding	<ul style="list-style-type: none"> <li>Development of clear strategies/management plans for restricted/designated funds, particularly those that are inactive for longer than 12 months.</li> <li>Ensure thorough guidance on charitable funds is always available to staff and beneficiaries through the PTHB website, and relevant Microsoft SharePoint pages.</li> <li>Appointment of designated Charity ambassadors for service areas and community hospitals to support the equitable use and implementation of charitable funds.</li> <li>Maintain regular communication with staff through the Charity's communication channels (internal and external newsletters, Microsoft SharePoint, social media channels).</li> </ul>	Likelihood = 2 Impact = 3 Risk rating = 6
Funding projects that duplicate existing work / or that impact Health board plans	<ul style="list-style-type: none"> <li>An application process for projects which incorporates input from relevant service managers/leads and review by the Executive Committee prior to approval.</li> <li>Implementation of Digital Governance Board requirements for all projects which involve electronic/digital systems or which process personal information/data, prior to procurement.</li> </ul>	Likelihood = 3 Impact = 3 Risk rating = 9
New Charity brand fails to engage stakeholders	<ul style="list-style-type: none"> <li>Ensure the views of key stakeholders influence the creation and refinement of the Charity brand throughout the development process.</li> <li>Seek ongoing feedback on the brand and its communication from stakeholders through regular audience evaluation surveys.</li> </ul>	Likelihood = 2 Impact = 4 Risk rating = 8

RISK DESCRIPTION	Mitigation	Score
	<ul style="list-style-type: none"> <li>Retain the ability to adapt and develop the voice, tone and messaging of the Charity as needed.</li> <li>Development of a long-term stakeholder engagement strategy to retain and expand the Charity's key audiences.</li> </ul>	
Charity alienates existing Powys third sector organisations	<ul style="list-style-type: none"> <li>Development of a long-term stakeholder engagement strategy to retain and expand the Charity's key audiences.</li> <li>Encourage a wide variety of local and specific charitable donation options (including other third sector organisations) at a service or facility level as an option for patients, staff and their families – even if they do not provide a direct benefit to the Charity. This can and should be curated regularly at a local level to maintain relevance for the above audiences.</li> </ul>	<p>Likelihood = 2 Impact = 3</p> <p>Risk rating = 6</p>

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Charity Strategy

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**Charitable Funds Committee**  
**23 September 2022**  
**Agenda Item: 2.4**

## AGENDA ITEM: 3.1

Charitable Funds Committee		DATE OF MEETING: 23 September 2022
<b>Subject :</b>	<b>RIC Hub Innovation Fund – Charitable Funds proposal</b>	
<b>Approved and Presented by:</b>	Research & Development Manager / Charity Manager	
<b>Prepared by:</b>	Research & Development Manager / Charity Manager	
<b>Considered by Executive Committee on:</b>	N/A	
<b>Other Committees and meetings considered at:</b>	N/A	

### PURPOSE:

The purpose of this paper is to present for discussion and review, a proposal to establish a research and innovation grant scheme administered by the RIC Hub on behalf of Charitable Funds.

### RECOMMENDATION(S):

The Charitable Funds Committee is requested to review and discuss the proposal to establish an RIC Hub Innovation grant scheme.

Approval/Ratification/Decision <sup>1</sup>	Discussion	Information
<b>x</b>	✓	<b>x</b>

<sup>1</sup> Equality Impact Assessment (EiA) must be undertaken to support all organisational decision making at a strategic level  
RIC Hub Innovation Grant  
Scheme proposal

**THE PAPER IS ALIGNED TO THE DELIVERY OF THE FOLLOWING STRATEGIC OBJECTIVE(S) AND HEALTH AND CARE STANDARD(S):**

Strategic Objectives:	1. Provide Early Help and Support	✓
	2. Tackle the Big Four	✓
	3. Enable Joined up Care	✓
	4. Develop Workforce Futures	
	5. Promote Innovative Environments	✓
	6. Put Digital First	
	7. Transforming in Partnership	✓
Health and Care Standards:	1. Staying Healthy	✓
	2. Safe Care	✓
	3. Effective Care	✓
	4. Dignified Care	✓
	5. Timely Care	✓
	6. Individual Care	✓
	7. Staff and Resources	✓
	8. Governance, Leadership & Accountability	✓

**EXECUTIVE SUMMARY:**

**The purpose of this paper is to request the Charitable Funds Committee discuss the proposal of the following:**

- **Three-year RIC Innovation Grant Scheme (£105,000 - £150,000)**

Full details of the proposal can be found at Appendix 1-2.

**DETAILED BACKGROUND AND ASSESSMENT:**

This proposal is seeking the establishment of a new grant scheme to support innovative projects across the regional partnership, with responsibility for the allocation of the fund delegated to the RIC Hub (with input and oversight by the Executive Committee and the Charitable Funds Committee).

The RIC Hub is seeking £35,000-£50,000 per year for an initial period of three years.

This will allow time for the fund to establish and provide sufficient opportunity to evaluate the efficacy of the fund. The scheme will support individual health and care innovation / improvement projects, which seek to implement sustainable system improvements.

Funding will be allocated to individual projects, subject to successful application. All applications for funding would be required to be presented to Executive Committee in advance of the RII Panel, and the Charity Manager would also be consulted in advance, to ensure that projects are eligible to be funded from Charitable Funds.

Decisions made by the RII panel to grant charitable funds to support innovation would be ratified by the Charitable Funds Committee.

All procurement and spend associated with the projects that are granted charitable funds to support innovation will be subject to normal Financial Control Procedures, levels of authorisation, digital governance review, etc. for assurance.

### NEXT STEPS:

Once reviewed by the Committee, feedback will be given to the project team with a view to the proposal proceeding to the Executive Committee for review and support, before returning to the Charitable Funds Committee for a decision.

**The following Impact Assessment must be completed for all reports requesting Approval, Ratification or Decision, in-line with the Health Board's Equality Impact Assessment Policy (HR075):**

IMPACT ASSESSMENT				
Equality Act 2010, Protected Characteristics:				
	No impact	Adverse	Differential	Positive
Age	✓			
Disability	✓			
Gender reassignment	✓			
Pregnancy and maternity	✓			
Race	✓			
Religion/ Belief	✓			
Sex	✓			
<p style="text-align: center;"><b>Statement</b></p> <p style="text-align: center;"><i><b>Please provide supporting narrative for any adverse, differential or positive impact that may arise from a decision being taken</b></i></p>				



<b>Sexual Orientation</b>	✓								
<b>Marriage and civil partnership</b>	✓								
<b>Welsh Language</b>	✓								
<b>Risk Assessment:</b>									
	<b>Level of risk identified</b> <table border="1"> <tr> <td><b>None</b></td> <td><b>Low</b></td> <td><b>Moderate</b></td> <td><b>High</b></td> </tr> </table>				<b>None</b>	<b>Low</b>	<b>Moderate</b>	<b>High</b>	<p align="center"><b>Statement</b></p> <p align="center"><i>Please provide supporting narrative for any risks identified that may occur if a decision is taken</i></p>
<b>None</b>	<b>Low</b>	<b>Moderate</b>	<b>High</b>						
<b>Clinical</b>	✓								
<b>Financial</b>	✓								
<b>Corporate</b>	✓								
<b>Operational</b>	✓								
<b>Reputational</b>	✓								

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## Appendix 1 – RIC Hub Innovation Grant Scheme Proposal

<b>PTHB Charitable Funds - Full Application Form</b>	
<b>Please choose who will benefit from this proposal (select all that apply):</b>	
PTHB Staff and Volunteers	<input checked="" type="checkbox"/>
PTHB Patients	<input checked="" type="checkbox"/>
Community	<input checked="" type="checkbox"/>
Other (specify below)	<input type="checkbox"/>
<b>Please note which locality will benefit from this proposal (select all that apply):</b>	
North Powys	<input checked="" type="checkbox"/>
Mid Powys	<input checked="" type="checkbox"/>
South Powys	<input checked="" type="checkbox"/>
Other (specify below)	<input type="checkbox"/>
<b>Please note the most relevant health and wellbeing area for this proposal (e.g. mental health, recovery from COVID-19, physiotherapy, cancer care, etc.)</b>	
All health and care areas across Powys will have opportunity to benefit from this proposal, subject to application to the Regional Innovation Coordination (RIC) Hub and approval by the Research, Innovation & Improvement (RII) Panel.	
<b>Project summary</b> – Provide a brief summary of the proposal and outline what it aims to address.	

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This proposal is seeking the establishment of a specific fund to support innovative projects across the regional partnership, with responsibility for the allocation and granting of the fund delegated to the RIC Hub.

The role of the RIC Hub is to improve quality and value by supporting purpose-driven innovation and rapid improvement activity within each Regional Partnership Board (RPB) footprint.

The RII Panel meets weekly to consider all applications for research, service evaluation, improvement, and innovation projects; and is constituted of staff from the RIC Hub and the wider improvement agenda, research and development (including the Clinical Lead for Research), and Information Governance Colleagues. The panel is chaired by the Research & Development Manager.

All applications for funding would be required to be presented to Executive Committee in advance of the RII Panel, and the Charity Manager would also be consulted in advance, to ensure that projects are eligible to be funded from Charitable Funds. Decisions made by the RII panel to grant charitable funds to support innovation would be ratified by the Charitable Funds Committee.

All procurement and spend associated with the projects that are granted charitable funds to support innovation will be subject to normal Financial Control Procedures, levels of authorisation, digital governance review, etc. for assurance.

**Background** – Outline any relevant information that will provide context for the proposal, including the need and any previous proposals or projects.

The Welsh Government's (WG's) 'A Healthier Wales: our Plan for Health and Social Care' confirmed the need for a common approach across Wales to the identification and co-ordination of innovative and transformational delivery service models, and new ways of working that contribute to making our services better. To drive this forward, RIC Hub was established in each RPB.

The COVID-19 pandemic saw the introduction of new ways of working and innovations at a pace unparalleled previously, whilst at the same time, whole projects were abandoned, adapted and even accelerated. The Hub has taken a lead role in gathering insights and learning, not only in relation to COVID-19, but from other sources of intelligence, observation and engagement in various projects, programmes and ways of working, managing and even measuring performance, quality and safety. It is the central coordination role of the Hub and its central tenets of learning and pushing progress, that provides the prime position to support integration, collaboration and add value to the RPB by coordinating, facilitating and driving RII activity that

meets the needs of the people of Powys, reflects what is important to them and to the organisations across the partnership, and aligns to the strategic objectives at a regional and national level.

The RIC Hub will support improvement and innovation by embedding the infrastructure and enabling conditions needed in Powys by identifying the current state of play, the needs and the gaps in the region, as well as the broader activity, direction of travel and opportunities in the broader landscape; understanding what is important to the region, the RPB partnership and the people of Powys; supporting the workforce and developing RII capacity and capability; developing networks, partnership and collaborations that are essential to progressing ideas through research and innovation pathways; understanding the data that exists, what it tells us and what we can and should be doing with it; and, sharing our ideas and learning from others.

The RIC Hub aims to improve outcomes for service users by identifying and promoting high-value innovation and improvement activity, for example through prevention, earlier diagnosis, more accurate intervention, and addressing unwarranted variation and duplication in the system.

To further embed the RIC Hub across the RPB, the RIC Hub is positioning itself within the Health and Care Academy (HCA) as one of the four schools that constitute the HCA, the School of Research, Development and Innovation. The HCA is heavily focused on integrated approaches, with each 'school' offering a collaborative portfolio of specialism underpinned by research, development, innovation and strong leadership. Therefore, the RIC Hub will be central to activity across the breadth of the HCA.

WG funding for the RIC Hub to date has been granted year on year, with funding for the current financial year (2022-23) confirmed in January 2022. The grant offer is purposed solely for the sustainability of the RIIC Hub in the undertaking of innovation activities to serve as a catalyst for innovation, supporting and strengthening local and national innovation enterprise through better co-ordination and prioritisation of impactful activity. Full funding for innovation and improvement activity is outside the scope of the WG award.

The proposal underpins and will support delivery of a number of the strategic priorities within the Health Board's Charity Strategy, as follows: -

- *Enhancing NHS Services:*
  - More digitally enabled NHS services through the provision of additional kit and equipment.
  - New pilot schemes to encourage innovation in healthcare.
- *Establishing a Culture of Collaboration:*

- Smarter and more effective use of combined resources through new collaborations with public and voluntary sector partners in the community.
- An innovative approach to health and wellbeing engagement by leveraging the expertise of the STEAM (science, technology, engineering, arts, mathematics) sector.

**Project plan** – Please provide a detailed breakdown of the project, how it will address need and a timeline for delivery.

Key activities to be undertaken through the RPB partnership in 2022-23 include: -

- Embed the RIIC Hub within the Health & Care Academy School of Research Development and Innovation.
- Implement a regional web-based interface for RII activity with both workforce and public facing content.
- Capture and share learning across RPB partners.
- Increase Research, Innovation and Improvement Capacity and Capability across the partnership.
- Key partnerships strengthened, evidenced through joint working and collaborative bids, research and innovation, aligned to RPB priorities.
- There has been a lot of collaboration across the partnership over the winter to combat system pressures. Work will be undertaken to evaluate this through the Powys Delivery Coordination Group.
- Develop a Framework that enables better collaboration with academia, industry and commercial sectors.
- Active participation and involvement in the development of Wales Institute of Digital Information (WIDI), accelerating the use of digital technology to improve the health of Wales by putting the person at its core.
- Explore the introduction of Digital Fellows to drive innovation across the region.
- Undertake work with staff to understand what the top 5 issues / challenges are that we need to solve through the use of Technology Enabled Care.
- Undertake work with the public to understand their top 5 priorities for health and care.
- Establish an Innovation and Improvement Peer Group to share learning and experiences.
- Coordinate coaching and mentoring to support others, provide advice, support, challenge and expertise to further develop skills as well as contributing to sharing ideas.
- Support future projects through understanding what work has already been undertaken locally, regionally and wider afield that could inform the project.

- Capture system-wide new ways of working learned through COVID-19.
- Enable and support adopt and spread through creation of a process to identify, capture, monitor, record, track and evaluate projects that have potential to upscale and spread.
- Strengthen RI&I across health and care integrated services.
- Through well-established networking, bring to the RPB new ways of working and innovations proven elsewhere to test, adapt and adopt.
- Increase awareness and profile of the RIIC Hub through the building of a social media presence.
- Further strengthen relationships with academia through coordination of student placements to enhance student skills and expertise, while contributing to delivery of innovative project activity.
- Establish our approach to relaunching Powys as a centre for research and development.
- Enable a review of the multi-agency response to the COVID-19 pandemic.

The above work is included within the scope of the current RIC budget. However, to accelerate and support the drive towards better quality and value for health and care, through a culture of purposeful innovation, additional funding is sought to support individual health and care projects across Powys.

These projects have not yet been identified, but the above activities will promote and identify innovative projects and activities that could be taken forward through the availability of charitable funds.

**Evaluation & Legacy** – Detail your plans for evaluating the project and explain the project’s sustainability.

The fund will support individual health and care innovation / improvement projects, which seek to implement sustainable system improvements. Each project supported by the fund will be subject to approval by the RII panel prior to the granting of any funds. Anyone applying for funding will be required to confirm within their application that they will provide regular performance and evaluation reports to monitor progress and to contribute to the repository of lessons learned that the RIC Hub coordinates.

The performance and evaluation framework will reflect the framework currently being developed for projects funded by the Welsh Government Regional Integrated Fund, of which the RIC Hub is currently overseeing the development of. The framework will facilitate the evaluation and learning of projects by adopting the Developing Evidence Enriched Practice (DEEP) principles, which is a co-production to gathering, exploring and using diverse

types of evidence in learning and development using story and dialogue methods. This will include stakeholder stories, pictures and measures of success.

As part of the bid application process, projects will be required to detail their exit strategy, which specifies how the project will maintain sustainability in the longer term. The RIC Hub will offer advice and support to services to develop sustainability plans.

**Resources** - Try to provide a detailed breakdown of the budget and resources required, including quantities and cost per item.

The RIC Hub is seeking an allowance of between £35,000 - £50,000 for the RIC Hub Charitable Fund, for an initial period of 3 years. This will allow time for the fund to establish and provide sufficient opportunity to evaluate the efficacy of the fund.

Funding will be allocated to individual projects, subject to successful application. Each application will be subject to considerable scrutiny and will be required to commit to provide regular performance and evaluation monitoring, prior to approval by the RII panel. As described above, decisions made by the RII panel to grant charitable funds to support innovation would be ratified by the Charitable Funds Committee.

### Contact details

Name: Caroline Evans

Email address: [caroline.evans7@wales.nhs.uk](mailto:caroline.evans7@wales.nhs.uk)

Phone number: 07769 838383

Delivery address (if applicable):

### Declaration

I have read the PTHB Charitable Funds staff guidance document. ☒

I have read the FCP (INTERIM) – COVID 19 Decision Making & Financial Governance document found [here](#). ☒

I confirm that this funding will only be used for the purposes specified in this application. ☒

### Applicant

**Name:** Caroline Evans

**Role:** RIC Hub Manager

**Signature:**



**Date:** 18<sup>th</sup> August 2022

<b>Approving manager</b>	
<b>Name:</b>	<b>Role:</b>
<b>Signature:</b>	<b>Date:</b>
<b>Approving executive director (if request is above £25,000)</b>	
<b>Name:</b>	<b>Role:</b>
<b>Signature:</b>	<b>Date:</b>

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## Appendix 2 – Draft fund guidelines



### Powys Regional Innovation Coordination (RIC) Hub Innovation Grant Funding Guidelines

PTHB Charity is the registered charity (charity no. 1057902) for the whole of the Powys Teaching Health Board, which looks after all donations that are made to PTHB staff, services, and hospitals. The Powys RIC Hub Innovations Grant scheme has been funded through the PTHB Charity. The grant scheme aims to distribute funding for the purpose of developing innovative solutions for health and care activity across the footprint of Powys.

All projects should aim to enhance or improve the health and wellbeing of NHS staff, patients and the community above and beyond what can be provided through core funding, through the application of innovation. Applicants will need to demonstrate how their proposals meet the criteria and outline their plans for evaluation and reporting.

Funding is open for all Powys health and care staff wishing to seek support for innovative projects to make an application by completing an application form and returning it to the RIC Hub (details below).

Eligible proposals will be reviewed and approved by the Executive Committee and the Research, Innovation and Improvement Panel.

#### What can be supported?

Examples of projects that can be supported through innovative Charitable Funds are: -

- Staff costs for a specific innovation project with a defined scope and timeframe.
- Research projects that seek to identify innovative solutions.
- Implementing technological solutions that will enhance the delivery of health and care, e.g., Robotics, Artificial Intelligence, Apps.

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- Implementing technological solutions that will support the delivery of health and care solutions, e.g., Digital, Patient Records, Infrastructure.
- Evaluating, defining or implementing different ways of working.
- Defining and developing new processes.

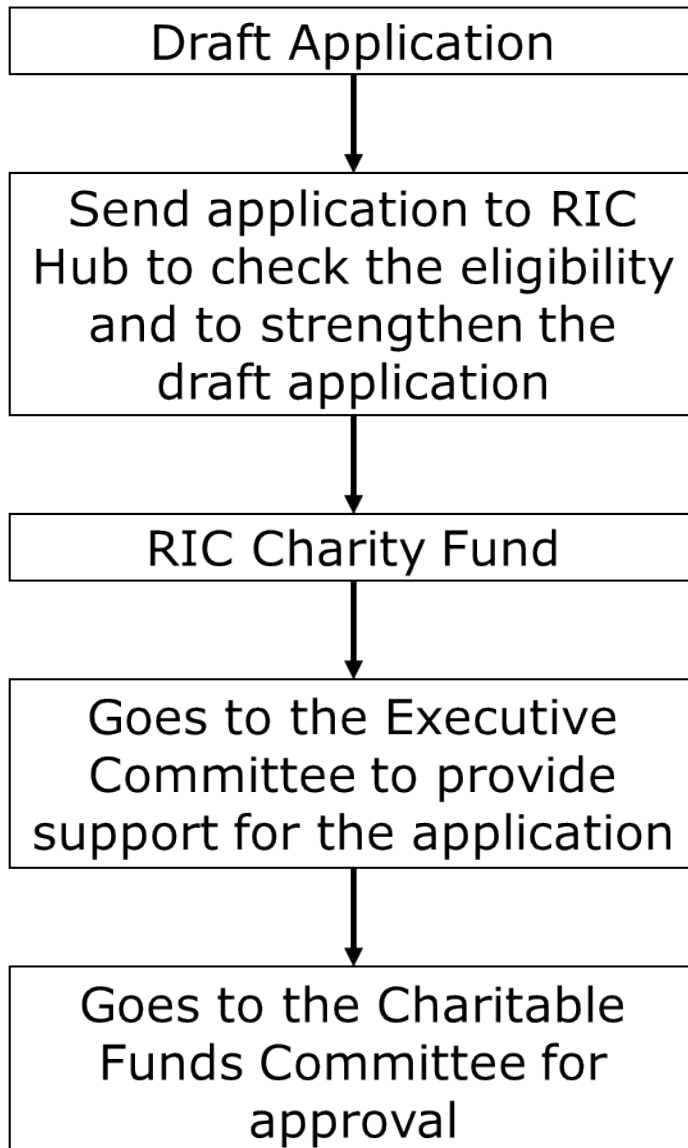
The use of funds should be able to pass a public perception test, and applicants should refer to the **PTHB Charity Funding Guidelines** alongside this document when considering their application.

**All proposals and questions should be submitted to the RIC Hub at the email address: [bright.ideaspowys@wales.nhs.uk](mailto:bright.ideaspowys@wales.nhs.uk)**

The above lists are not exhaustive, exceptions apply, and staff are encouraged to contact the RIC Hub with any questions, or to discuss a potential proposal before submitting.

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## Application process



Please note, the process can take approximately 2-3 months from submission of application to approval – applicants are advised to allow for 3 months

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## Tips for a successful application

Based on previous applications to the Charity, we've developed the following top tips to help you on your way to creating a successful project proposal.

- **Community** – who are all the possible beneficiaries of the project, direct and indirect?
- **Why?** – What was the impetus for the project and how can it make a positive impact for all those involved?
- **Resourceful** – demonstrate that you are making the best use of resources and tools to enhance your project where possible.
- **Partnership** – consider linking in with other groups/organisations that may have valuable experience and input.
- **Legacy** – tell us what kind of long-term or lasting impact your project might have beyond the life of the project.
- **Evaluation** – please don't underestimate the value of a good evaluation plan, it will tell the story of your project.
- **Exit** – explain if/how your project will continue after the charitable funding has come to an end. Will there be new funding opportunities? Will it still be necessary by then?

**All proposals and questions should be submitted to the RIC Hub, at the email address: [Bright.IdeasPowys@wales.nhs.uk](mailto:Bright.IdeasPowys@wales.nhs.uk)**

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**AGENDA ITEM: 3.1**

<b>Charitable Funds Committee</b>		<b>DATE OF MEETING: 23 September 2022</b>
<b>Subject:</b>	<b>Charity Activity Report</b>	
<b>Approved and Presented by:</b>	Charity Manager	
<b>Prepared by:</b>	Charity Administrative Support Officer & Charity Manager	
<b>Considered by Executive Committee on:</b>	N/A	
<b>Other Committees and meetings considered at:</b>	N/A	

**PURPOSE:**

To present a summary of key Charity engagement activity.

**RECOMMENDATION(S):**

The Charitable Funds Committee is requested to NOTE the summary of activity for the Charity in the period since the last Committee meeting.

<b>Approval/Ratification/Decision<sup>1</sup></b>	<b>Discussion</b>	<b>Information</b>
<b>x</b>	<b>✓</b>	<b>x</b>

**THE PAPER IS ALIGNED TO THE DELIVERY OF THE FOLLOWING STRATEGIC OBJECTIVE(S) AND HEALTH AND CARE STANDARD(S):**

Strategic		
-----------	--	--

<sup>1</sup> Equality Impact Assessment (EiA) must be undertaken to support all organisational decision making at a strategic level

Objectives:	1. Provide Early Help and Support	✓
	2. Tackle the Big Four	✓
	3. Enable Joined up Care	✓
	4. Develop Workforce Futures	✓
	5. Promote Innovative Environments	✓
	6. Put Digital First	✓
	7. Transforming in Partnership	✓
Health and Care Standards:	1. Staying Healthy	✓
	2. Safe Care	✓
	3. Effective Care	✓
	4. Dignified Care	✓
	5. Timely Care	✓
	6. Individual Care	✓
	7. Staff and Resources	✓
	8. Governance, Leadership & Accountability	✓

### EXECUTIVE SUMMARY:

The report highlights key activities and provides context for the period including:

- **Fundraising and key donations**
- **Ongoing projects and partnerships**
- **Communications and campaigns**
- **Social media report**

The detailed summary of activity can be found at Appendix 1.

### DETAILED BACKGROUND AND ASSESSMENT:

The report at Appendix 1 has been compiled to summarise the key areas of development for the PTHB Charity during the period.

### NEXT STEPS:

There are no next steps as a result of this paper.

**The following Impact Assessment must be completed for all reports requesting Approval, Ratification or Decision, in-line with the Health Board's Equality Impact Assessment Policy (HR075):**

### IMPACT ASSESSMENT

**Equality Act 2010, Protected Characteristics:**

	No impact	Adverse	Differential	Positive	<p align="center"><b>Statement</b></p> <p align="center"><i>Please provide supporting narrative for any adverse, differential or positive impact that may arise from a decision being taken</i></p>
Age	✓				
Disability	✓				
Gender reassignment	✓				
Pregnancy and maternity	✓				
Race	✓				
Religion/ Belief	✓				
Sex	✓				
Sexual Orientation	✓				
Marriage and civil partnership	✓				
Welsh Language	✓				
<b>Risk Assessment:</b>					
	<b>Level of risk identified</b>				<p align="center"><b>Statement</b></p> <p align="center"><i>Please provide supporting narrative for any risks identified that may occur if a decision is taken</i></p>
	None	Low	Moderate	High	
Clinical	✓				
Financial	✓				
Corporate	✓				
Operational	✓				
Reputational	✓				

## Appendix 1

### Charity Activity Report (June 2022 – September 2022)

Continuing from the launch of the campaign in May, the Big Tea was the biggest focus for the Charity team across the summer period. Extending the campaign from a typical one-day event on the 5<sup>th</sup> July to a month long celebration created additional opportunities for staff members to participate. This was particularly welcome amongst clinical staff, whose schedules made planning a team-wide Big Tea challenging in the past. While the extended event needed additional preparation time from the Charity team, overall, it is likely a model we will continue for future years as it allowed for smaller engagements over a longer period of time which ultimately reached more staff than in the previous year.

The Charity team has been busy over the past few months developing the new three-year charity strategy with the support of Board members and other stakeholders as well as starting work on brand development with its external partner jamjar pr. The brand development work will continue to ramp up towards the end of the year with planned events to engage staff members and the public with drafts and plans for the new visual identity ahead of committing to a launch campaign in early 2023.

A brand new Sharepoint site for PTHB Charity was also launched in August on the staff intranet. The microsite, which is accessible to all PTHB staff, compiles all key Charity and charitable funds information for staff members and is an additional route for the Charity team to engage staff. Information on how to apply for PTHB Charity funding, the process, successful projects and key activity is all included on the new web pages with additional support for services on accessing external funding through the Charity also a newly added feature. The preparation and rollout of the Sharepoint site has proved to be a valuable experience in preparation for creating a future PTHB Charity website.

#### Funding & key donations

The Charity team has continued to encourage community fundraisers to create their own fundraising initiatives for the local causes close to their heart as part of efforts to increase the number of active community fundraisers. This follows a large increase of community fundraising in 2020 and subsequent decline in 2021. The Charity team will continue to push for fundraisers to return to support their local NHS charity over the coming months.

The following key donations and grants from organisations and members of the public were received during the period:



Date	Donation/Grant amount	Donor	Information
June 2022	£1,000	Legacy donation	Legacy donation made to Montgomery County Infirmary, which will be completed within the next 4-6 months with the completion of the estate.
June 2022	£45	Community member	Donation to Welshpool Minor Injury Unit, which was made in error to BCUHB and transferred directly through
June 2022	£310	Glantawe Lions	Donation made to Ystradgynlais Hospital as part of funds raised by their Tree of Light scheme.
July 2022	£144	The Original Factory Shop	Donation made from purchases made by customers in store for Machynlleth Hospital.
July 2022	£160	Various (PTHB Staff)	Funds raised by PTHB staff via local Big Tea events through Just Giving.
August 2022	£375 raised in total	Katie Williams (Community Member)	Fundraiser for Ystradgynlais Hospital, originally launched in late 2021 and completed in August.

Additional gifts and contributions continue to be made to staff at various hospital sites from local businesses and community members, which are logged separately by the Charity.

An excerpt from the fundraiser created by community member Katie Williams, who arranged and completed a sky dive in memory of her grandmother to raise funding for Ystradgynlais Community Hospital in August 2022:

*"I will be raising money for Ystradgynlais Hospital as I unfortunately lost my beautiful grandmother last year which has been difficult to understand and came as a huge shock. Due to the pandemic we did not have the opportunity to say our goodbyes or give my grandmother the send off she deserved, therefore I would like to be able to do one last thing for her. My grandmother and my grandfather both spent time at Ystrad hospital and they were always well cared for and in safe hands. My grandmother also spent some time at the day service which gave back the confidence she lost after my grandfather and it was a safe place for*

*her to receive the support and company she needed and she was always so thankful. I would love to do this skydive in memory of my special grandmother and to raise money for a hospital close to our hearts and a hospital we often talked about ♥ Thank you xx"*

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## **Ongoing projects and partnerships**

### NHS Charities Together

The Charity is currently working to ensure all stages of the COVID related funding that NHS Charities Together has made available to PTHB is committed. A major project in the form of the Diolch Powys staff event is a recent example supported through the fund. The event has currently been postponed following developments in early September with the passing of Her Majesty Queen Elizabeth II, with a view to being hosted at a later date and a renewed focus on roadshow events across Powys to ensure an equitable reach for the project and greater potential for staff engagement.

A COVID Recovery grant proposal has been developed with the workforce team, which will utilise the entirety of Stage 3 funding whilst a similar proposal is also being developed with PAVO for the Community Partnership grant scheme. Both projects have a value of circa £50-55,000. The outcome of the workforce proposal is expected imminently before the end of the year while the PAVO project application is due to be submitted in April 2023, with a view to being delivered over a two-year period.

Alongside these projects, the Charity will also bid for a development grant of £30,000 from NHS Charities Together in late 2022 which can support Charity team operations and help to implement key projects to build the Charity's reach, such as the creation of a new Charity website. More details of this proposal will be shared at the next meeting of the Charitable Funds Committee in December 2022.

### PTHB Charity New Brand Development

Beginning in earnest this month, external marketing agency Jamjar pr has started work on drafting the new visual identity and branding guidelines for the PTHB Charity. This work includes a potential new name, tone and messaging for all internal and external communications moving forwards. Jamjar and the Charity team are currently working towards a potential launch of the

new branding in late January 2023. The Charity team has assembled a project team to help inform development with input from key stakeholder groups but will be sharing early draft ideas for feedback in the coming weeks with Committee members and audience groups.

#### End of Life Care Charitable Funds Project – 'Eirlys'

Following the September 2022 project steering group meeting, the End of Life Care project will now proceed with a new project name 'Eirlys', which was chosen following several rounds of voting via PTHB staff and Powys residents. The name, which translates to 'snowdrop' in Welsh will be used to promote the new programme of End of Life Care support in Powys. It will be used on support materials for patients and their families as well as staff, to support the dying and bereavement process in Powys. This material has been finalised and will roll out to services in the coming months.

The project team is in the process of working with ward teams at Bronllys, Llanidloes and Newtown to support palliative care suite improvements through connected outdoor spaces with work currently delayed until the end of the current financial year. This is following consultation with the Health Board's Estates team, with extensive survey work taking place across community hospital sites over the coming months which will inform the planned improvements to outdoor and green spaces.

#### Health and Care Academy

The official launch date of the Health and Care Academy is fast approaching, tentatively set for October after many months of preparation by the project team. The Academy is part of a Wales-wide initiative to increase local access to education, training and development across the health and social care sector. Both board members and the Charity team have participated in tours of the new facilities which were supported through Charitable Funds in June and July. The funds have been utilised to provide additional furnishings and digital equipment which allow for new and innovative opportunities for teaching/learning for health and social care learners and provide greater flexibility for the academy to host PTHB services and external events and staff. The academy has already been soft launched to test functions over the last few months and the project and Charity team will be sharing more information about the impact of this new facility in the lead up to the launch next month.

#### Improving the Cancer Journey – Books about living with cancer

This ICJ project to provide additional books to support those living with a cancer diagnosis and treatment which was funded in March 2021 has continued to prove popular with community members. A recently published article in the Abergavenny Chronicle in August is part of the continued PR campaign by the ICJ team:

[Libraries have a wealth of cancer advice books | abergavennychronicle.com](https://www.abergavennychronicle.com)

Coverage of the project to date has also been included in My Welshpool, County Times, Brecon and Radnor Express and My Newtown publications.

## Campaigns & communications

Following on from June, the Big Tea campaign was the primary focus and predominant campaign for the Charity during the last quarter. With initial comms starting from May, the campaign ran into July with events taking place throughout that month in person and online. In-person events had not been possible in 2021 due to the nature of COVID restrictions at that time and were tentatively reintroduced alongside as an option for the Big Tea this year alongside virtual events. The take up and interest in these was far higher than virtual events, with anecdotal feedback from participants that there was a general fatigue with virtual events which may have impacted the lower take-up despite a longer period of promotion. The Charity team will use feedback from the events to inform its plans for July 2023, which will also mark the 75<sup>th</sup> anniversary of the NHS with more options for in person events across multiple PTHB sites (in person events featuring the Charity team were limited to Bronllys this year, although staff also held events in Newtown and Llanidloes).

Through September and October, the Charity team will focus on targeting new staff members in the Knighton and Machynlleth areas where engagement is low and also increasing general awareness amongst all donors of the benefits and impact of Gift Aid donations. Opt-ins for Gift Aid have been low across both virtual and in-person donations which we are keen to address with new and improved guidance and examples of the impact this relatively simple action can make. A Christmas campaign will also return this year, starting in late November although this is expected to be somewhat impacted by the planned launch of the Charity's new branding early in the new year, which will likely take up a large amount of staff resource during that period.

We will continue to share all of the information on our campaigns and updates through our monthly newsletters. A full breakdown of our social media engagement for June 2022 through August 2022 can be found below.

## Social media engagement report

### Social Media glossary

- **Engage** – Attracting users’ attention and actively involving them in a conversation.
- **Engagement Rate** – A social media metric to describe the number of interactions users have had with a piece of content (i.e. “Liking”, retweeting, commenting etc.)
- **Follow** – Subscribing to the updates of fellow users. Typically applies to Twitter and Instagram.
- **Follower** – A subscriber of another user’s feed. Typically applies to Twitter and Instagram.
- **Following** – Users whose feeds you subscribe to. Typically applies to Twitter and Instagram.
- **Organic Reach** – The number of people who saw your post without paying to promote it.
- **Reach** – The total number of people who saw your post (includes organic and paid reach).
- **Tweet** – A post on popular micro-blogging site Twitter.
- **Tweet impression** - Twitter impressions show **how many total times people have seen your tweet**. In other words, 500 impressions = your tweet has been seen 500 times.

The primary social media aims of the PTHB Charity team in 2022 have been to increase social media presence with the public (predominantly Powys community) as well as PTHB Staff. Therefore, we looked at taking part in campaigns which would involve both of those audiences. The planned Big Tea event held annually by NHS Charities Together in July which celebrated the NHS birthday was a great opportunity to connect with our audience on a bigger scale than before. Throughout July, PTHB Charity invited communities and NHS staff to participate in hosting or attending a Big Tea. While giving thanks to the NHS it also provided an opportunity to encourage fundraising.

PTHB Charity launched the fundraising campaign in May 2022, with a large focus on asking colleagues and communities to sign up to host their own big tea. Then leading into June our social media focused on how to donate and where they could attend a

Big Tea. Finally, July focused on interaction and engagement. The social media channels share content from Big Teas hosted, the amount raised and a thank you to those who hosted a tea and attended a tea.

While some areas of the campaign were highly successful, for example content that showcased Big Teas that were hosted (On Twitter North Powys Palliative Care Team's Big Tea reached on 128 people with an engagement rate of 7.0%). Overall, our less successful areas were our 'sign up to a big tea' post, it did not gain much engagement and it did not accomplish our aim. Our lowest interactive post on twitter was a countdown post (4 days to go) which reached 33 people and on Facebook it was a countdown post (1 week to go) which reached 19 people.

On the whole, the social media campaign was successful in helping raise the profile of PTHB Charity on social media. Our get involved post was extremely successful on Facebook, it reached over 208 people and was our third highest post between May – Jul 2022, followed closely by a countdown post (2 days to go) and images from Big Teas hosted by PTHB Staff.

On Twitter our Big Tea Campaign' launch reached over 142 people with an engagement rate of 11.3% and but our highest on Twitter was a reminder to join our virtual Big Tea hosted by PTHB Charity, which reached 172 people.

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Moving away from Big Tea, in August PTHB Charity wanted to follow up with information on how to fundraise, using JustGiving and sharing good news. Our most successful post featured a Projects for Powys post, highlighting the recent article published by Liz Glyn-Jones. This post reached over 1,031 and had 27 engagements. Another post which was received well was a well done post to Katie Williams who was skydiving to raise money for Ystradgynlais Community Hospital. That post reached 305 people and had 7 engagements.



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### Twitter breakdown as of the 31 August 2022:

- Tweet impression increased by 128.6%
- Profile visits decreased by 67.8%
- Gained 3 new followers
- There was a total of 253 profile visits

### Highest Tweet impressions

- **June 2022** – A post calling for our followers to complete a survey reached 140 people
- **July 2022** – A post highlight our last big tea event reached 169 people
- **August 2022** – A Post featuring the Research Midwife post and an article published reached 1,018 people

### Facebook breakdown as of the 31 August 2022:

- Page views decreased by 26%
- Post reach decreased by 21% (total reach 93 people)
- Post engagement increased by 23%
- Page followers increased by 0% (1 new followers)

### Highest post reach

- **June 2022** – A post featuring the small grants scheme reached 224 people
- **July 2022** – A countdown post highlight 2 days to go until the launch of the Big Tea reached 165 people
- **August 2022** – A Post featuring the Research Midwife post and an article published reached 43 people

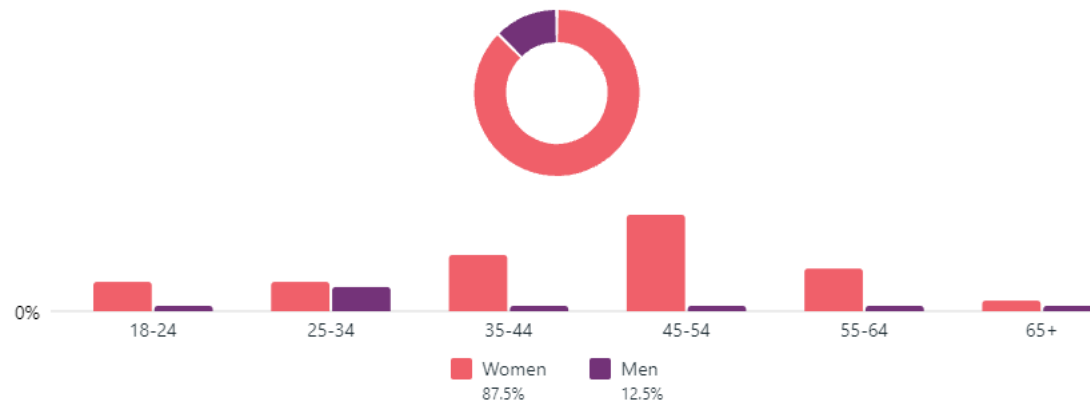
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Facebook Page likes ⓘ

114

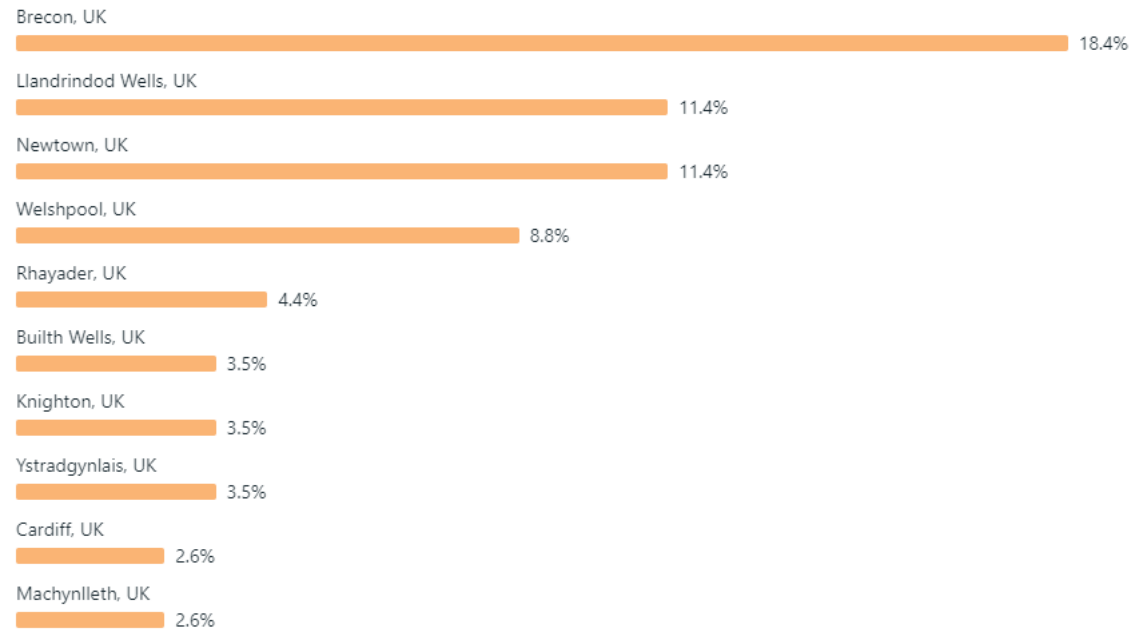
Age & gender ⓘ



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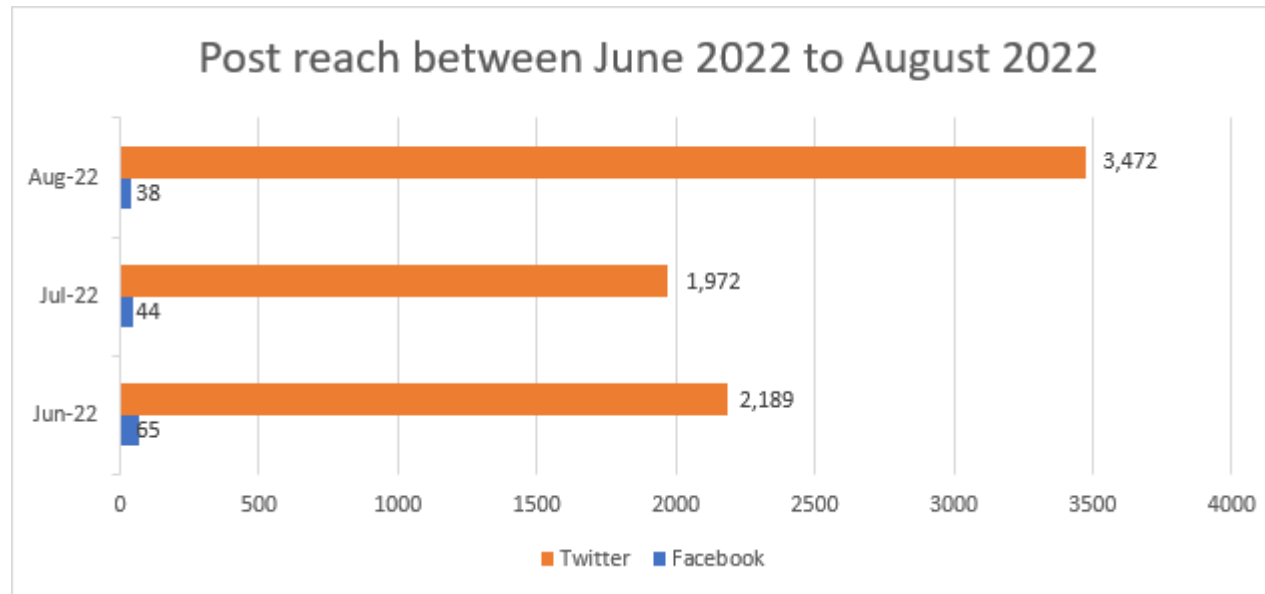
#### Top cities



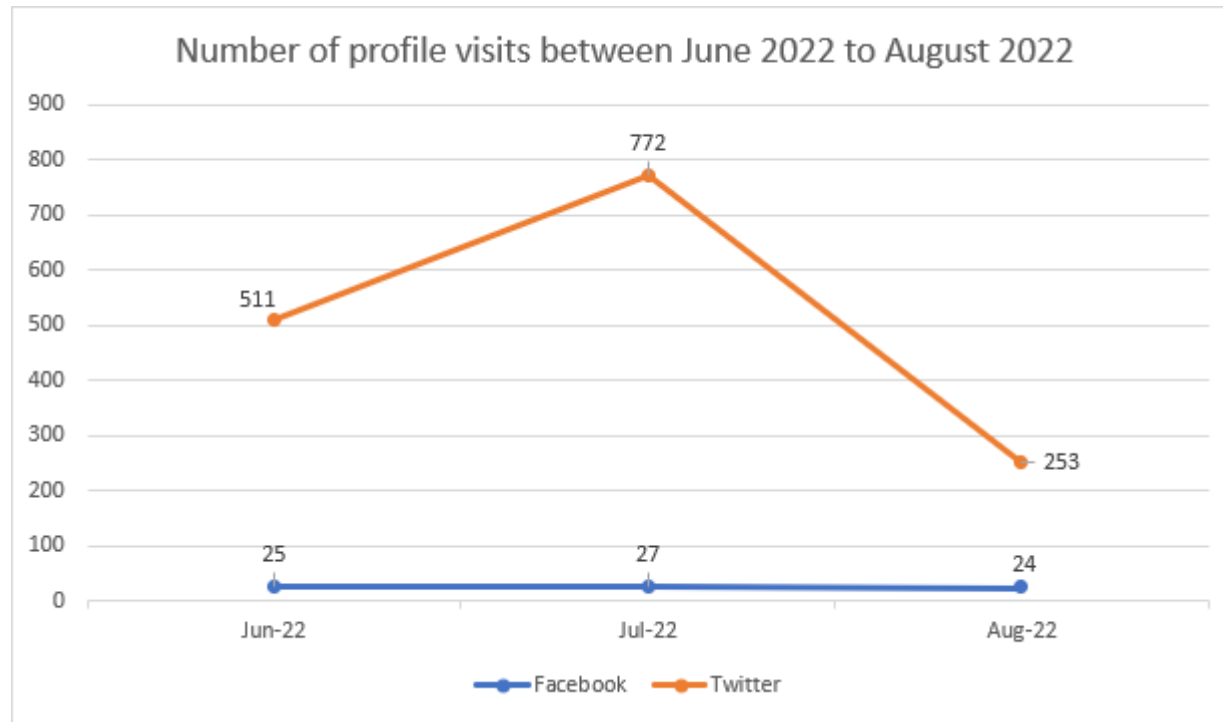
#### Top countries



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# Powys THB Finance Department

## Charitable Funds Financial Summary

### Charitable Funds Committee

**Period End June 2022 (Month 03)**  
**FY 2022/23**

**Date Meeting: 23<sup>rd</sup> September 2022**

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<b>Subject:</b>	<b>CHARITABLE FUNDS FINANCIAL SUMMARY AT END JUNE 2022</b>
Approved & Presented by:	Pete Hopgood, Director of Finance
Prepared by:	Sarah Pritchard, Head of Financial Services
Other Committees and meetings considered at:	None

<b>PURPOSE:</b>
This paper provides the Committee with an update Expenditure Profile of the Charitable Funds for the period from 1st April 2022 to 30 <sup>th</sup> June 2022.
<b>RECOMMENDATION:</b>
<p>It is recommended that the Committee:</p> <ul style="list-style-type: none"> <li>• DISCUSS and NOTE financial summary.</li> <li>• NOTE the current level of income received and expenditure of funds from 1st April 2022 to 30<sup>th</sup> June 2022.</li> <li>• NOTE any actions or recommendations linked to the financial position of the funds.</li> </ul>

THE PAPER IS ALIGNED TO THE DELIVERY OF THE FOLLOWING STRATEGIC OBJECTIVE(S) AND HEALTH AND CARE STANDARD(S):		
<b>Strategic Objectives:</b>	• Focus on Wellbeing	✓
	• Provide Early Help and Support	✗
	• Tackle the Big Four	✗
	• Enable Joined up Care	✗
	• Develop Workforce Futures	✗
	• Promote Innovative Environments	✗
	• Put Digital First	✗
	• Transforming in Partnership	✗
<b>Health and Care Standards:</b>	• Staying Healthy	✓
	• Safe Care	✓
	• Effective Care	✓
	• Dignified Care	✓
	• Timely Care	✓
	• Individual Care	✓
	• Staff and Resources	✓
	• Governance, Leadership & Accountability	✓

Approval/Ratification/Decision	Discussion	Information
	✓	

Balance Total Charitable Funds		
Financial KPIs :	Value £'000	Trend Compared 01/04/22
Reported Closing Balance Period Ending 30 June 2022	3,664	↓
Movement in Closing Balance Compared Period Ending 31st March 2022 - Negative = reduction balance / Positive = increase in balance	-119	↓

Income & Expenditure Movements	
Area	Value £'000
Total Expenditure: Period April 2022 to June 2022	150
Total Income: Period April 2022 to June 2022	31
<b>Increase or (Decrease) In Fund Balance</b>	<b>-119</b>

## Summary

- The opening balance at the 1<sup>st</sup> April 2022 was £3.664M during Months 1 to 3 this decreased overall by £0.119m.
- Therefore the total expenditure in the period exceeded total income received for the same period by £0.119m.
- A breakdown of this between General Funds and Legacy funds can be found on the next page.

Balance General Funds		
Financial KPIs :	Value £'000	Trend Compared 01/04/22
Reported Closing Balance Period Ending 30 June 2022	2,244	↓
Movement in Closing Balance Compared Period Ending 31st March 2022 - Negative = reduction balance / Positive = increase in balance	-117	↓

Balance Legacy Funds		
Financial KPIs :	Value £'000	Trend
Reported Closing Balance Period Ending 30 June 2022	1,420	↓
Movement in Closing Balance Compared Period Ending 31st March 2022 - Negative = reduction balance / Positive = increase in balance	-1	↓

Income & Expenditure Movements: General Funds	
Area	Value £'000
Total Expenditure: Period April 2022 to June 2022	148
Total Income: Period April 2022 to June 2022	31
Increase or (Decrease) In Fund Balance	-117

Income & Expenditure Movements: Legacy Funds	
Area	Value £'000
Total Expenditure: Period April 2022 to June 2022	1
Total Income: Period April 2022 to June 2022	0
Increase or (Decrease) In Fund Balance	-1



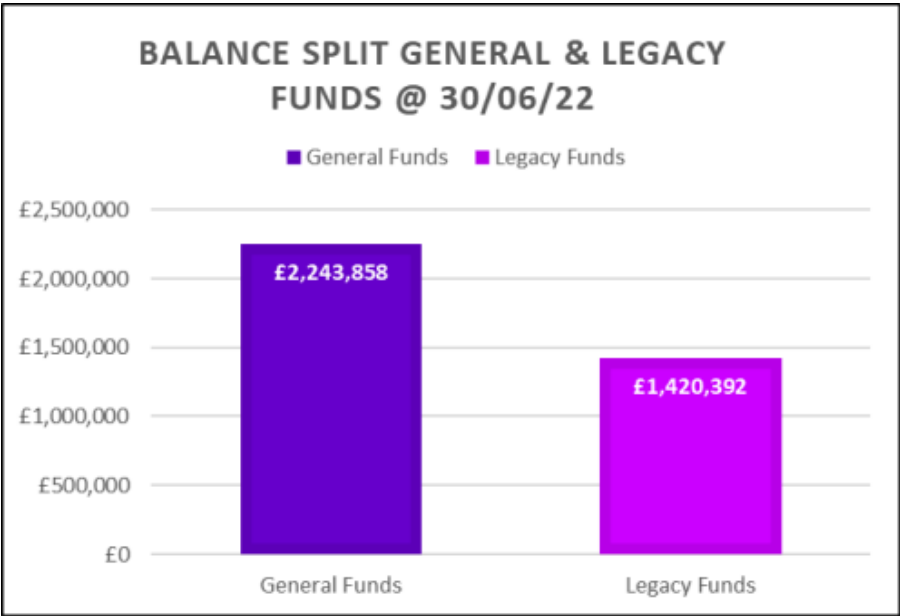
Expenditure Profile for 2022-23	Fund Balance 01/04/2022 £	Income Received 1st April 2022 to 30 June 2022 £	Payments Made 1st April 2022 to 30 June 2022 £	Balance 30 June 2022 £	Balance 1st April 2022 Spent %	Fund Increase (+ve)/ Decrease (-ve) since 1st April 2022 %
<b>Funds over 100k</b>						
Welshpool General Purposes	£534,131	£46	£0	£534,177	0.00%	0.01%
Mental Health General Purposes	£353,626	£0	£0	£353,626	0.00%	0.00%
<b>Funds between 50 - 100k</b>						
Ystradgynlais Geriatric Ward	£62,325	£0	£0	£62,325	0.00%	0.00%
Knighton General Purposes	£71,934	£0	£100	£71,834	0.14%	-0.14%
Llandrindod General Purposes	£50,617	£350	£0	£50,967	0.00%	0.69%
Machynlleth General Purposes	£74,387	£0	£103	£74,284	0.14%	-0.14%
<b>Funds between 25-50k</b>						
Brecon General Purposes	£38,078	£473	£0	£38,550	0.00%	1.24%
Ystradgynlais General Purposes	£36,246	£310	£0	£36,556	0.00%	0.86%
North Powys District Nursing	£45,961	£4,780	£0	£50,740	0.00%	10.40%
<b>Funds Under 25K</b>						
Brecon	£25,753	£0	£0	£25,753	0.00%	0.00%
Bronllys	£33,652	£825	£0	£34,477	0.00%	2.45%
Builth	£3,133	£0	£0	£3,133	0.00%	0.00%
Llandrindod	£20,827	£270	£0	£21,097	0.00%	1.30%
Knighton	£4,037	£0	£0	£4,037	0.00%	0.00%
Llanidloes	£9,868	£0	£0	£9,868	0.00%	0.00%
Newtown	£21,895	£1,650	£2,265	£21,280	10.34%	-2.81%
Welshpool	£48,998	£0	£0	£48,998	0.00%	0.00%
Ystradgynlais	£11,602	£0	£0	£11,602	0.00%	0.00%
Women & Children's	£4,668	£0	£0	£4,668	0.00%	0.00%
Mental Health	£11,714	£0	£180	£11,534	1.54%	-1.54%
<b>POWYS WIDE</b>						
Powys General Purposes	£755,168	£22,339	£136,303	£641,205	18.05%	-15.09%
Covid General Purposes	£83,373	£0	£8,945	£74,428	0.00%	0.00%
Nursing Directorate	£1,397	£0	£0	£1,397	0.00%	0.00%
Palliative Care Fund	£52,054	£200	£590	£51,664	1.13%	-0.75%
District Speech Therapy	£126	£0	£0	£126	0.00%	0.00%
Diabetes Services	£5,531	£0	£0	£5,531	0.00%	0.00%
<b>Total</b>	<b>£2,361,101</b>	<b>£31,242</b>	<b>£148,485</b>	<b>£2,243,858</b>	<b>6.29%</b>	<b>-4.97%</b>

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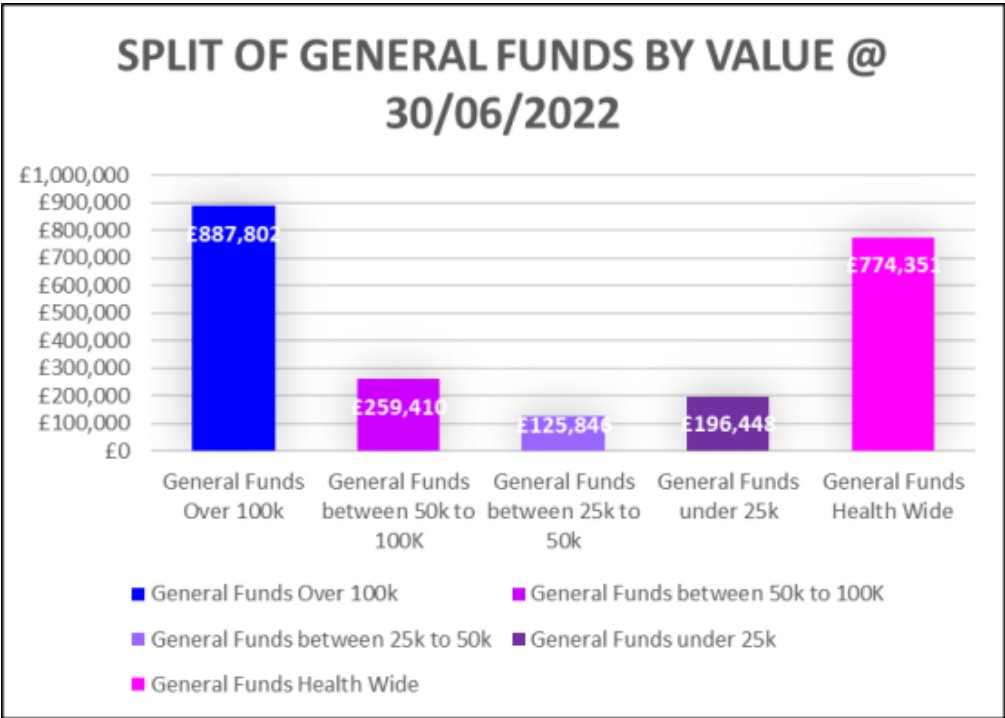
Expenditure Profile for 2022-23	Fund Balance 01/04/2022 £	Income Received 1st April 2022 to 30 June 2022 £	Payments Made 1st April 2022 to 30 June 2022 £	Balance 30 June 2022 £	Balance 1st April 2022 Spent %	Fund Increase (+ve)/ Decrease (-ve) since 1st April 2022 %
<b>LEGACY FUNDS</b>						
Brecon Training Legacy	£2,127	£0	£0	£2,127	0.00%	0.00%
AMI Legacy	£128,168	£0	£1,320	£126,848	1.03%	-1.03%
Hazels Legacy	£271,640	£0	£0	£271,640	0.00%	0.00%
Mid & South Powys Community & Palliative Services	£1,019,778	£0	£0	£1,019,778	0.00%	0.00%
<b>Total</b>	<b>£1,421,712</b>	<b>£0</b>	<b>£1,320</b>	<b>£1,420,392</b>	<b>0.09%</b>	<b>-0.09%</b>

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Balances Legacy and General Funds



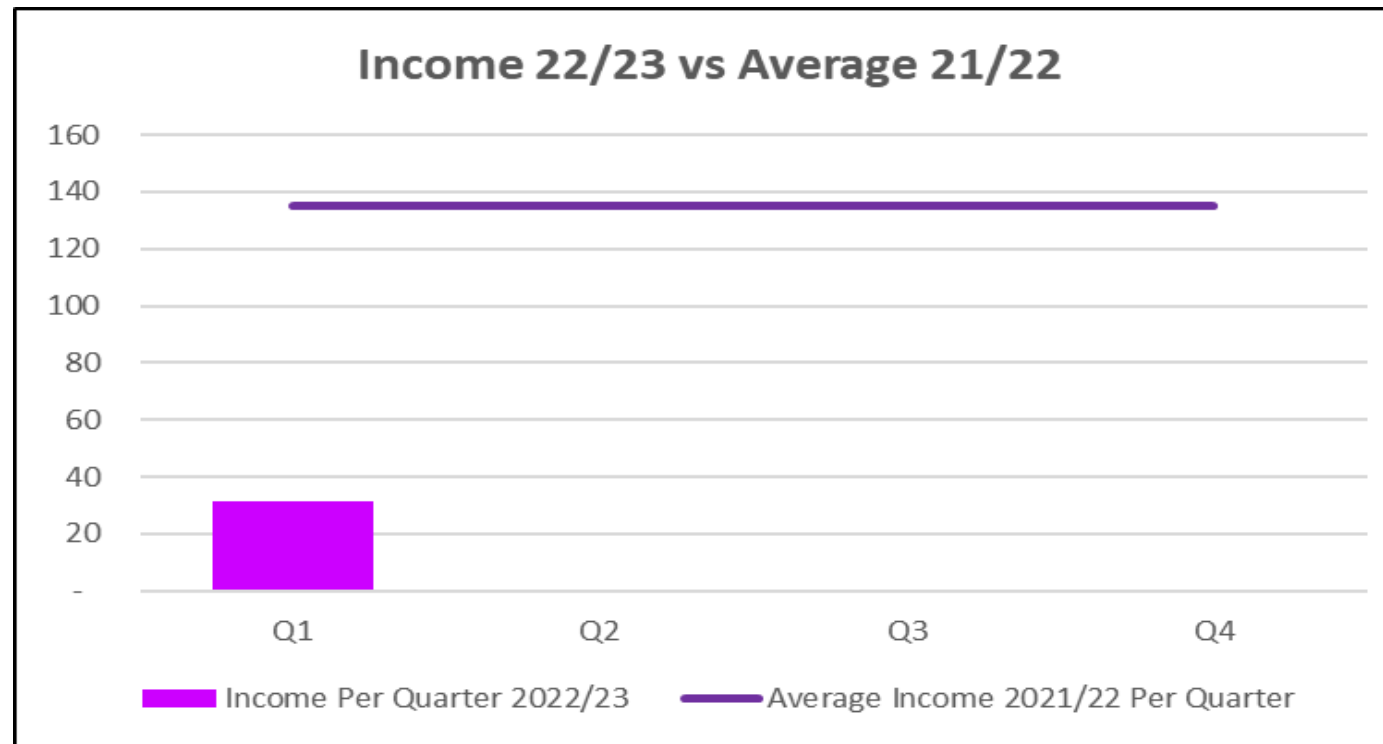
General Funds Split into Value of Fund



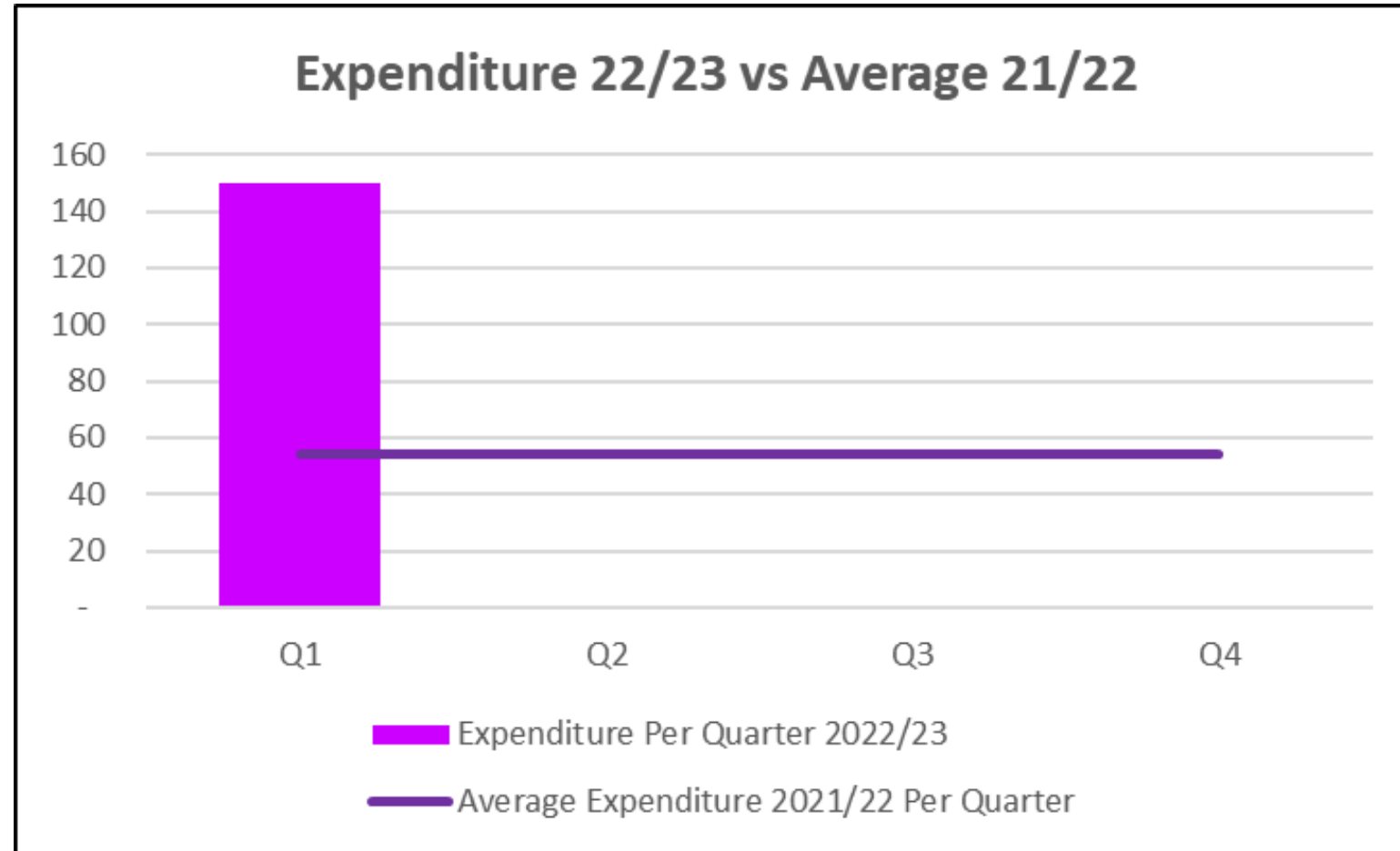
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Type Fund	Values
General Funds	£2,243,858
Legacy Funds	£1,420,392
Total	£3,664,250

Type Fund	Values
General Funds Over 100k	£887,802
General Funds between 50k to 100K	£259,410
General Funds between 25k to 50k	£125,846
General Funds under 25k	£196,448
General Funds Health Wide	£774,351
Total	£2,243,858



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- GENERAL FUNDS = From an amount of £2,361,101 held within General Purposes or designated funds at the 1st April 2022, income of £31,242 has been received and £148,485 of expenditure has been paid. This equates to 6.29% of funds held at 1st April 2022 have actually been spent.
- LEGACY FUNDS = From an amount of £1,421,712 of funds held within legacies at the 1st April 2022, £0 income has been received and £1,320 of expenditure has been paid. This equates to 0.09% of funds held at 1st April 2022 have actually been spent.
- BANK BALANCE - The Balance held within the bank account at 30<sup>th</sup> June 2022 is just over £0.861M. Discussions with our investment advisors as to whether a short term investment option was available has been undertaken but they advised that they could not guarantee any short term investments would repay the amount invested over the shorter term. A term of investment for 3 years would be advised to ensure the investment would retain its level. They advised us to retain this within our bank over the short term. We do have some larger items of expenditure expected in the second six months of the year which should reduce the balance to approximately £0.7M but this will still be slightly above our target cash balance of £0.5M.

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# *POWYS TEACHING LOCAL HEALTH BOARD CHARITABLE FUND*

## Quarterly Investment Report

30 June 2022

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## **Valuation Summary**

## **Fund Report**

## **Activity Summary**

## **Investment Criteria**

Investment Criteria

Acceptable Investments

Benchmark

## **Fund Statistics**

Asset Allocation

Performance

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## Valuation Summary

Brewin Dolphin Investment Portfolio Summary								
30 June 2022								
		Book Cost	Market Value	% Holding	Benchmark	Yield	Gross Income	
Fixed Interest	Govt Bonds	£ 60,434.97	£ 56,671.10	1.73%	8.00%	0.45%	£ 257.82	
	Corp Bonds	£ 409,157.46	£ 348,374.27	10.63%	9.00%	4.45%	£ 15,504.95	
	Accrued Interest	£ -	£ -	0.00%	0.00%	0.00%	£ -	
	<b>Total Fixed Interest</b>	<b>£ 469,592.43</b>	<b>£ 405,045.37</b>	<b>12.36%</b>	<b>17.00%</b>	<b>3.89%</b>	<b>£ 15,762.77</b>	
UK Equities	UK	£ 659,662.93	£ 806,526.05	24.62%	24.00%	5.36%	£ 43,231.79	
Overseas Equities	US	£ 788,837.93	£ 953,752.93	29.11%	29.13%	1.71%	£ 16,355.17	
	Europe	£ 168,156.87	£ 178,957.86	5.46%	5.41%	4.50%	£ 8,057.31	
	Japan	£ 80,209.13	£ 86,682.66	2.65%	2.92%	2.56%	£ 2,222.99	
	Pacific	£ 180,090.92	£ 203,478.36	6.21%	6.09%	3.27%	£ 6,662.30	
	Emerging	£ 32,721.48	£ 36,518.28	1.11%	0.95%	3.14%	£ 1,145.10	
	Global	£ -	£ -	0.00%	0.00%	0.00%	£ -	
	<b>Total Overseas</b>	<b>£ 1,250,016.33</b>	<b>£ 1,459,390.09</b>	<b>44.55%</b>	<b>44.50%</b>	<b>2.36%</b>	<b>£ 34,442.87</b>	
Alternatives	Property	£ 60,633.09	£ 69,572.90	2.12%	3.00%	2.23%	£ 1,550.65	
	Absolute Return	£ 234,014.55	£ 217,965.78	6.65%	6.00%	3.76%	£ 8,185.16	
	Other	£ 228,329.96	£ 233,441.57	7.13%	3.00%	4.71%	£ 11,000.81	
	<b>Total Alternatives</b>	<b>£ 522,977.60</b>	<b>£ 520,980.25</b>	<b>15.90%</b>	<b>12.00%</b>	<b>3.98%</b>	<b>£ 20,736.62</b>	
Cash	<b>Total Investments</b>	<b>£ 2,902,249.29</b>	<b>£ 3,191,941.76</b>	<b>97.43%</b>		<b>3.58%</b>	<b>£ 114,174.05</b>	
	Deposit Ledger	£ 51,646.84	£ 51,646.84	1.58%	2.50%	0.00%	£ -	
	Income Ledger	£ 32,427.68	£ 32,427.68	0.99%		0.00%	£ -	
	<b>Total Fund</b>	<b>£ 2,986,323.81</b>	<b>£ 3,276,016.28</b>	<b>100.00%</b>				
	Ex Accrued Interest	£ 2,953,896.13	£ 3,243,588.60	100.00%	100.00%	3.52%	£ 114,174.05	
		Monthly	Quarterly	Six Monthly	Annual	Inception 20/02/2020		
Portfolio		-4.87%	-7.17%	-7.92%	-2.15%	25.39%		
Benchmark		-4.15%	-6.46%	-8.08%	-2.88%	6.09%		
FT All Share		-5.98%	-5.04%	-4.57%	1.64%	2.58%		
FT All Stocks		-1.81%	-7.42%	-14.06%	-13.60%	-14.52%		
BoFE Base Rate (less 0.75%)		0.04%	0.06%	0.06%	0.06%	0.06%		
Bank of England Base Rate		1.25%						
FTSE 100 Value		7169.28						

Please note the forecast income figure shown here is based on an extrapolation of previous dividend payments. Please refer to page 8 for a more accurate forecast.

## **Fund Report**

2022 has so far proven to be a particularly challenging year for investors. The most common threat to equity values is a recession. As the risk increases, investors anticipate falling profits, but they can usually balance that with the comforting expectation of a cut in interest rates by central banks.

Lower interest rates aim to get consumers spending, which helps companies generate higher profits in the future. Lower interest rates also make these profits more valuable to investors, as the interest an investor would receive on their funds is what they give up when they choose to buy an equity investment. The lower that rate is, the less they are forfeiting and so the more valuable the investment is to them.

So far in 2022, central banks have not been defending against a recession but have instead been fighting against inflation. This involves raising interest rates, meaning central banks are no longer the ally of investors.

### **Inflation targeting**

At the beginning of this year, economists forecast US interest rates would rise to 1.5% in 2023. Interest rates have already surpassed that level and are now expected to rise to 3.5%. The Federal Reserve, in its eagerness to tame the beast of inflation, raised rates by three quarters of a percentage point in a single month for the first time since 1994 and it is expected to do so again.

This steep reappraisal of interest rate expectations was bad news for virtually all long-term investments. It caused the prices of both equities and bonds to fall at the beginning of 2022 and resulted in many equity markets around the world entering bear market territory during June (defined as a 20% decline from the market peak).

The sharp change in the interest rate trajectory reflects the rapid increase in inflation. For the last 12 months it has felt as if circumstances have conspired to drive prices higher. However, a fundamental policy misstep taken in synchrony by central banks around the world was the main driver of rising prices. What they diagnosed as a deflationary impact from the Covid-containing lockdowns turned out to be quite inflationary as consumers re-directed their spending from services towards new goods that 'locked down' companies were unable to supply. That made the record breaking fiscal and monetary stimulus painfully inappropriate.

### **Russia's invasion of Ukraine**

Russia's invasion of Ukraine threatened shortages of a wide range of commodities – most notably, oil, gas and wheat. Over the second quarter of 2022, oil prices continued to rise and were quickly passed through into higher prices, most notably for petrol and diesel but a wide range of other products as well. Sanctions have limited the revenue that Russia makes, with Russian crude trading at a \$30 discount to more universally acceptable oil.

However, the general rise in energy prices has meant that even at this discount, oil remains a lucrative business for Russia. The country has exploited its position as the monopoly supplier of pipeline gas to Eastern Europe to boost revenues and threaten shortages of supply in order to undermine the co-ordinated Western sanction response.

### **Negative energy**

In the UK, the quarter began with a scheduled change to the domestic fuel price cap. This saw energy prices increase by £700 for the typical household, but during the quarter forecasters began speculating about what kind of further increase could be expected in October, when the cap is next revised. This caused the Bank of England to begin forecasting double-digit inflation, and the government to mobilise a package of measures to soften the impact.

## **Bad medicine**

As 2022 continues, shortages of some goods remain acute, while others are showing signs of excess. It will take some time for the patterns of consumption to return to normal. Running a business under such wildly fluctuating conditions proved challenging. Running an economy proved more so.

While central banks cut interest rates and printed money to support demand, finance ministers spent heavily on measures to fight Covid, protect furloughed or laid-off workers and keep consumers spending. Some of this spending provided vital support, but a lot of it stoked the inflationary fire. At the time, it would have been hard to imagine a labour shortage in 2022, but an acute one exists and provides another compelling rationale for central bankers to slow the economy with higher interest rates.

## **Control, alt, delete**

There was a great focus on China as the country attempted to take a different approach to the management of economic and health challenges. The Chinese domestic market had been severely wounded by president Xi Jinping's focus on how companies can fulfil the goals of the Chinese Communist Party, dubbed "common prosperity", rather than the profits they can generate for their shareholders. That culminated in a series of regulatory interventions to the detriment of shareholders.

The authorities were also keen to keep the property sector in check. Property has been an important driver of growth for many years but has built up leverage and questionable assets in doing so. Xi, as a self-styled economic conservative, was keen to rein in the sector, a process that led to some losses. But these concerns were beginning to ebb and the biggest anxiety related instead to China's latest wave of coronavirus.

In accordance with the Chinese policy of not tolerating any Covid cases, harsh lockdowns were enforced which slowed economic activity to a crawl. These harsh but effective measures were being relaxed towards the end of the quarter, providing Chinese stocks with an opportunity to escape from multiple restrictive measures.

After a turbulent year in 2021, Chinese stocks have been among the best performers during 2022, reflecting the way in which markets perform best not when the outlook is brightest, but when investors are anticipating the worst, and the worst does not quite come to pass.

## **Is inflation peaking?**

The second quarter of 2022 ends with the global economy potentially at another inflexion point. More interest rate increases are expected, but the debate has begun about whether those that have been announced so far may already be dousing the inflationary flames. If that were true, then it would reduce the headwind posed by central bank interest rate policy, turning a headwind into a tailwind for investments.

Generally, economic activity was slowing as the quarter ended. The red-hot US housing market looked to be cooling as high prices and mortgage rates deterred new buyers. Manufacturers saw their new orders reduce as supply chain pressures began to ease. Few will be under any illusions that inflation is going to quickly return to target, and the greatest unknown relates to factors affected by the machinations of Vladimir Putin.

Many of these issues are "known unknowns", in contrast with threats that cannot yet be foreseen. Higher interest rates have already depressed the values of bonds, but their returns are fixed and so a lower return to date simply means a higher return in the future. Equities don't offer the same rigid returns as bonds, but lower prices generally offer a better future return potential than higher prices do. These longer-term investments are already reflecting interest rate moves, which have not yet occurred and may never happen.

Interest rates will continue to rise as this new quarter begins and the market currently expects them to keep rising all year, most likely peaking in early 2023. There is considerable uncertainty in the interest rate trajectory, but the outlook for the market is far brighter when it is already anticipating bad news.

## Market Movements

The fireworks seen in bond markets in Q1 continued into Q2, with indices continuing to underperform some of the world equity markets. This is in spite of the perceived 'safe haven' properties of government bonds. The US 10-year Treasury yield rose from 2.35% to 2.96%, with the UK equivalent rising from 2.29% to 2.95%. As such, the FTSE All Stocks Index fell -7.42% over the quarter. In the UK, corporate bonds marginally underperformed, with the iBoxx £ Corporate All Maturities Index down -7.83%.

Equity markets did not hold on to their post-invasion gains for long and suffered a particularly bruising second quarter. The FTSE World Index returned -9.07% in aggregate. The FTSE North America Index was down -9.54% in sterling terms, despite a +7.31% rise in the value of the dollar relative to sterling. The UK's FTSE All Share was down -5.04%, with the oil and gas sector continuing to contribute to outperformance of almost all other regional markets, but not able to keep the index in positive territory. Europe returned -8.60%, Japan -6.75%, Asia Pacific -9.31% and Emerging Markets outperformed with a drawdown of -2.61%.

Property markets, as measured by the Morningstar Global REITS Index, returned -8.53%. The IA Targeted Absolute Return index delivered -1.48%, Gold returned 0.95% and each of the infrastructure investment trusts held produced low negative single digit returns.

## Market Outlook

The global economic environment has deteriorated further over the course of the quarter, and to reflect the prevailing balance of risks, we have reduced our exposure to equity markets from a modest 'overweight' position to a neutral one accordingly. The proceeds have been allocated to cash and alternative assets, which have lower correlations to the drivers of equity and fixed interest markets. Higher than usual cash weights continue to provide us with 'dry powder' should markets correct more substantially.

Whilst China's relaxation of lockdown restrictions in its major cities marks a welcome piece of positive news, the most decisive factors in relation to inflation, namely geopolitical risks and Russia's control over energy markets mean that pressures remain. The higher interest rates required to ensure inflation expectations are well-anchored among households will result in a squeeze on consumer spending, leading to a greater probability of recession.

We retain a 'neutral' position to equities, rather than an underweight, in the face of such an uncertain environment. Given the downturn seen in the first half of the year, sentiment is clearly very negative, and investors are not complacent about the risks.
















The drivers of performance in Q2 have been very similar to those in Q1, and we retain a long-term perspective with regard to the underlying composition of the portfolio.

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## Investment Philosophy

Our investment philosophy is based on the investment cycle, which looks at the interaction of growth and inflation as a proxy for economic capacity and hence provides a guide to the attractiveness of individual asset classes.

The dashboard below reflects our current positioning, which may be slightly different from the valuations where trading has taken place outwith the quarter.

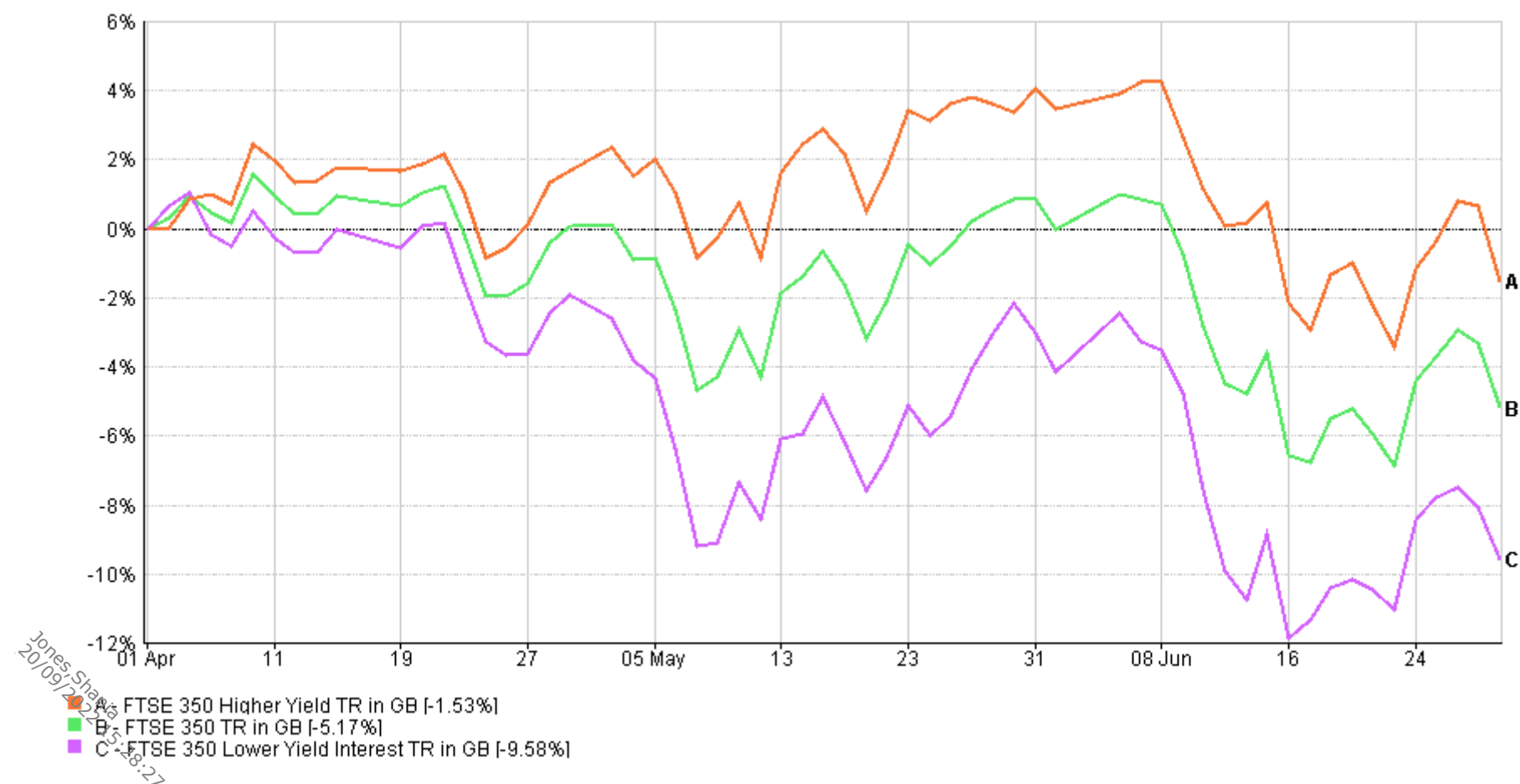
Asset Class	Very Underweight	Underweight	Neutral	Overweight	Very Overweight
<b>Bonds</b>					
Government Bonds					
Corporate Bonds					
<b>Equities</b>					
UK					
Overseas:					
North America					
Europe ex UK					
Japan					
Asia ex Japan					
Emerging Markets					
<b>Alternatives</b>					
Property					
Other Alternatives					
<b>Cash</b>					

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## Income

Many companies reset their dividend policies to lower levels in response to COVID-19, which we highlighted had a dramatic impact on **higher yielding** companies when compared with **lower yielding** ones and the **general market** in 2020 and 2021.

This quarter saw higher yielding companies continue to considerably outperform both lower yielding ones and the wider index. The chart below covers **Q2 2022** and represents the FTSE 350 in the UK.



01/04/2022 - 30/06/2022 Data from FE fundinfo2022

## Income Report

The income yield is to be targeted at 3% of the portfolio value at the end of the previous financial year.

	Income Forecast	Income Target
Year to 31/03/23 <i>e</i>	£109,267	£105,996

## Activity Summary

To reiterate the trading conducted in April and previously detailed in last quarter's report: we moderated our overweight equity position to reduce risk. We trimmed exposure to our larger regional allocations: UK and Europe and used the proceeds to introduce Muzinich Global Tactical Credit Fund.

The Muzinich fund invests in corporate debt across the full credit quality spectrum with a focus on capital preservation. The manager constructs a portfolio through a combination of macro analysis and individual stock selection and the resulting portfolio represents a mix of long-term investments and dynamic tactical positioning. In the construction of the portfolio, the manager ensures the composition allows for swift tactical changes to either the sector, geography or credit quality of the fund at any given time.

In June, we disposed of Taylor Wimpey and trimmed Vanguard S&P 500 ETF, Premier UK Multicap Income Fund and Gresham House Multi-Cap Income Fund to reduce the portfolio's sensitivity to a downturn in economic growth, although we delayed the Gresham House trade until after we accrued the dividend in early July outwith the quarter.

We used part of the proceeds to increase exposure to more defensive, larger companies by topping up Admiral, National Grid and the iShares FTSE100 ETF and introducing Barclays.

Finally, we left the remaining proceeds in cash to increase the portfolio's defensiveness and provide 'dry powder' in readiness for opportunities arising.

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## The Objectives of the Trustees

The objectives are to achieve a balanced return between income and capital, adopting a medium risk approach and complying with the Trustee Investment Acts.

### Investment criteria

In managing the investments and making or varying the investments, the managers are expected to work within the following criteria:

#### *General*

**Expected return:** The Trustees recognise that the average long run (15 year) anticipated total return from a Brewin Dolphin Risk Category 6 portfolio is 7.5% per annum.

**Operational Risk:** The Charity is a going concern without input from the investment funds. The operational risk of the funds is linked to the amount of income payable to the beneficiaries. Consequently, inflation is the principal operational risk.

**Time scale:** The Trustees consider the funds to be long-term investment funds.

**Financial Risk:** The Trustees recognise that financial assets are volatile and that their value can go down as well as up. The Brewin Risk Measure for a Brewin Dolphin Risk Category 6 portfolio falls between 9% and 15%.

**Diversification:** The Trustees recognise the need for diversification of the investments to remove stock specific risk.

#### *Specific*

**Ethical Policy:** As Corporate Trustee, Powys Teaching Health Board, in line with the ethos of promoting Patient care, will attempt to consider that all investments are ethically and environmentally sound and are not opposed to the purpose of the Charity. See Statement of Investment Policy for further details.

**Income:** Income yield is to be targeted at c. 3% per annum.

**Cashflows:** The Trustees do not anticipate any cashflow requirements in the near future.



## Acceptable Investments

The Trustees understand the nature of the financial markets and are comfortable with investments in the following asset classes:

- Bonds (Government, corporate, domestic and overseas)
- Equities (Domestic and overseas, including the Emerging Markets)
- Cash
- Property equities or funds (no direct property investment)
- Collective Investment Schemes
  - Unit Trusts
  - OEICs
  - Investment Trusts
  - Commodity Funds
- Alternative Investments
  - Hedge Funds
  - Absolute Return Funds
  - Structured Products
  - Private Equity Funds
  - Infrastructure Funds

Others – The above assets should be considered as the principal elements of the portfolios. The Trustees welcome advice in other areas and encourage the Investment Managers to bring forward ideas with regard to other asset classes when appropriate.

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## Benchmark

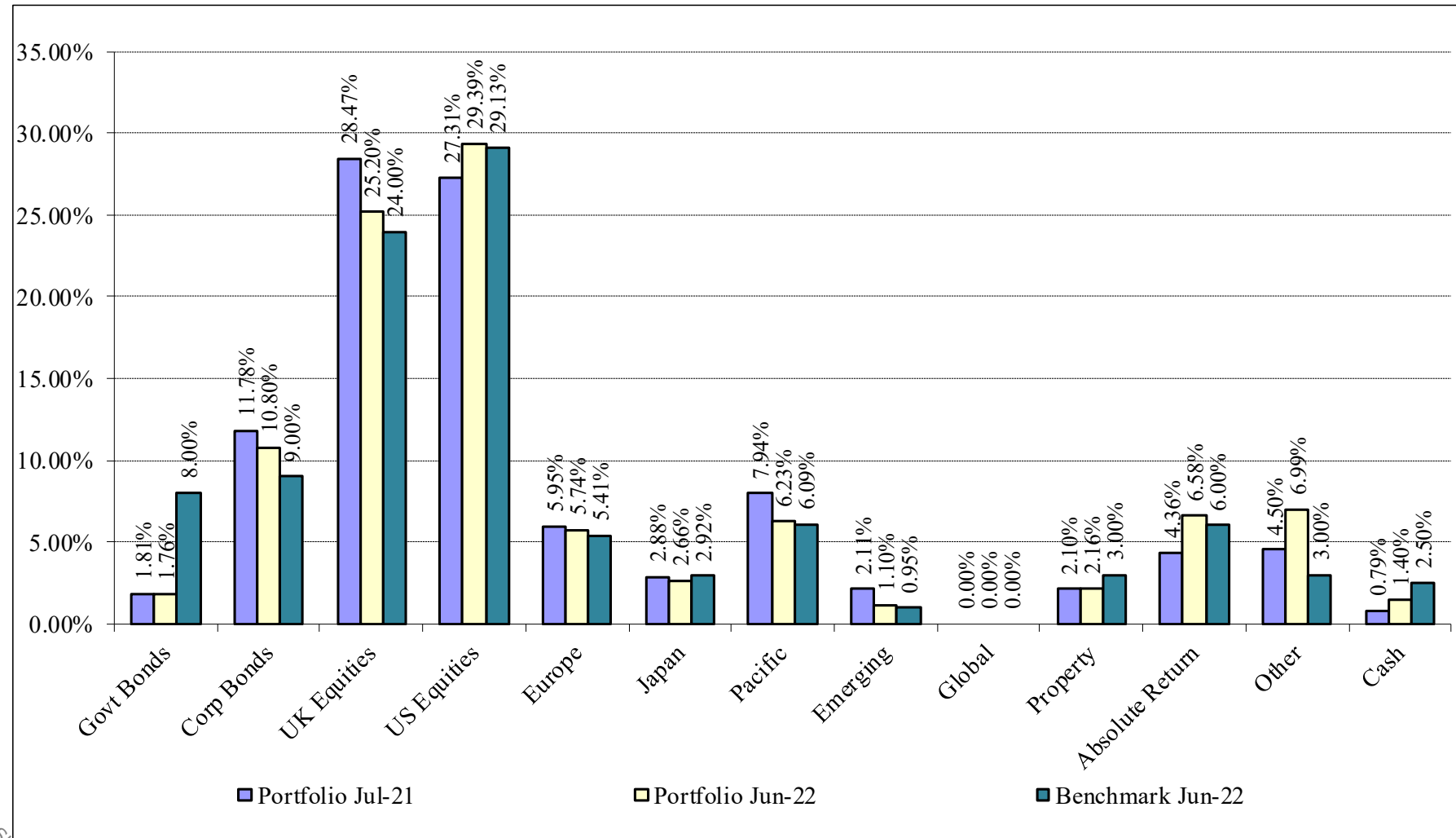
The Fund's benchmark is as follows:

	<b>RC6 Benchmark Composition (effective 1 Jan 2021)</b>	<b>Portfolio</b>
<b>Bonds</b>	17.00%	12.36%
<b>UK Equities</b>	24.00%	24.62%
<b>Overseas Equities</b>	44.50%	44.55%
<b>Property</b>	3.00%	2.12%
<b>Absolute Return</b>	6.00%	6.65%
<b>Other</b>	3.00%	7.13%
<b>Cash</b>	2.50%	2.57%

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## Fund Statistics

### Asset Allocation Analysis



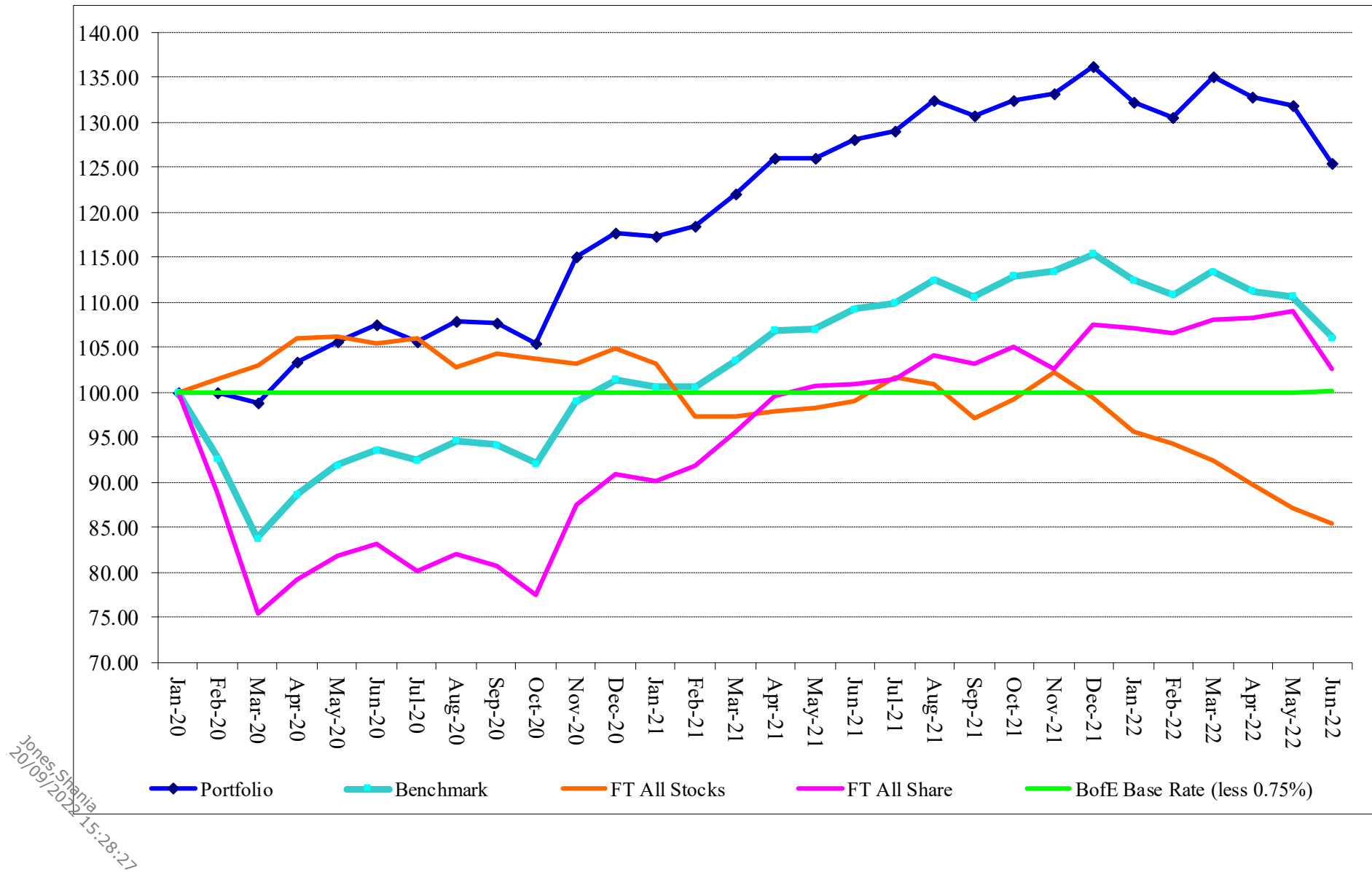
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## Asset Allocation Analysis to 30 June 2022

	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22
<b>Govt Bonds</b>	1.81%	1.87%	1.85%	1.84%	1.87%	1.88%	1.83%	1.85%	1.86%	1.79%	1.79%	1.76%
<b>Corp Bonds</b>	11.78%	11.79%	11.85%	12.21%	11.95%	12.28%	12.89%	13.05%	12.48%	10.94%	10.84%	10.80%
<b>O'seas Debt</b>	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
<b>UK Equities</b>	28.47%	28.58%	27.36%	27.30%	27.34%	26.77%	27.36%	28.19%	28.14%	26.93%	25.17%	25.20%
<b>US Equities</b>	27.31%	27.46%	28.12%	28.21%	28.73%	29.44%	29.00%	28.13%	28.52%	30.04%	29.67%	29.39%
<b>Europe</b>	5.95%	6.16%	6.63%	6.37%	6.51%	6.45%	6.55%	6.30%	6.12%	6.16%	5.72%	5.74%
<b>Japan</b>	2.88%	2.84%	2.88%	3.09%	2.97%	2.94%	2.88%	2.79%	2.70%	2.63%	2.56%	2.66%
<b>Pacific</b>	7.94%	7.47%	7.13%	7.19%	6.93%	6.71%	6.31%	6.41%	6.42%	6.13%	6.16%	6.23%
<b>Emerging</b>	2.11%	2.01%	2.04%	2.06%	2.02%	1.86%	1.59%	1.62%	1.46%	1.09%	1.09%	1.10%
<b>Global</b>	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
<b>Property</b>	2.10%	2.13%	2.15%	2.11%	2.15%	2.18%	2.22%	2.15%	2.15%	2.23%	2.30%	2.16%
<b>Absolute Return</b>	4.36%	4.34%	4.23%	4.31%	4.23%	4.17%	4.13%	4.20%	4.19%	4.40%	6.60%	6.58%
<b>Other</b>	4.50%	4.49%	4.54%	4.40%	4.45%	4.43%	4.48%	4.57%	5.12%	6.66%	7.16%	6.99%
<b>Cash</b>	0.79%	0.86%	1.22%	0.90%	0.85%	0.88%	0.77%	0.74%	0.84%	1.00%	0.94%	1.40%
<b>Total</b>	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%

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## Fund Performance



## Performance Analysis - Summary to 30 June 2022

	Monthly	Quarterly	Six Monthly	Annual	Inception 20/02/2020
<b>Portfolio</b>	<b>-4.87%</b>	<b>-7.17%</b>	<b>-7.92%</b>	<b>-2.15%</b>	<b>25.39%</b>
<i>Benchmark</i>	<i>-4.15%</i>	<i>-6.46%</i>	<i>-8.08%</i>	<i>-2.88%</i>	<i>6.09%</i>
<b>Govt Bonds</b>	<b>-5.63%</b>	<b>-9.93%</b>	<b>-13.16%</b>	<b>-8.68%</b>	<b>-5.69%</b>
<i>FT All Stocks</i>	<i>-1.81%</i>	<i>-7.42%</i>	<i>-14.06%</i>	<i>-13.60%</i>	<i>-14.52%</i>
<b>Corp Bonds</b>	<b>-5.10%</b>	<b>-8.82%</b>	<b>-14.00%</b>	<b>-13.98%</b>	<b>-7.52%</b>
<i>iBoxx UK Sterling Corp All Mats</i>	<i>-3.56%</i>	<i>-7.83%</i>	<i>-13.95%</i>	<i>-14.54%</i>	<i>-11.99%</i>
<b>UK</b>	<b>-6.97%</b>	<b>-6.89%</b>	<b>-4.50%</b>	<b>2.49%</b>	<b>65.88%</b>
<i>FT All Share</i>	<i>-5.98%</i>	<i>-5.04%</i>	<i>-4.57%</i>	<i>1.64%</i>	<i>2.58%</i>
<b>US</b>	<b>-3.91%</b>	<b>-8.34%</b>	<b>-9.02%</b>	<b>0.01%</b>	<b>33.90%</b>
<i>FT North America</i>	<i>-4.84%</i>	<i>-9.54%</i>	<i>-11.40%</i>	<i>-0.40%</i>	<i>22.33%</i>
<b>Europe</b>	<b>-6.97%</b>	<b>-9.22%</b>	<b>-14.88%</b>	<b>-8.70%</b>	<b>14.53%</b>
<i>FT Euro ex UK</i>	<i>-7.11%</i>	<i>-8.60%</i>	<i>-15.05%</i>	<i>-10.08%</i>	<i>4.66%</i>
<b>Japan</b>	<b>-4.74%</b>	<b>-6.78%</b>	<b>-15.09%</b>	<b>-10.51%</b>	<b>14.26%</b>
<i>FT Japan</i>	<i>-3.90%</i>	<i>-6.75%</i>	<i>-10.04%</i>	<i>-8.47%</i>	<i>4.94%</i>
<b>Pacific</b>	<b>-4.52%</b>	<b>-5.44%</b>	<b>-3.07%</b>	<b>-0.66%</b>	<b>20.50%</b>
<i>FT Pac ex Japan</i>	<i>-8.06%</i>	<i>-9.31%</i>	<i>-8.08%</i>	<i>-9.10%</i>	<i>15.70%</i>
<b>Emerging</b>	<b>-3.43%</b>	<b>-5.07%</b>	<b>-8.62%</b>	<b>-5.91%</b>	<b>13.63%</b>
<i>FT Emerging</i>	<i>-1.65%</i>	<i>-2.61%</i>	<i>-5.02%</i>	<i>-10.42%</i>	<i>6.33%</i>
<b>Property</b>	<b>-5.88%</b>	<b>-11.57%</b>	<b>-11.83%</b>	<b>-1.50%</b>	<b>11.96%</b>
<i>IA UK Direct Property</i>	<i>0.73%</i>	<i>2.28%</i>	<i>5.33%</i>	<i>12.34%</i>	<i>9.69%</i>
<b>Absolute Return</b>	<b>-2.66%</b>	<b>-4.48%</b>	<b>-6.76%</b>	<b>-6.14%</b>	<b>-2.77%</b>
<i>IMA Targeted Absolute Return</i>	<i>-1.58%</i>	<i>-1.48%</i>	<i>-1.57%</i>	<i>-0.46%</i>	<i>0.66%</i>
<b>Other</b>	<b>-2.43%</b>	<b>-2.71%</b>	<b>0.06%</b>	<b>6.65%</b>	<b>22.21%</b>
<b>Cash</b>	<b>0.00%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>0.00%</b>
<i>BojE Base Rate (less 0.75%)</i>	<i>0.04%</i>	<i>0.06%</i>	<i>0.06%</i>	<i>0.06%</i>	<i>0.06%</i>

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POWYS TEACHING LOCAL HEALTH BOARD CHARITABLE FUND

For the period from 01/04/2022 to 30/06/2022  
Generated on 16/07/2022

PORTFOLIO INFORMATION

Portfolio Number	POWYS0004
Management Type	Discretionary
Risk Profile	Risk Level 6
Investment Objective	Income
PRC6 Code	651651

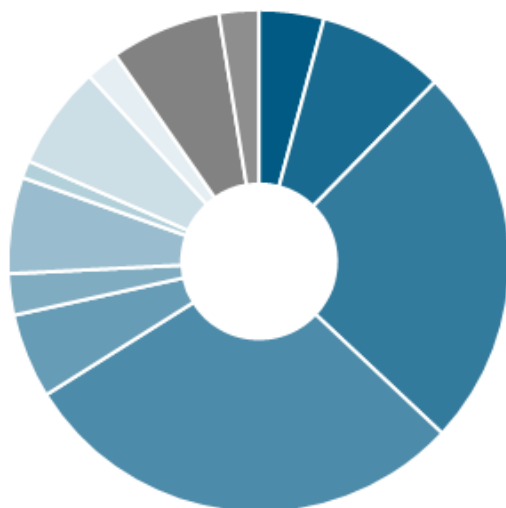
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## Asset Allocation

### Asset Allocation



Asset Allocation	Market Value at 30/06/2022	% of Holdings
UK Bonds	136,912.75	4.18
Overseas Bonds	268,132.62	8.18
UK Equities	806,526.05	24.62
North American Equities	953,752.93	29.11
European Equities	178,957.86	5.46
Japanese Equities	86,682.66	2.65
Asia Pacific Equities	203,478.36	6.21
Emerging Market Equities	36,518.28	1.11
Absolute Return	217,965.78	6.65
Property	69,572.90	2.12
Other Investments	233,441.57	7.13
Cash	84,074.52	2.57
<b>TOTAL</b>	<b>3,276,016.28</b>	<b>100.00</b>

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Client report for POWYS TEACHING LOCAL HEALTH BOARD CHARITABLE FUND

For the period from 01/04/2022 to 30/06/2022

All values and returns reported in British Pounds

Valuations as at today use the previous trading day's closing prices.

For backdated valuations prices are at the period end date.

## Holdings Summary

Quantity	Security Name	SubPortfolio ID	Price	Accrued Interest	Book Cost	Market Value	Est. Gross Income	Est. Gross Yield %	Ptf %
<b>UK Bonds</b>									
<b>Bond Funds</b>									
8,690	PIMCO SEL FDS PLC UK INCOME BOND INSTL INC	POWYS0004	8.83 GBP		82,868.80	76,732.70	3,233.10	4.21	2.34
695	TWENTYFOUR GBL INV CORPORATE BOND I GBP DIS	POWYS0004	86.59 GBP		72,551.79	60,180.05	2,047.94	3.40	1.84
<b>Sub Total UK Bonds</b>					<b>155,420.59</b>	<b>136,912.75</b>	<b>5,281.04</b>	<b>3.86</b>	<b>4.18</b>
<b>Overseas Bonds</b>									
<b>Index Linked Bonds</b>									
2,240	XTRACKERS II GBL INFLT LKD BD UETF 3D GB	POWYS0004	25.2996 GBP		60,434.97	56,671.10	257.82	0.45	1.73
<b>Bond Funds</b>									
222,275	HENDERSON INVESTME FIXED INTEREST MONTHLY INCO	POWYS0004	0.4889 GBP		132,053.36	108,670.25	5,505.75	5.07	3.32
120,435	JUPITER UT MNGRS STRATEGIC BOND X GBP DIS	POWYS0004	0.8535 GBP		121,683.51	102,791.27	4,718.16	4.59	3.14
<b>Sub Total Overseas Bonds</b>					<b>314,171.84</b>	<b>268,132.62</b>	<b>10,481.73</b>	<b>3.91</b>	<b>8.18</b>

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Client report for POWYS TEACHING LOCAL HEALTH BOARD CHARITABLE FUND  
For the period from 01/04/2022 to 30/06/2022  
All values and returns reported in British Pounds  
Valuations as at today use the previous trading day's closing prices.  
For backdated valuations prices are at the period end date.

## Holdings Summary

Quantity	Security Name	SubPortfolio ID	Price	Accrued Interest	Book Cost	Market Value	Est. Gross Income	Est. Gross Yield %	Ptf %
<b>UK Equities</b>									
<b>Oil &amp; Gas Producers</b>									
14,400	BP ORD USD0.25	POWYS0004	3.883 GBP		48,287.51	55,915.20	2,589.62	4.63	1.71
2,570	SHELL PLC ORD EUR0.07	POWYS0004	21.34 GBP		27,042.46	54,843.80	2,052.70	3.74	1.67
<b>Chemicals</b>									
290	CRODA INTL ORD GBP0.10609756	POWYS0004	64.72 GBP		12,867.80	18,768.80	290.00	1.55	0.57
<b>Mining</b>									
1,550	ANTOFAGASTA ORD GBP0.05	POWYS0004	11.55 GBP		15,561.65	17,902.50	1,818.72	10.16	0.55
1,020	RIO TINTO ORD GBP0.10	POWYS0004	49.165 GBP		30,828.10	50,148.30	5,891.11	11.75	1.53
<b>Support Services</b>									
485	ASSTEAD GROUP ORD GBP0.10	POWYS0004	34.39 GBP		8,686.55	16,679.15	319.49	1.92	0.51
<b>Pharmaceuticals &amp; Biotechnology</b>									
355	ASTRAZENECA ORD USD0.25	POWYS0004	108 GBP		25,832.22	38,340.00	745.85	1.95	1.17
2,495	GSK PLC ORD GBP0.25	POWYS0004	17.656 GBP		34,117.52	44,051.72	1,297.40	2.95	1.34
<b>Media</b>									
1,650	RELX PLC GBP0.1444	POWYS0004	22.26 GBP		29,512.51	36,729.00	821.70	2.24	1.12
<b>Gas, Water &amp; Multiutilities</b>									
4,495	NATIONAL GRID ORD GBP0.12431289	POWYS0004	10.52 GBP		41,060.11	47,287.40	2,291.10	4.85	1.44



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Client report for POWYS TEACHING LOCAL HEALTH BOARD CHARITABLE FUND  
For the period from 01/04/2022 to 30/06/2022  
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## Holdings Summary

Quantity	Security Name	SubPortfolio ID	Price	Accrued Interest	Book Cost	Market Value	Est. Gross Income	Est. Gross Yield %	Ptf %
<b>UK Equities</b>									
<b>Banks</b>									
16,920	BARCLAYS PLC ORD GBP0.25	POWYS0004	1.5312 GBP		26,453.73	25,907.90	1,015.20	3.92	0.79
<b>Life Insurance</b>									
16,545	LEGAL & GENERAL GP ORD GBP0.025	POWYS0004	2.395 GBP		32,263.54	39,625.28	3,052.55	7.70	1.21
2,800	ST JAMES'S PLACE ORD GBP0.15	POWYS0004	11.025 GBP		26,516.55	30,870.00	1,454.88	4.71	0.94
<b>General Financial</b>									
2,155	ADMIRAL GROUP ORD GBP0.001	POWYS0004	22.44 GBP		46,509.12	48,358.20	6,012.45	12.43	1.48
18,660	M&G PLC ORD GBP0.05	POWYS0004	1.946 GBP		27,384.55	36,312.36	3,414.78	9.40	1.11
<b>Open Ended Collectives</b>									
13,590	ISHARES CORE FTSE100 UCITS ETF GBP	POWYS0004	7.009 GBP		82,906.05	95,252.31	3,644.84	3.83	2.91
69,135	LINK FUND SOL LTD GRESHAM HS UK MUL CAP F INC	POWYS0004	1.2765 GBP		95,408.76	88,250.83	3,902.33	4.42	2.69
30,550	PREMIER PTF MGRS L PM UK MLTI CAP INC B INSTL	POWYS0004	2.006 GBP		48,424.20	61,283.30	2,617.07	4.27	1.87
<b>Sub Total UK Equities</b>					<b>659,662.93</b>	<b>806,526.05</b>	<b>43,231.79</b>	<b>5.36</b>	<b>24.62</b>

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Client report for POWYS TEACHING LOCAL HEALTH BOARD CHARITABLE FUND  
 For the period from 01/04/2022 to 30/06/2022  
 All values and returns reported in British Pounds  
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## Holdings Summary

Quantity	Security Name	SubPortfolio ID	Price	Accrued Interest	Book Cost	Market Value	Est. Gross Income	Est. Gross Yield %	Ptf %
<b>North American Equities</b>									
<b>Open Ended Collectives</b>									
5,465	BAILLIE GIFFORD AMERICAN W1 DIS	POWYS0004	8.828 GBP		93,270.70	48,245.02	0.00	0.00	1.47
38,735	FIDELITY UCITS ICA US QUAL INC UCITS ETF GBP I	POWYS0004	6.43 GBP		220,312.29	249,066.05	5,654.30	2.27	7.60
219,680	JPMORGAN FUNDS LTD US EQUITY INCOME C2 GBP NET	POWYS0004	1.49 GBP		234,102.68	327,323.20	6,129.07	1.87	9.99
5,515	VANGUARD FUNDS PLC S&P 500 UCITS ETF USD DIS	POWYS0004	59.677 GBP		241,152.26	329,118.66	4,571.80	1.39	10.05
<b>Sub Total North American Equities</b>					<b>788,837.93</b>	<b>953,752.93</b>	<b>16,355.17</b>	<b>1.71</b>	<b>29.11</b>
<b>European Equities</b>									
<b>Open Ended Collectives</b>									
111,755	BLACKROCK FM LTD CONTL EURP INC D UNITS INC	POWYS0004	1.601341 GBP		168,156.87	178,957.86	8,057.31	4.50	5.46
<b>Sub Total European Equities</b>					<b>168,156.87</b>	<b>178,957.86</b>	<b>8,057.31</b>	<b>4.50</b>	<b>5.46</b>
<b>Japanese Equities</b>									
<b>Open Ended Collectives</b>									
86,700	JUPITER JPN INC FD JUPITER JPN INC U2 GBP DIS	POWYS0004	0.9998 GBP		80,209.13	86,682.66	2,222.99	2.56	2.65
<b>Sub Total Japanese Equities</b>					<b>80,209.13</b>	<b>86,682.66</b>	<b>2,222.99</b>	<b>2.56</b>	<b>2.65</b>



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## Holdings Summary

Quantity	Security Name	SubPortfolio ID	Price	Accrued Interest	Book Cost	Market Value	Est. Gross Income	Est. Gross Yield %	Ptf %
<b>Asia Pacific Equities</b>									
<b>Open Ended Collectives</b>									
178,945	BNY MELLON FD MNGR ASIAN INCOME U GBP DIS	POWYS0004	1.1371 GBP		180,090.92	203,478.36	6,662.30	3.27	6.21
<b>Sub Total Asia Pacific Equities</b>					<b>180,090.92</b>	<b>203,478.36</b>	<b>6,662.30</b>	<b>3.27</b>	<b>6.21</b>
<b>Emerging Market Equities</b>									
<b>Open Ended Collectives</b>									
54,270	JPMORGAN AM UK LTD EMG MKTS INC C NET INC NAV	POWYS0004	0.6729 GBP		32,721.48	36,518.28	1,145.10	3.14	1.11
<b>Sub Total Emerging Market Equities</b>					<b>32,721.48</b>	<b>36,518.28</b>	<b>1,145.10</b>	<b>3.14</b>	<b>1.11</b>
<b>Absolute Return</b>									
<b>Bond Funds</b>									
82,870	ARTEMIS FD MNGRS SHT DTD GBL H Y BD FI GBP	POWYS0004	0.8597 GBP		77,423.07	71,243.34	3,722.35	5.22	2.17
70,209.871	BNY MELLON FD MNGR NEWTON GBL DYNM BD EXMPT3 G	POWYS0004	0.8967 GBP		69,914.58	62,957.19	1,813.94	2.88	1.92
885	MUZINICH FUNDS MZNCH GBL TCTL CRED G GBP	POWYS0004	94.65 GBP		86,676.90	83,765.25	2,648.87	3.16	2.56
<b>Sub Total Absolute Return</b>					<b>234,014.55</b>	<b>217,965.78</b>	<b>8,185.16</b>	<b>3.76</b>	<b>6.65</b>

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## Holdings Summary

Quantity	Security Name	SubPortfolio ID	Price	Accrued Interest	Book Cost	Market Value	Est. Gross Income	Est. Gross Yield %	Ptf %
<b>Property</b>									
<b>Closed Ended Collectives</b>									
37,980	BLACKROCK FM LTD ISHARES GBL PROP SECS EQTY	POWYS0004	1.83183 GBP		60,633.09	69,572.90	1,550.65	2.23	2.12
<b>Sub Total Property</b>					<b>60,633.09</b>	<b>69,572.90</b>	<b>1,550.65</b>	<b>2.23</b>	<b>2.12</b>
<b>Other Investments</b>									
<b>Absolute Return (non AIC sector) Inv Trust</b>									
66,170	HICL INFRASTRUCTU. ORD GBP0.0001	POWYS0004	1.722 GBP		110,382.42	113,944.74	5,459.03	4.79	3.48
73,401	INT PUBLIC PARTNER ORD GBP0.0001	POWYS0004	1.628 GBP		117,947.54	119,496.83	5,541.78	4.64	3.65
<b>Sub Total Other Investments</b>					<b>228,329.96</b>	<b>233,441.57</b>	<b>11,000.81</b>	<b>4.71</b>	<b>7.13</b>
<b>Cash</b>									
<b>Cash</b>									
0 GBP	Dealing	POWYS0004		0.00	0.00	0.00			0.00
51,646.84 GBP	Deposit	POWYS0004		0.00	51,646.84	51,646.84			1.58
32,427.68 GBP	Income	POWYS0004		0.00	32,427.68	32,427.68			0.99
<b>Sub Total Cash</b>				<b>0.00</b>	<b>84,074.52</b>	<b>84,074.52</b>			<b>2.57</b>
<b>TOTAL IN GBP</b>				<b>0.00</b>	<b>2,986,323.81</b>	<b>3,276,016.28</b>	<b>114,174.05</b>	<b>3.49</b>	<b>100.00</b>



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## Transaction Details (from 01/04/2022 to 30/06/2022)

**POWYS0004**

Date	Transaction	Quantity	Security Name	Price	Net Amount
<b>POWYS0004</b>					
24/06/2022	SALE	13,570.00	PREMIER PTF MGRS L PM UK MLTI CAP INC B...	1.98 GBP	26,814.32
24/06/2022	SALE	245.00	VANGUARD FUNDS PLC S&P 500 UCITS ETF...	58.94 GBP	14,440.70
24/06/2022	PURCHASE	795.00	NATIONAL GRID ORD GBP0.12431289	10.39 GBP	-8,258.86
24/06/2022	PURCHASE	16,920.00	BARCLAYS PLC ORD GBP0.25	1.56 GBP	-26,453.73
24/06/2022	PURCHASE	525.00	ADMIRAL GROUP ORD GBP0.001	22.14 GBP	-11,624.92
24/06/2022	PURCHASE	1,025.00	ISHARES CORE FTSE100 UCITS ETF GBP	6.95 GBP	-7,125.66
17/06/2022	SALE	19,510.00	TAYLOR WIMPEY ORD GBP0.01	1.22 GBP	23,869.49
04/05/2022	OPEN OFFER 1 FOR 12 @ 159.5 PENCE	5,646.00	INT PUBLIC PARTNER ORD GBP0.0001	0.00 GBP	-9,005.37
04/05/2022	OPEN OFFER 1 FOR 12 @ 159.5 PENCE	5,646.00	INT PUBLIC PARTNER NEW ORD GBP0.0001...	0.00 GBP	0.00
25/04/2022	SALE	1,260.00	NATIONAL GRID ORD GBP0.12431289	11.73 GBP	14,773.29
25/04/2022	SALE	4,435.00	LEGAL & GENERAL GP ORD GBP0.025	2.54 GBP	11,242.84
25/04/2022	SALE	305.00	GSK PLC ORD GBP0.25	17.21 GBP	5,247.95
25/04/2022	SALE	10,410.00	BLACKROCK FM LTD CONTL EURP INC D UNITS...	1.76 GBP	18,336.62
25/04/2022	SALE	5,340.00	ISHARES CORE FTSE100 UCITS ETF GBP	7.26 GBP	38,785.60
25/04/2022	SALE	705.00	SHELL PLC ORD EUR0.07	21.06 GBP	14,847.84
25/04/2022	PURCHASE	885.00	MUZINICH FUNDS MZNCH GBL TCTL CRED G GBP	97.94 GBP	-86,676.90
11/04/2022	OPEN OFFER 1 FOR 12 @ 159.5 PENCE	0.00	INT PUBLIC PARTNER ORD GBP0.0001	0.00 GBP	0.00

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**Transaction Details (from 01/04/2022 to 30/06/2022)****POWYS0004**

Date	Transaction	Quantity	Security Name	Price	Net Amount
11/04/2022	OPEN OFFER 1 FOR 12 @ 159.5 PENCE	5,646.00	INT PUBLIC PARTNER NEW ORD GBP0.0001...	0.00 GBP	0.00

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## Important Information

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## Evaluation Summary for Practitioner Team

Evaluation for Horizons Project will capture stories from project activity that support recommendations for future arts and health innovation in Powys Health settings. Considerations of ethos, quality and ambition are important as well as practical issues.

The evaluation structure is grounded in 'emergent design', adaptable to new ideas and findings; aiming to gather evidence from everyone taking part including service users and health partners. Attention to the role of environment, artform, materials and creative practice / methodology is important, as well as highlighting barriers and difficulties.

Further details are outlined in the framework structure including three outcomes identified as priority by project leads, as the starting point for enquiry.

///

What we ask of Practitioners:

1. **Capture own reflections** using a reflective tool and discuss your reflections with evaluation lead Justine Wheatley (*role description required*). *Prompts for reflections will be provided. Please record digitally so that files can be easily transferred, stored and transcribed*
2. Providing that consent, safeguarding and governance frameworks are in place, **Capture data** (JW to provide register) and **capture feedback** from participants ('service users'), and health partners, using your preferred feedback tools. Creative evaluation using artworks and audio recordings can add to service user feedback, providing consent is sought and given. All data must be fully anonymised.
3. **Identify and write up case studies** in partnership with project team, health partners and (where possible) participants. We are aiming to capture one story per group to illustrate learning gained from each context encompassing experience of individuals, groups, environment, artform, creative practice. This process will include participation in at least one further group evaluation meeting to ensure the final evaluation is genuinely co-created. Any data included in a case study must be anonymised.

*It is essential that patients are informed clearly about what they are giving consent to and how they can withdraw consent if they change their minds. **It is also important to consider whether a patient is able to give consent** – are they fully conscious, do they understand what you are saying, do they understand where images might be used and who might see them, are they vulnerable? Please note safeguards apply when working with young people and vulnerable adults, that an individual's capacity to give consent can be impaired by poor mental health, and that an opportunity to rescind consent must be offered.*

*Health partners and staff can advise if there are patients who cannot give informed consent. If you learn of anything that you are concerned will lead to someone getting harmed it is essential that you tell an appropriate person such as your hospital contact or the ward manager/ sister.*

**HORIZON** PROJECT V05 draft EVALUATION FRAMEWORK  
INDEX

Page 3	Vision, methodology and project information
Page 4	Values
Page 5	Framework
Page 6-8	Priority Outcomes
Page 9	Timeline summary (see also detailed excel spreadsheet
Page 10	Notes:
	- reflective tools prompts
	- summary of Horizons application outcomes from bid

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**Author/s:** Justine Wheatley, (Lucy Bevan additions)

**Vision**

*Health settings and mental health services throughout Powys use arts and creativity to improve people's lives and health outcomes*

**About / Purpose**

*Horizon is a partnership project between Powys Teaching Health Board (PTHB) and Powys County Council aimed at service improvement and innovation. It will shape and inform a PTHB Arts in Health strategy for patients, staff, service users and partners. It aspires to embed person-centred creativity into mental health, health and wellbeing practice in Powys for the benefit of everyone accessing and working healthcare.*

**Methodology**

*Horizon project is grounded in 'co-creation', a term that reflects a determination that everyone - service users, staff, partners, practitioners - plays a role and has a voice in planning provision. We are aiming to reflect the voice everyone taking part. Active research ('action learning') is being conducted through a series of targeted, artist-led interventions with groups of service users in areas of high priority.*

**Project Framework**

*Between December 2021 to June 2022, four arts practitioners (see below) will work with service users in the following groups and settings:*

- i. acute mental health unit at Felindre Ward, Bronllys Hospital – in-patients (Emma Beynon, creative writing working with OT Millie Griffiths)*
- ii. people living with cancer, their families and unpaid carers (Cai Thomas (+Impelo), dance / movement / music, working with Macmillan+NHS)*
- iii. children & young people with mental health diagnoses (Ralph Bolland, how stories work, working with OT Kirsty Davidson and CAMHS)*
- iv. end of life care; bereavement; loss & grief (Cai Thomas, dance / movement / music, working with Macmillan+NHS)*
- v. suicide & self-harm prevention; substance mis-use prevention (Cathy Knapp, pottery+ceramics, working with CAIS)*

*In addition, Tamara Gordon will be working across all projects with a commission to create documentary film or video diaries.*

*Practitioners will plan and deliver up to 10 (tbc) weekly sessions using a creative medium in which they are expert, for the benefit of service users' personal health and wellbeing. They will be working with members of health and clinical teams for each group. The development and delivery of activity will be shaped for and responsive to individual and collective needs of each group.*

**Values:**

*Everyone working within the Horizon project commits to working sustainably and with transparency, professionalism and confidentiality. We share the belief that every voice is important and valuable and will endeavour to reflect their views and voice in the project evaluation. Recognising the multiple barriers that prevent and discriminate against people from accessing services – including arts opportunities - and that these barriers are exacerbated for people living rurally, we will strive to support accessibility to meet individual needs and promote inclusion.*

*We embrace the values of Powys Teaching Health Board:*

- Trust.
- Respect.
- Integrity.
- Working Together
- Kindness and Caring
- Equality and Fairness

*Language is a medium of expression, communication and integral to individual and community identity and we will embrace the use of Welsh language and aim to support Welsh language speakers who take part, whilst acknowledging that the delivery team comprises English speakers*

**Evaluation Methodology**

*Horizons project is working towards improvement and innovation to health services in Powys through arts and health initiatives. To make lasting change, an evaluation that demonstrates approaches that are possible and realistic and that reflects all our learning – negative and positive - is likely to have the greatest impact.*

*Sharing the ethos of co-creation that shapes the project delivery, Horizons evaluation aims to collect evidence **with** its participants and give weight to individual stories from each setting that takes part. Whilst we need to collect anonymised quantitative data (how many took part, how many sessions), the priority is to collect powerful and memorable narratives that reflect the individual and collective experience of the service user, staff member and practitioner and to recognise / record the role and importance of environment, materials and creative medium.*

*The framework proposed below learns from the 'Most Significant Change' (MSC) evaluation technique, which has a long history within healthcare improvement and is increasingly used in Welsh settings\*\*. This focuses on collecting, selecting and (where possible) discussing stories of 'significant change' within each of the groups that are meeting across the project.*

*\*\*This 30 minute [presentation](#) by Nick Jenkins is recommended.*

### **Evaluation Framework**

*In order to enable practical recommendations for a Powys arts and health strategy and ensure learning **beyond set outcomes** we will:*

- *Include perspectives from everyone taking part*
- *use open-ended feedback tools to capture all the learning, positive and negative*
- *collectively identify stories of 'most significant change' to present to decision makers in the final report*

*Three outcomes have been identified as **priorities for evaluation** (see below and go to final page for a full list of anticipated outcomes).*

- 1. People taking part report that they gain benefits from the creative activities and expressing themselves**
- 2. Health and / or support workers report benefits to their work and for service users from creative interventions for therapeutic purposes**
- 3. People taking part are empowered to share their feelings and are listened to**

Evaluation Tools:

Practitioner evaluation and data collection:

- reflective journal (or similar) recording sessional activity, noting individual, and group, behaviours
- Register of sessions to record people attending
- meetings between practitioner and JW to discuss evaluation and identify significant narratives to capture through case studies
- at least one project team meeting to share and discuss case studies and identify key learning

Participant ('Service user') evaluation:

- Feedback tools using practitioner's preferred method (to be discussed) such as postcards, colour trees etc
- Creative evaluation activities planned as part of the session to explore and share impact from their participation
- Individual or group artworks

Partner organisation, health and / or support worker evaluation:

- Use of feedback tools as above
- meeting with JW and / or project team to provide perspectives on the sessions and their impact
- attendance at a project team meeting to share and discuss case studies, and identify key learning

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**Case Studies / Stories of significant change:** *At least one per group to capture narratives of service users; health team; environment; materials; creative medium*

**Outcome 1**

**People benefit from taking part in creative activities**

**What does success look like? 'Indicator'**

Participants demonstrate or report ...

*Learning new skills and developing strategies (creative life tools) that support good mental health, reduce anxiety and relieve depression*

*Access and engender feelings of calm, enjoyment, fulfilment, comfort, joy, pleasure*

*An opportunity to process or turn away from difficult emotions or troubling thoughts*

*Connection with other people / making new friends / building a support network (in the community as well as in health care service settings)*

*Improved understanding and communication with health professionals*

People taking part are from groups facing overwhelming health and personal challenge. For some people, a 'benefit' could be willingness or ability to stay present in the room or to give vent to troubling thoughts and emotions.

**Tools**

1. Reflective journals or notes – (artist feedback)
2. Artworks developed or produced (artist planned)
3. Feedback tools used by practitioner (e.g. postcards, colour trees)
4. Case studies of 1 or 2 participants at each group OR a case study about the group OR setting / environment OR about the creative medium

**In addition to consent and image release, if film or photography is used as an evaluative tool, the anonymity of participants must be preserved and only activity should be recorded (hands, materials).**

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## **Outcome 2**

**Health / support workers report benefits to their work and for service users from creative interventions for therapeutic purposes**

### **What does success look like? 'Indicator'**

*Developing strategies to deploy in supporting positive health outcomes for service users*

*Developing strategies for better communication with service users*

*Improved relationship and / or understanding of service users*

*Personal benefits from creative life tools that support good mental health, reduce anxiety and relieve depression*

*Access and engender feelings of calm, enjoyment, fulfilment, comfort, joy, pleasure*

*An opportunity to process or turn away from difficult work situations*

### **Tools – how we will know**

1. Reflective journals – (artist feedback)
2. Feedback tools used by practitioner
3. Interview with Justine Wheatley / practitioner
4. Case studies of 1 or 2 support workers
5. Participation in group evaluation meetings

**In addition to consent and image release, if film or photography is used as an evaluative tool, the anonymity of participants must be preserved and only activity should be recorded (hands, materials)**

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### **Outcome 3**

**The voices of people taking part are listened to and they are empowered to share their feelings**

#### **What does success look like? 'Indicators'**

We have collected personal testimony through artworks, interviews and digital stories that are shared. Case studies – stories of change – have been developed and where possible, shared with the service users so that they can reflect on and agree their content.

#### **Tools**

1. Reflective journals – (artist feedback)
2. Artworks developed or produced (artist planned)
3. Case studies
4. Documentation through film, photography or audio recording in accordance with governance and consent frameworks
5. Digital stories made alongside the activity sessions

**In addition to consent and image release, if film or photography is used as an evaluative tool, the anonymity of participants must be preserved and only activity should be recorded (hands, materials)**

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**Outline Evaluation timeline – see excel spreadsheet**

Friday Feb 18 2022	meet to discuss, refine and agree framework
8 March 2022	deadline for final framework and any tools or resources needed are in place
March and April 2022	sessions continue; practitioners maintain and share reflective journals / artworks  interviews with practitioners, support workers are arranged to support evaluation and identify stories of significant change  Documentation arranged where possible, or appropriate
May 2022	<i>evaluation meeting to review progress</i>
June	evaluation assembled
July	final evaluation meeting Report drafted, reviewed and submitted

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## **NOTES**

### **Practitioner reflective tools / diaries / journals – Prompts**

- What worked, what didn't work? What could be improved?
- Was there a willingness to communicate and take part?
- Did participants engage with creative expression?
- Did you observe any development of skills?
- What observations and discussions can you share about and from the support / health worker?
- Did you observe barriers to taking part in activities encountered by participants including environmental factors?

### **Horizon Project Expected Outcomes (from application doc)**

- Shared understanding gained between patients/service users, staff and partners of the power of creativity to underpin mental health, health and wellbeing
- Increased sense of wellbeing through accessing creative arts and therapeutic activities, which makes a tangible difference for people
- Opportunities for people to participate directly in helping to shape and develop PTHB's Arts in Health Strategy and related Action Plan, contributing directly to the evidence of what works and why
- Increased resilience and self-awareness in managing mental health, health and wellbeing
- Staff upskilled in the importance to health and wellbeing of facilitating and collecting patient stories, their associated experiences and supporting the voice of patients/service users to be heard
- Embedding a culture of shared work practice, creating therapeutic alliances, collective understanding and knowledge of each other's professional approaches for the mutual benefit of enhanced person-centred mental health and health related services

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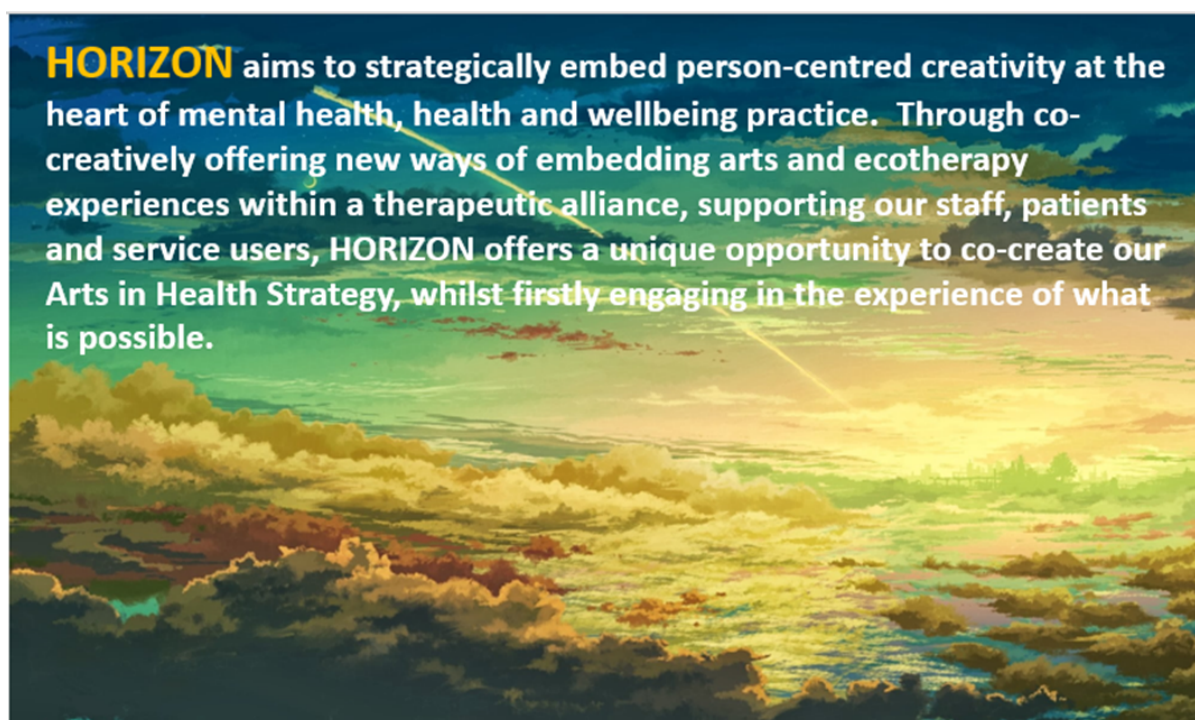
# HORIZON

**Project:** HORIZON

**PTHB Service:** Mental Health

**Report:** Project Progress UPDATE SUMMARY Report

**Date:** 16 June 2022



**HORIZON** aims to strategically embed person-centred creativity at the heart of mental health, health and wellbeing practice. Through co-creatively offering new ways of embedding arts and ecotherapy experiences within a therapeutic alliance, supporting our staff, patients and service users, HORIZON offers a unique opportunity to co-create our Arts in Health Strategy, whilst firstly engaging in the experience of what is possible.

## **Project management personnel**

Lucy Bevan – ARTS IN HEALTH COORDINATOR – PROJECT LEAD

Guy Roderick – PROJECT NAVIGATOR / COORDINATOR

Susan Hughes – PARTNERSHIP & Arts in Health Service MANAGER

## **OBJECTIVES AND PROGRESS**

HORIZON aims to strategically embed person-centred creativity at the heart of mental health, health and wellbeing practice. Through co-creatively offering new ways of embedding arts and eco-therapy experiences within a therapeutic alliance, supporting our staff, patients, and service users HORIZON offers a unique opportunity to co-create our Arts in Health Strategy, whilst firstly engaging in the experience of what is possible.

The project involves working closely with services and health professionals to support the co-curation of creative arts and eco-therapy interventions between mental health service users, patients, creatives and arts practitioners.

HORIZON aimed to focus on people's needs in the following areas of high priority: -

- Acute mental health unit at Felindre Ward, Bronllys Hospital – in-patients.
- People living with cancer, their families and unpaid carers.
- Children & young people with mental health diagnoses.
- End of life care; bereavement; loss & grief.
- Suicide & self-harm prevention; substance mis-use prevention.

## CONTEXT

From the World Health Organisation's statement on Arts and Health...

### Overview

Artistic expression grew in lockstep with human cultural development and has long played an integral part in **how we teach, learn, communicate, and heal**. Since our earliest ancestors began telling stories to make sense of the world, we have evolved to learn from narrative, be it through visual media, song or performance. The arts are uniquely suited to help us understand and communicate concepts and emotions by drawing on all our senses and capacity for empathy. **In recent decades, we have come to understand the intrinsic health benefits to artistic and leisure activities**. Art can help us to emotionally navigate the journey of battling an illness or injury, to process difficult emotions in times of emergency and trauma and even to physically recover more quickly from injury or disease. **The creation and enjoyment of the arts helps promote holistic wellness and can be a motivating factor in recovery**. Including the arts in health care delivery has been shown to increase positive clinical outcomes for patients while also supporting other stakeholders, including health care providers, the patient's loved ones and the wider community.

### Impact

Research by the WHO Regional Office for Europe has shown that **the use of artistic media in health care can have lasting benefits for health outcomes**. The arts can affect the social determinants of health, support child development, encourage health-promoting behaviours, help to prevent health issues and support caregiving. They can also reduce stress, which help to prevent or slow the progression of a range of conditions including cardiovascular diseases and even some cancers. **Creating and experiencing the arts can have profound effects for those affected by mental illness**. Their ability to provoke cognitive stimulation is effective in the treatment of dementia and other conditions associated with ageing; the use of art to process emotion can be effective in treating depression and anxiety; and associated social interaction can be an effective way to prevent risk factors of mental illness including loneliness, discrimination and reduced social capital.

### WHO response

The 1947 Constitution of the World Health Organization states, "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." With this in mind, WHO has always long used the arts in its work on health promotion and communication. Anthropology has shown that in early human history, art, religion and healing evolved in the same social space, and today, work is progressing towards making art and health a permanent program within the WHO community. In 2019, WHO began testing arts interventions to advance specific health goals, including universal health coverage (UHC), mental health and suicide prevention, maternal health, blindness prevention and quality of care, in addition to historic efforts in HIV/AIDS prevention. Over the past two decades, innovations incorporating the arts and health have been used to improve physical and mental health and wellbeing in communities, provide therapeutic, rehabilitative and preventive impacts. WHO's Regional Office for Europe is leading work into research on the effect of art in health through the Culture and health programme.

## **PRIORITY AREA 1**

### **Acute mental health unit at Felindre Ward, Bronllys Hospital – in-patients.**

#### Health Professionals

Millie Griffiths - Mental Health Occupational Therapist - Powys Teaching Health Board  
Adam Price – Occupational Therapy assistant.  
Occupational Therapy Students.  
Psychology student.  
Kirsty Davidson - Professional Lead Occupational Therapist - Mental Health / Eating disorders  
- occupational therapist - Powys Teaching Health Board

#### Creative Professional

Emma Beynon

#### Creative Activity

Creative Writing

14 sessions of which 5 were cancelled due to Covid on the Ward, room unavailability, staff absence due to illness and no patient uptake.

#### Location

Felindre Ward, Bronllys

#### Beneficiaries

12 adults (3 male + 9 female)

#### **Summary**

This project was the first and easiest to establish, and the first to be completed. Reasons being the lead Occupational Therapist was already aware of the benefits of participatory arts activity for adults with significant mental health challenges. She was also aware of and wished to commission the work of creative writer, Emma Beynon. HORIZON provided her with the financial resources she needs to provide an enhanced service she knows is of value. Felindre ward took responsibility for risk assessments, safeguarding, and all necessary permissions. Also – there was no requirement to recruit or establish referral pathways for attendees.

#### **Quotes**

*"I met the father of one of the patients at Bronllys. He told me that his daughter had really enjoyed and valued the creative writing workshops. Since the project, he, his family and daughter in Bronllys are now sharing and talking about poetry together via WhatsApp and during visits. He wanted me to share this with you because he felt the creative writing workshops had allowed him to develop new and positive ways to support his daughter."* (Creative Professional)

*"It develops a resilience. It's just about the person who is writing, the participants lead it, they can write what they like, they have control, they can share their views on a poem and then do what they like."* (Occupational Therapist, Bronllys Secure Mental Health Unit.)

*"You could see that they wanted each other to be good, they really listened. Sometimes out on the ward this does not happen."* (Occupational Therapist, Bronllys Secure Mental Health Unit).

*"On the ward the patients have no control of anything: when they eat, have a cup of hot chocolate but in the workshop, they can control of what they read, write and how they respond."* (Occupational Therapist, Bronllys Secure Mental Health Unit).

*"C immediately asked if she could write about a place she would like to have in the future. 'Is it alright to imagine the room?' C's request was a real breakthrough. C came to the ward because she was suicidal. Up until the workshop she had refused to talk about her future and if pressed to do so was very cynical."* (Occupational Therapist, Bronllys Secure Mental Health Unit).

*"It's so good the Nurses get a chance to see the patient in a different and very positive light'. 'it was really relaxing for the staff.'" (Occupational Therapist, Bronllys Secure Mental Health Unit).*

*"K always gives feedback now, she has overcome her inhibition to join in, she is writing for so much longer and was happy to choose the words and phrases that inspired her to write demonstrating an increase in her decision-making skills."."* (Occupational Therapist, Bronllys Secure Mental Health Unit).

*"At first the patients are too unwell to engage, take T for example when he came before Christmas he was engaged, he was taking it all in but he just could not express himself. But as the patients start to recover this workshop is brilliant for bridging their return into the community".* (Occupational Therapist, Bronllys Secure Mental Health Unit).

*"in these workshops we (OT's) get to see a different side of them, sometimes when you are asking them questions it seems very invasive, but in the workshop, they are happy to share, they even volunteer to share!".* (Occupational Therapist, Bronllys Secure Mental Health Unit).

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## Emotions tree



Colour of feeling at the **start** of session



Colour of feeling at the **end** of session

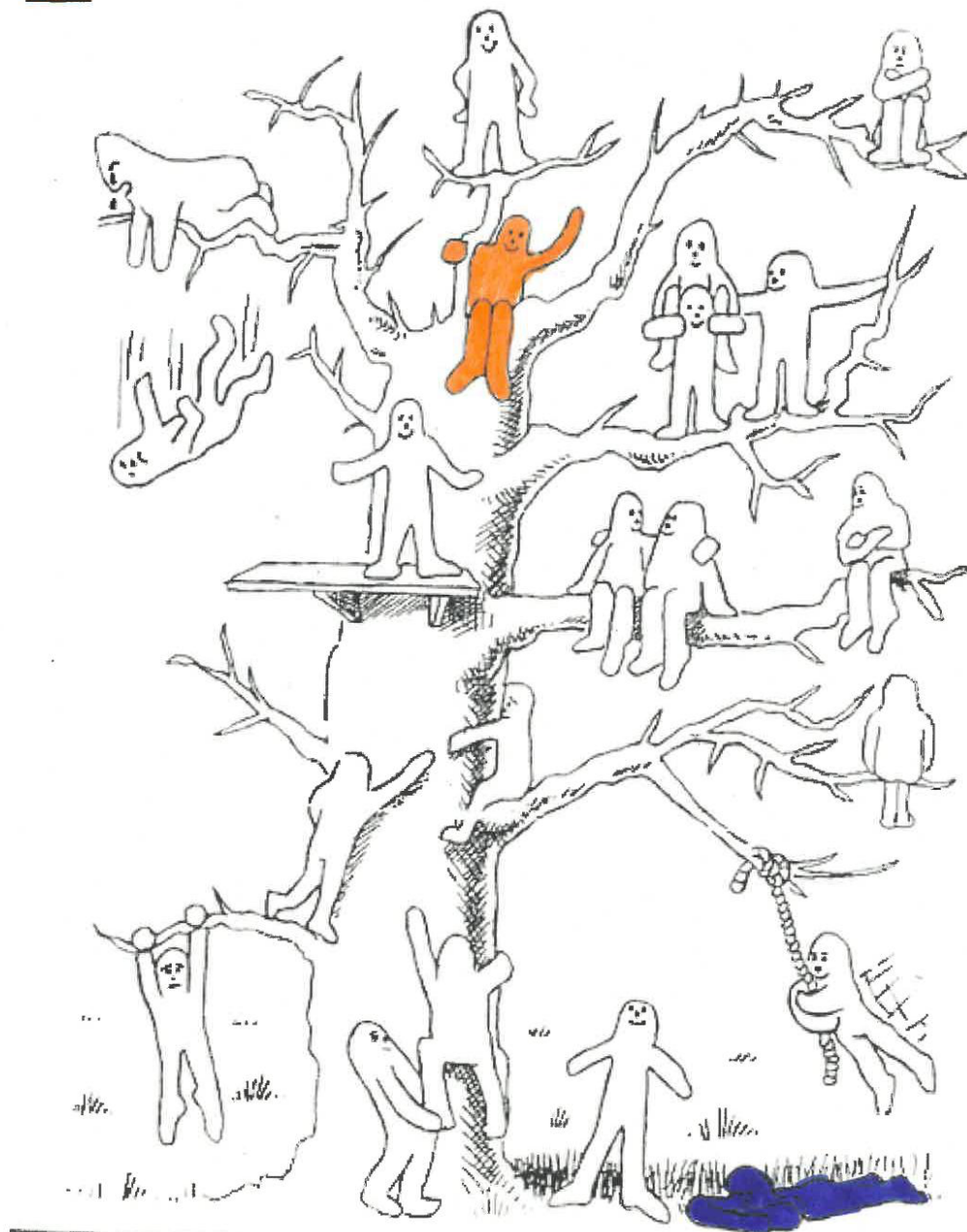


Illustration 1: By an attendee of the creative writing workshop at Felindre Ward, Bronllys  
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## **PRIORITY AREA 2**

### **People living with cancer, their families and unpaid carers.**

#### Health Professionals

Meinir Morgan - Macmillan Programme Lead - Improving the Cancer Journey  
Yvette Marks - Powys Improving the Cancer Journey Programme Officer  
Sue Ling - Macmillan Communications and Engagement Officer Improving the Cancer Journey

#### Creative Professional

Cai Tomos - Integrative arts Psychotherapist, Somatic Experiencing Practitioner, Independent Artist.  
Lead/managing Agency - Suzy West & Jemma Thomas – 'Impelo' Dance Company

#### Creative Activity

Somatic Dance (movement meditation)

#### Location

TBC – COWSHACC, Welshpool & Bracken Trust, Llandrindod Wells

#### Beneficiaries

TBC – Inspire Welshpool – Cancer Support Group.

### **Summary**

This project aims to demonstrate the efficacy and cost effectiveness of contracting extant Powys arts and cultural service providers to lead Arts in Health projects. The project budget has been entrusted to IMPELO to manage and they will invoice PTHB directly. IMPELO will contract practitioners and be responsible for risk assessments, safeguarding, and all necessary permissions.

IMPELO community dance company has already begun developing and co-producing arts in health projects in partnership with the Improving the Cancer Journey Team and The Bracken Trust / Macmillan.

Progress so far...

The Improving the Cancer Journey Team helped identify lots of areas where they could see this project happening and having a big impact; Support group, 'Inspire' in Welshpool, Families going through treatment wanting to engage digitally with some activity, The Bracken Trust Lymphedema group, CREDU young carers in a caring role for a family member going through treatment and a series of awareness days across Powys through which we can attend/ offer taster sessions.

Potential Issues so far...

Cai Tomos (creative professional) raised concerns with his availability and is worried he may not be able to commit to all the days in the time frame. An alternative practitioner, one of Impelo's associates will step in should Cai be unavailable.

An overarching theme is the difficulty in finding mutually convenient dates and spaces for participants and professionals. Despite a positive first meeting with the Inspire group in Welshpool, significant problems with suitable venues for the group, their availability and creative professional's availability.

Potential work with the Bracken Trust will most likely be with an alternative dance practitioner.

Impelo will take responsibility for risk assessments, safeguarding, and all necessary permissions.

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## **PRIORITY AREA 3**

### **Children & young people with mental health diagnoses.**

#### Health Professionals

Kirsty Davidson - Professional Lead Occupational Therapist - Mental Health / Eating disorders  
- occupational therapist - Powys Teaching Health Board  
Joanna Short - CAMHS  
Joanna Swales - Project worker with CAMHS  
Mary Griffiths - Development Manager -Mid and North Powys MIND  
Lorna Jones - CYP Team Lead, Mid and North Powys MIND.

#### Creative Professional

Ralph Bolland - Actor; Writer; Poet; Storyteller.

#### Creative Activity

Exploring Stories through writing and drama.

#### Location

Celf o Gwmpas, Llandrindod Wells.

#### Beneficiaries

Mid and North Powys MIND Youth Group.

#### **Summary**

Progress with this project has been delayed by difficulties in communication with health professionals working within CAMHS due to the demands of their excessive and increasing workloads and staff shortages. At the outset, we approached Ralph Bolland about an agreement between HORIZON and the Mid Powys Youth Theatre (MPYT), similar to that with IMPELO on project 2.

By end of March 2022 the lack of progress obligated us to approach alternative organisations supporting young people with mental health challenges. As recently as last week w/c 6<sup>th</sup> July we established an agreement with Mid and North Powys MIND to run six weekly sessions with their youth group, the first of which took place on 9<sup>th</sup> June and was regarded by Mid and North Powys MIND and Ralph Bolland as a success.

Mid and North Powys Mind will take responsibility for risk assessments, safeguarding, and all necessary permissions.

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## PRIORITY AREA 4

### End of life care; bereavement; loss & grief.

#### Health Professionals

Louise Hymers - Macmillan Lead Nurse for Cancer and Palliative Care  
Victoria Sharpe - Powys Teaching Health Board – Workforce and OD

#### Creative Professionals

Matt Wright – Artistic Director – 4Pi Productions UK (Immersive, virtual, interactive, experiential digital production)  
Cai Tomos - Integrative arts Psychotherapist, Somatic Experiencing Practitioner, Independent Artist.  
Simon Enoch – Consultant – Rescape Innovation Ltd. (VR Headset lease hire and content programming)

#### Creative Activity

Virtual, experiential environmental projections.

Somatic Dance (movement meditation)

Virtual Reality experiences.

#### Location

TBC

#### Beneficiaries

Those supported by Palliative Care team in Powys

#### **Summary**

Progress with this project has been delayed by difficulties in communication with health professionals due to the demands of their excessive workloads. As a result, we have adapted the project twice, first to move on from 4Pi Productions because of them being unavailable as creative providers. Secondly from Cai Tomos as delays in communication caused availability conflicts despite the best efforts of Health Professionals to enthusiastically support. We are finally awaiting a meeting with Health Professionals to discuss positive responses to the use of VR headsets in palliative care settings.

**Note:** This project element links to the **End of Life Community Hospitals project** and the **National Museum of Wales – Art at End of Life project**.

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## **PRIORITY AREA 4**

### **Suicide & self-harm prevention; substance mis-use prevention.**

#### Health Professionals

Sarah Langford - CAIS

#### Creative Professionals

Cathy Knapp - ceramicist  
Alison Finnieston - ceramicist

#### Creative Activity

Pottery / Ceramics

#### Location

Mid Wales Arts - Caersws

#### Beneficiaries

Young people supported by CAIS

### **Summary**

This is the second project to have reached completion. This project was managed by Mid Wales Arts where the director and staff share extensive experience in arts in health participatory activity. An agreement between MWA and CAIS was established in late 2001 with a view to running an intensive programme of workshops over the spring half term but was cancelled due to weather conditions and illness. The project was rescheduled for the Easter holidays.

Although CAIS recruited 10 of the young people they support to sign up to the project, on the day only one young person attended. As the workshop drew nearer CAIS explained that young people dropped out for a variety of reasons such as poor mental health, too far to travel but also COVID impacted as we had some who were unwell with COVID but also others who were concerned about group activities.

One of the issues CAIS staff noted is that lots of the young people are not engaging with education or being very sporadic with their attendance. The team have also noticed that since the pandemic that many of their young people are not keen to do anything such as extra-curricular activities. They have also noticed this when doing outreach that young people don't appear to be meeting up in the evenings. Eventually four young people participated in the activity.

CAIS and MWA shared responsibilities for appropriate risk assessments, safeguarding, and all necessary permissions.

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**Illustration 2:** Young participants at Mid Wales Arts Centre.

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## Digital Stories

Digital stories are voice recordings edited to tell a two-minute first person story and put together with images. Stories may be created for a variety of reasons, for example in response to a complaint or compliment regarding health services, and they are always about personal or organisational reflection and learning. The person telling the story has to be fully involved in the development and ownership of the story. Stories can be very powerful and can reach a wide audience and improve services. Health Boards in Wales are committed to viewing Patient Digital Stories as a means to develop and improve services.

HORIZON included costs for the opportunity to train up to 12 health professionals in Powys. Despite this opportunity being promoted widely within Powys' health service there was insufficient uptake from its health professionals. The commitment was nine x 90-minute sessions over three weeks. That may have been a problem for many, if not most staff. Of the four who expressed an interest only two were able to take up places.

However, the two PTHB staff who were able to take up the training opportunity were obliged to withdraw because PTHB could not provide, at that time, permission for the download of the two free software programmes required to produce digital stories due to a lack of clarity about what process would be required to enable this. Since November 2021 – seven months ago - the HORIZON team and the PTHB professional charged with gathering patient feedback stories have been making concerted efforts to request that PTHB undertake the necessary measures in order to allow staff to download a video and sound editing software onto their work computers. Our efforts remain ongoing.

Given the contractual commitment to the Digital Stories trainer, who is training health professionals in all of Wales' health boards, where no-one else has experienced barriers to accessing the necessary software, the funds were committed. Therefore, HORIZON's Project Navigator and Video Diarist took up places on the course and the course trainer has subsequently recommended that our Project Navigator, who completed his MA module in digital stories, is suitably trained and experienced enough to train Powys health professionals in how to help service users to produce digital stories, once the Health Board has allowed permissions to use the recommended software.

## Film Making

In order to enhance the impact of the digital story aspect of HORIZON we contracted the services of a professional, experienced film maker / video diarist, Tamara Gordon. The original brief was to work with the Digital Story trainer to develop a bespoke method of video recording HORIZON's work with staff and patients.

Following their discussions, they planned that 12 health professionals would be trained in digital storytelling, along with the video diarist, who would then edit a short film of that process. She would then mentor each member of staff as they work with patients to produce one story each covering the range of therapeutic practices within the HORIZON priority areas.

Subsequently three short video diaries would be produced with participants, following their journey through the health service. The video diarist would also lead film making and editing workshops with participants in all five of the priority area projects, based on three days for each, including subsequent online technical support sessions.

Given that no health professionals were able to undertake the digital story training within the HORIZON timeframe the brief for the video diarist / film maker had to be revised, focussing only on the film making and editing workshops with participants in all five of the priority area projects. The video diarist's contract ends in early July 2022 and so, because of delays in establishing all five projects, she has only so far been able to focus her work on two of the five projects and is in the editing stage of completing five short films to illustrate the work, experiences and lessons learned

from these projects; with a view to this work contributing to the formal evaluation of the HORIZON project.

Despite, not have met our set targets in this area within the project to date, we have adapted to make best use of the resources and note that progress in igniting interest and making useful contacts within the PTHB workforce may lead to further developing this workstream across the health board in time. (The practice and use of Digital Storytelling is moving to becoming a requirement / expectation of health board across Wales.)

## **Evaluation**

Evaluation of the HORIZON project is being undertaken by Justine Wheatley, Executive Director of Peak Cymru, Crickhowell. At the outset Justine held a meeting with representatives of partner organisations and creative professionals to outline to evaluation framework and clarify the inputs required from all project partners.

To date Justine has held and recorded in depth interviews with the video diarist/film maker, the creative professional and lead occupational therapist involved in the project on the Felindre Ward, Bronllys. Also, with the creative professional from Mid Wales Arts and the lead officer of CAIS in Powys. She has planned to also interview the lead officer at Impelo Dance, the Professional Lead Occupational Therapist based in Bronllys, and HORIZON's Project Manager / Arts in Health officer and Project Navigator/Coordinator.

Justine has agreed to include in her report any progress with the three outstanding projects by the end of July. Given the extended delays in establishing all five projects Justine is currently thinking that the evaluation should focus on the Felindre Ward, Bronllys project which could yield significant detail because of the commitment of the occupational therapists, the extensive experience of the creative professional and the existing arts and creativity provision, however limited, on the Felindre Ward: it makes for a good case study.

Based on our learning so far, Justine intends that the evaluation report would look at:

1. what we can learn from how the project was planned which would examine barriers we, the health and creative professionals have faced (how not to do it)
2. what we can learn from the delivery focusing on Bronllys including shortcomings such as the minuscule budget that OTs have at their disposal
3. evidence base from around Wales and other UK healthcare settings based on desktop research and interviews.

The Evaluation Report will be written in July and reviewed/ finished in August 2022, after which the evaluator will no longer be available to us.

## **Challenges**

The challenges faced by the HORIZON project echo those being experienced by many of the arts in health projects being initiated and undertaken across Wales and the rest of the UK.

Before looking at the specifics of our project, as a general note, COVID and lockdown restrictions had inevitable impacts on planning and implementing in the early stages of HORIZON, including the impact of professionals' availability to work with and engage in planning activity.

The significant workload demands on health professionals means progress in developing and establishing non-clinical, holistic activities are not prioritised. HORIZON has illustrated how it can take up to five months simply to agree, arrange and successfully hold a meeting to discuss how HORIZON funding and resources can help support and supplement a health board department. No blame is being apportioned here – it is simply illustrative of the intense workloads faced by many health professionals as well as changes to service priorities, staff shortages & changes and frankly with the Powys Teaching Health Board having been operating as Business Critical over much of the



course of the project, there has been little space or give available to test creative interventions with people.

How people are referred to 'arts in health' activities and services is a significant challenge and the best solution is still to be determined by health boards and arts organisations across Wales. (Welsh Government is currently preparing for consultation over creating a Social Prescribing Framework for Wales.) In the meantime, poor uptake and low numbers are the reality. This will be a long but critical journey needing a viable long-term strategy; and financial support being made available to enable these new co-working / partnership agreements to develop across Wales and the UK.

The HORIZON budget proved to be too limited for the necessary time to be made available in order to meet the original aims and objectives of the project. Given the time needed to establish, manage, and administer five separate projects, the broader objectives were unrealistic for a Project Lead and Journey Navigator working only seven hours per week for fifty weeks.

HORIZON has delivered significant, valuable learning experiences and underlined the efficacy of identifying and developing partnerships with existing artistic and cultural service providers in the county, rather than the PTHB becoming a commissioner of work from individual creative professionals.

We have also learned that the artistic and cultural sector needs to develop its understanding of the unavoidable constraints brought on by the demanding workloads of health professionals. Professionals in the artistic and cultural industries in Wales are accustomed to deadlines both in terms of delivery and funding conditions. Freelance creative professionals and arts organisations have their own schedules and commitments that will need to adapt in order to develop and provide a programme of arts in health activities available to the health service and the people in need of their services.

## **AREAS OF SUCCESS**

The most successful of the two projects completed so far has been working with adults coping with significant mental health challenges, residing in the Felindre Ward, Bronllys.

Whilst delivery has been practically problematic, the enthusiasm and understanding of health professionals of the benefits of bringing the arts into health has been immense. The project has not had to be 'sold' or the potential outcomes overly explained.

## **AREAS FOR IMPROVEMENT**

To improve future initiatives more time should be given at the outset to consult with health professionals about the aims, objectives and 'offer' of the project in order to better plan how best to fit in with the work commitments and objectives of their departments.

Equally important will be to work alongside the health professionals to enable the 'patients' voice' in the design and scope of arts in health projects.

Similarly, in the development of the *Powys Creative Arts, Health and Wellbeing Strategy* – these issues need to be shared, understood and addressed before setting overly aspirational ambitions. (HORIZON was designed to experiment, in many respects, as to what works and does not work when striving to embed the arts into health care – this 'testing' is a highly valuable process and the ongoing project management style, that of continuous evaluation and active response, is contributing to a great deal of valuable knowledge being gained by the project team, health professionals, third sector community-based organisations and arts providers.

## NEXT STEPS

As for next steps, although the process has been delayed because of HS staff workloads and, as a result, insufficient budgetary allowance for management and coordination, we are still in the process of completing the project. Of the three outstanding elements, working with young people coping with mental health challenges began just a few days before drafting this report and early signs are positive. We are clear on how best to support the palliative care team supporting people at the end of their lives, and are able to offer a creative solution that meets their identified need. And our project supporting people on the cancer journey has all of the key elements in place, with people signed up to participate and contribute to the evaluation; we are now only waiting for the coordination of mutually convenient dates, times and locations in order for the work to begin.

## CURRENT 'milestone stage' CONCLUSION

Overall, in terms of the project management role, it quickly became clear that the extenuating circumstances surrounding the project plan delivery require/ed adaptability, a fleet footed attitude towards connection forming and planning options and a 'listening / open' style with regard to how to find and follow 'the energy' – collaborating with those where the meeting of people's mutual & identified needs was possible.

Given COVID and its aftershock, HORIZON has benefitted from a certain renewed concern for the holistic welfare of the people of Powys (and the world), not only for their physical health but increasingly new and improved ways to support those experiencing increasingly complex mental health needs. The arts clearly have a role to play here, but necessary to creative practice growing effectively and contributing benefits within health services is the talent, experience and involvement of our Powys Teaching Health Board staff and colleagues and the continuing of the patient voice telling of their experiences.

## Authors:

Guy Roderick – HORIZON Navigator / Coordinator

Lucy Bevan – Arts in Health Coordinator PTHB / Arts & Culture Commissioning Officer PCC

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GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd  
Addysgu Powys  
Powys Teaching  
Health Board



## PTHB Charity

### Project Evaluation Form

All projects funded by PTHB Charity are of great importance to us and we are grateful that you have taken the time to complete the project evaluation form.

The information you have provided will be used to gain a better understanding in order to help improve our funding process and provide better support to applicants. The project evaluation form is not to judge projects but to gather all information, whether positive or negative.

#### **SECTION 1: To be completed by project lead.**

<b>Name of project:</b>	Funding for Research Midwife Role		
<b>Your Name:</b>	Shelly Higgins		
<b>Role within the Project:</b>	Lead		
<b>Project start date:</b>	July 2021	<b>Project end date:</b>	July 2023
1. What were the project objectives? Do you feel you were able to meet those objectives?			
<p>The original bid sought support for implementation of a research midwife in PTHB. A specific work plan was developed that aimed to meet the following objectives over 2 years:</p> <ul style="list-style-type: none"> <li>Focus on building midwifery research portfolio</li> <li>To be the key person in the ABA-Feed trial with the Birmingham Trials Unit</li> <li>To shadow Heather Strange – Researcher at Cardiff University for the NEPTUNE study</li> <li>To embed a research culture within maternity and W&amp;C Services</li> <li>Identify opportunities for PTHB to be a site for midwifery research</li> <li>To follow the research protocols for studies and ensure good governance is in place</li> <li>Identify opportunities to conduct primary research in PTHB and pursue development of small-scale study</li> <li>Link with RDCS as required</li> <li>Attend specific training courses in qualitative research methods</li> <li>Be part of All Wales research forum</li> <li>Develop and maintain links with research and innovation hub</li> <li>Explore sub-site options for obstetric trials</li> <li>Lead and be involved in audit</li> <li>Dissemination of findings</li> </ul>			

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## Progress during Year 1 – July 2021-July 2022

- Presentations of research to midwifery students at Bangor University and University of South Wales to promote midwifery research as a career.
- Initiation of a networking group of research midwives across Wales which now includes midwives from all health boards who meet virtually every 2 months to discuss studies, successes, and issues, and identify any upcoming trials that may be of interest or for potential participation. The Wales lead for Midwifery Research, Professor Julia Sanders, is also an attendee.
- The research midwife has shared midwifery research with colleagues through the Powys RCM facebook page, twitter account and weekly briefings in order to promote the evolving evidence base for midwifery care. Verbal updates are also a standing agenda item at the midwifery team meetings which are held alternate monthly.
- The research midwife has written an article for the RCM website to promote the role of research in midwifery.  
<https://www.ilearn.rcm.org.uk/mod/book/view.php?id=7735&chapterid=13071>
- Powys midwifery colleagues were engaged in a research study to understand midwives' decision-making regarding episiotomy. 7 Powys midwives were interviewed as a group, with 2 interviewed individually, by research staff from the Universities of Oxford and Brighton. The Powys research midwife acted as a facilitator for these discussions and then was able to attend a workshop at Oxford University to identify themes from the interviews and contribute to the understanding of the findings. This study has now been written up and an article has been accepted for publication by the journal Birth. -  
"Informed consent in episiotomy; Co-analysis with midwives and distillation of best practice" by MacLellan, Jennifer; Webb, Sara S.; Byrne, Carmen; Brace, Emily; **Glyn-Jones, Elizabeth**; Edwards, Elizabeth; Hunter, Tracey; Longton, Jacqueline; Cleary, Jane; Christie, Katie; Dow, Lorna; Gould, Jo.
- Presentation of audit findings to the Women and Children's audit group for audit relating to Clinical Information Sharing and fetal monitoring.
- Some additional research time has been sourced for a specific audit on transfers from midwife led settings to obstetric units

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- 4 training courses in research were funded by the award and are now completed:-
  1. Research and Evaluation Project Management
  2. Interviewing: qualitative data collection
  3. Public Involvement in Social Research
  4. Introduction to Evidence Reviews
- Principal Investigator training through links with Aneurin Bevan Health Board was completed by the research midwife and consultant midwife in July 2022. Knowledge and learning from these courses will be utilised in further research work.

## 2. Why did you choose to seek funding for this project?

Midwifery research activity in Powys was just beginning during 2018/19 with some funding allocated from the Integrated Care Fund to undertake a piece of work looking at Father's transition to parenthood. This piece of work was completed, and findings published via a journal article in Dec/Jan 2020. The aim of requesting further funding from charitable funds was to continue midwifery research work in Powys and build on the lessons learnt by staff from the initial study. This is to pump prime funding to enable Powys to take part in other trials that will then generate future funding through accruals, so building on the research capacity within Powys maternity.

There are several key political drivers for development and progression of the research midwife post including the Maternity Vision for Wales, outcomes of the Health Inspectorate Wales review of maternity services, as well as work from the Royal College of Midwives. These drivers contributed to the need to seek funding to progress the work.

## 3. Who benefitted from the project and why?

A research midwife post was funded for 1 day per week for 2 years to work towards running further research studies within Powys, promote research within the midwifery and women's health teams and network with others involved in midwifery research across Wales, including university staff, students and other research midwives.

Maternity services have benefitted from having a dedicated research midwife who is driving the research agenda within the service.

Particularly in the sharing of findings from research pertinent to Powys Maternity services.

The pregnant women and new mothers in Powys are benefitting from also having the opportunity to take part in midwifery research and contribute to evidence.

The infant feeding helpers who have supported the ABA-Feed trial have also gained exposure to research as volunteers and mothers themselves.

The midwives have benefitted from being able to take part in a research study themselves and contribute to the evidence base in midwifery. Student midwives have benefitted from hearing of the journey of the research midwife and exposure to presentation about Powys maternity services. This also provided the opportunity to showcase Powys services and potentially make

**4. Did you have to adapt your project or face any challenges?  
If so, how did you adapt or overcome them?**

The first major study (ABA-Feed) that was planned for Powys to take part in was delayed due to COVID19 over the autumn of 2021. However, Powys midwifery research team were able to successfully recruit the first participant in the UK to the ABA-feed study and recruitment continues at above target per month, due to the active support of the whole midwifery team (see attached report). There has been challenge with the R&D finance side of the ABA-Feed trial. Unfortunately, the R&D team in Powys has had no manager for 6 months and so there has not been the expertise to ensure the processes required for excess treatment costs, accruals and support costs have not been in place. This now looks to be resolved in July 2022, but it has led to a great deal of challenge for the midwifery team especially as it was the first trial that they have participated in. Further to this there is challenge in demonstrating any income as yet in relation to research. PTHB sought support from the R&D team in ABUHB and the maternity team have benefitted from this in terms of networking with wider R&D teams as well as gaining support in some of the governance aspects of trial set up. There have been delays with progress of the NEPTUNE study and the ethical approvals have only just been sought for that study, resulting in a delay with the objectives relating to that.

**5. Explain your application experience, naming areas of success and the areas for improvement. Is there any thing you would do differently if you were to apply again?**

The process of applying for charitable funds was straightforward and was supported by the Charities manager. Having the opportunity for a meeting first to understand the process and to discuss the bid was really helpful in terms of development of a successful bid.

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**6. Did the PTHB Charity provide you with adequate support? How can we provide better support to future projects?**

The support we had from the charities manager when developing the bid was really welcomed. We were able to discuss the concept and idea and seek advice and support on whether the bid would be considered and how it met the priorities of the charities group. Would drop in sessions work for anyone considering large bids be an option? Could they be offered quarterly to also raise awareness of the fact charitable funds can support projects. Also sharing of positive stories to come out of projects that have been supported to share wider in the Health Board could be an option.

**7. Please provide any images or a personal story that you are willing to publicly share.**

Working has a research midwife over the past year has been extremely rewarding and helps to contribute to the evidence base for midwifery in Powys and beyond. Networking across Wales has provided me with further information to understand how we can develop the role. (See RCM article attached).

**8. What is the future of the project? Are there any next steps?**

This is the first year of a two-year project, which we hope to have continued support for in year 2. The next steps are to continue working to build on the research capabilities of the midwifery workforce by encouraging participation within the studies already running, whilst identifying studies that have the potential to be applicable to the unique Powys healthcare system. Integral to this is the continued development of the post, postholder and consultant midwife (as professional lead) in research methodology and application processes.

**Ongoing/future work for year 2:**

- Continued participation as a site for ABA-feed study with University of Birmingham Trials Unit, recruiting primiparous women from across Powys to access infant-feeding helper support (volunteers trained by the research midwife and the Infant feeding coordinator in Powys). Target is to recruit 3 women per month for the duration of the study. Jan to June recruitment is above this target (25 recruits).
- Continued progression and hopefully involvement in the NEPTUNE study with Dr Heather Strange, Cardiff University. This study will involve interviewing women to understand how the NIPT (or non-invasive prenatal testing), is being delivered and received in

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Wales. This will involve the Research midwife in conducting remote/online interviews with service users and observations of staff (with support from the wider study team) and may involve further training and development of useful research skills that are applicable to other research projects.

- Participation in UKMIDSS data collection (monthly) – collecting data from all UK birth centres to identify trends in midwife led care.
- PNMH survey – with the National Centre for Mental Health, promotion of their survey within Powys (postcards, posters, social media etc) to identify how COVID19 has affected families during the perinatal period.
- Ongoing identification of other suitable studies for Powys to take part in.
- Contribution to additional audit work from the 22/23 audit plan
- Ongoing consideration of opportunity for Powys primary research
- Further exploration of the sub-site option for obstetric research
- To shadow the R&D team in ABUHB

This work will contribute to midwifery knowledge within Powys but also across Wales and beyond, in terms of building the evidence base for midwifery practice.

#### 9. Is there anything else you would like to share?

We have been so grateful to have been able to have had the 1<sup>st</sup> year of this project funded through charitable funds. We feel that we have progressed a good amount of work in the time that has been allocated to the project and hope that the support will be continued in to year 2.

**Please return the project evaluation form to [shania.jones@wales.nhs.uk](mailto:shania.jones@wales.nhs.uk)**

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## SECTION 2: To be completed by the Charity Team.

<b>Strategic priorities</b> ( <i>tick the relevant priorities</i> )	
Environment and Sustainability	<input type="checkbox"/>
Developing our Workforce	<input type="checkbox"/>
Recovery and Renewal	<input type="checkbox"/>
Addressing Socioeconomic Inequality	<input type="checkbox"/>
Aiding Primary Care	<input type="checkbox"/>
<b>IMTP objectives</b> ( <i>Please see appendix 1 for the full IMTP list</i> )	
<b>Item No.</b>	<b>Comments</b>
Focus on wellbeing:	
Early help and support:	
Tackling the big four:	
Joined up care:	
Workforce futures:	
Digital First:	
Innovative environments	
Transforming in partnership:	
<b>Discussion/ Comments:</b>	

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<b>Print name:</b>			<b>Date signed:</b>	
<b>Signature:</b>				

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## Appendix 1: Powys Teaching Health Board IMTP's for 2022/23 -2024/25

Focus on Well-being	
1.	<i>Take action to reduce health inequalities and improve population health</i>
2.	<i>Deliver health improvement priorities including weight management, smoking cessation, early years and family health and wellbeing</i>
3.	<i>Develop and implement a business as usual model for COVID-19 Prevention and Response and integrated, comprehensive vaccination</i>
Early Help and Support	
4.	<i>Improve access to high quality sustainable primary care</i>
5.	<i>Develop and implement a progressive, whole system diagnostic, ambulatory and planned care model, delivering care closer to home</i>
6.	<i>Improve access to high quality, equitable prevention and early intervention services for children, young people and their families</i>
Tackling the Big Four	
7.	<i>Implement improvements in early diagnosis, treatment and outcomes for people with or suspected of having cancer</i>
8.	<i>Implement improvements in outcomes, experience and value in circulatory disease (Stroke, Heart Disease, Diabetes)</i>
9.	<i>Implement the next stage of Breathe Well Programme, repatriating care closer to home and Children and Young people's Respiratory care</i>
10.	<i>Undertake a Strategic Review of Mental Health to improve outcomes from high quality, sustainable services, including specialist care</i>
Joined Up Care	
11.	<i>Design a Frailty and Community Model enhancing outcomes, experience and value and the six goals for Urgent and Emergency Care</i>
12.	<i>Support improved access to and outcomes from Specialised Services (including specialist mental health services, paediatrics, major trauma, neonates, PET, as well as recovery planning for bariatric surgery, cardiac surgery, plastic surgery, neurosurgery, paediatric surgery)</i>

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## Workforce Futures

13. *Design and implement a comprehensive approach to workforce planning, focusing on attracting/securing workforce for targeted services (including international recruitment)*
14. *Redesign and implement leadership and team development, enhancing clinical leadership and whole organisation focus on value*
15. *Deliver improvements to staff wellbeing and engagement, working closely with Trade Unions in Social Partnership on key joint priorities*
16. *Enhance access to high quality education and training across all disciplines, specifically focusing on 'grow our own'/apprenticeships*
17. *Enhance the health boards role in partnership and citizenship, maximising opportunities for volunteering and healthcare careers*

## Digital First

18. *Implement clinical digital systems that directly enable improved care, including cross border clinical records sharing, clinical service priorities (nursing, eye care, prescribing), and telecare*
19. *Implement key improvements to digital infrastructure and intelligence, undertaking a Digital Service Review*

## Innovative Environments

20. *Implement ambitious commitments to carbon reduction, biodiversity enhancement and environmental wellbeing*
21. *Implement capital, estate and facilities improvements that enhance services to patients/public and wellbeing/experience of staff*

## Transforming In Partnership

22. *Implement key actions to improve quality (safety, effectiveness and experience) of services across the whole system*
23. *Develop and implement key actions to enhance integrated/ partnership system working in Wales and England*
24. *Implement value-based healthcare, to deliver improved outcomes and experience, effective deployment and management of resources*
25. *Implement key governance improvement priorities embedding risk management, effective policies, procedures and guidance; audit and effectiveness; Board effectiveness and systems of accountability*

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