

## Special Board of Trustee Meeting

23 July 2020, 09:30 to 12:00  
Nant Fawr 2 & 3 / Via Skype

### Agenda

- |             |  |                    |
|-------------|--|--------------------|
| <b>1.</b>   | <b>Welcome &amp; Introductions</b>   |                    |
| <b>1.1.</b> | <b>Apologies for Absence</b>   | Charles Janczewski |
| <b>1.2.</b> | <b>Declarations of Interest</b>  | Charles Janczewski |
| <b>1.3.</b> | <b>Minutes of the Trustee Meeting held on 26th May 2020</b>  | Charles Janczewski |
|             |  1.4_Minutes_BT0520.pdf   | (4 pages)          |
| <b>1.4.</b> | <b>Action Log</b>  | Charles Janczewski |
|             |  1.5_Action Log_BT0520.pdf   | (1 pages)          |
| <b>1.5.</b> | <b>Chair's Action taken since last meeting</b>   | Charles Janczewski |
| <b>2.</b>   | <b>Items for Review and Assurance</b>  |                    |
| <b>2.1.</b> | <b>Presentation on Charity activity during the COVID-19 period:</b>  |                    |
|             | "How the Arts and Health Charity have #spreadthelove during COVID19"   | Joanne Brandon     |
|             |  2.1 - Cover paper Presentation on Charity Activity during the COVID-19 period.pdf            | (2 pages)          |
|             |  2.1 #spreadthelove during COVID19" Presentation.pdf  | (10 pages)         |
| <b>2.2.</b> | <b>Health Charity Current Financial Position to include COVID-19 Income and Expenditure</b>  | Christopher Lewis  |
|             |  2.2 Financial Position May 2020.pdf  | (5 pages)          |
| <b>2.3.</b> | <b>Health Charity COVID-19 Income and Expenditure Process</b>  | Joanne Brandon     |
|             |  2.3 SBAR Health Charity Covid-19 Income and Expenditure process - SM update- 9 July 2020.pdf | (4 pages)          |
|             |  2.3.1 CFC July - APPENDIX 1 - FLOWCHART_FAST_TRACK_APPLICATIONS.pdf                          | (1 pages)          |
|             |  2.3.2 APPENDIX 2 - COVID-FUNDING FAST-TRACK APPLICATION FORM.pdf                             | (1 pages)          |
|             |  2.3.3 APPENDIX 3 - GUIDANCE NOTES - COVID FAST-TRACK CF APPLICATIONS.pdf                     | (2 pages)          |
|             |  2.3.4 APPENDIX 4 - core and non-core expenditure guidance.pdf                                | (4 pages)          |

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<b>2.4.</b>	<b>Gareth Bale Donation and Spending Plan Options</b>		Joanne Brandon
<b>2.5.</b>	<b>Health Charity Events Planner</b>		Ruth Walker
	Cancelled Events		
	Planned Events		
	Expected Financial Income		
	 2.5 - Health Charity Events Planner.pdf	(7 pages)	
<b>2.6.</b>	<b>Horatio's Garden Update – Time frames and Costs</b>		
	 2.6 Horatio's Garden Wales.pdf	(5 pages)	
	 2.6 Garden for patients with Neurological Injuries.pdf	(1 pages)	
<b>3.</b>	<b>Items for Approval/Ratification</b>		
<b>3.1.</b>	<b>Health Charity Strategy 2019-24</b>		Joanne Brandon
	 3.1 - Health Charity Strategy 2019-25.pdf	(2 pages)	
	 3.1 Health Charity Strategy (cmpt).pdf	(11 pages)	
<b>3.2.</b>	<b>Charitable Funds Committee Annual Report 2019-20</b>		Nicola Foreman
	 3.2 Annual Report to Charity Trustee Cover Paper.pdf	(2 pages)	
	 3.2 CFC Draft Annual Report (002).pdf	(9 pages)	
<b>3.3.</b>	<b>Staff Benefits Group Terms of Reference</b>		Nicola Foreman
	 3.3 Terms of Reference - Staff Benefits Group covering report.pdf	(2 pages)	
	 3.3 Staff Benefits Group TOR revised July '20.pdf	(3 pages)	
<b>3.4.</b>	<b>The Patrons Protocol</b>		Joanne Brandon
	 3.4 The Health Charity Patron's Protocol.pdf	(9 pages)	
<b>3.5.</b>	<b>Rookwood Legacy</b>		Nicola Foreman
	 3.5 Rookwood Legacy and Options Cover Paper.pdf	(6 pages)	
	 3.5.1 Appendix 1 - Disposal of Rookwood Trustee Meeting June 2019 AH (1).pdf	(6 pages)	
	 3.5.2 Appendix 1 - Disposal of Rookwood Trustee Meeting June 2019 AH (1).pdf	(12 pages)	
	 3.5.3 Appendix 1 (cmpt) - Disposal of Rookwood Trustee Meeting June 2019 AH (2).pdf	(68 pages)	
	 3.5.4 Appendix 1 - Board Trustee Meeting Minutes - 25.07.19 - See minute 19.07.005.pdf	(2 pages)	
	 3.5 Appendix 2.pdf	(11 pages)	
<b>4.</b>	<b>Items for Noting and Information</b>		
<b>4.1.</b>	<b>No Items</b>		
<b>5.</b>	<b>Review of the Meeting</b>		Charles Janczewski

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**6. Any Other Business**

**7. Date and Time of next Meeting**

Tuesday 22nd September 2020

*Further details to be confirmed*

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**Unconfirmed Minutes of the Board of Trustee Meeting  
Tuesday 26<sup>th</sup> May 2020 – 10:00am – 11:00am  
Nant Fawr 2 & 3, Woodland House / Via Skype**

**Present**

Charles Janczewski	CJ	Trustee & UHB Interim Chair
Eileen Brandreth	EB	Trustee & Independent Member – ICT
Robert Chadwick	RC	Trustee & Executive Director of Finance
Steve Curry	SC	Trustee & Chief Operating Officer
Martin Driscoll	MD	Trustee & Executive Director of Workforce & Organisational Development
Abigail Harris	AH	Trustee & Executive Director of Strategic Planning
Michael Imperato	MI	Trustee, UHB Vice Chair & Independent Member – Legal
Fiona Jenkins	FJ	Trustee & Executive Director of Therapies & Health Science
Fiona Kinghorn	FK	Trustee & Executive Director of Public Health
Sara Moseley	SM	Trustee & Independent Member – Third Sector
Ruth Walker	RW	Trustee & Executive Nurse Director

**In Attendance:**

Nicola Foreman	NF	Director of Corporate Governance
Christopher Lewis	CL	Deputy Director of Finance

**Secretariat:**

Laura Tolley	LT	Corporate Governance Officer
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**Apologies:**

Susan Elsmore	SE	Trustee & Independent Member – Local Authority
Len Richards	LR	Trustee & Chief Executive Officer
John Union	JU	Trustee & Independent Member - Finance
Stuart Walker	SW	Trustee & Executive Medical Director
Dawn Ward	DW	Trustee & Independent Member – Trade Union

BT 20/05/001	Welcome & Introductions	Action
	The Committee Chair (CC) welcomed everyone to the public meeting verbally in English and Welsh.	
BT 20/05/002	Quorum	
	The CC confirmed the meeting was quorate.	
BT 20/05/003	Apologies for Absence	
	Apologies for absence were noted.	
BT 20/05/004	Declarations of Interest	
	There were no declarations of interest.	
BT 20/05/005	Minutes of the Committee Meeting held on 30 <sup>th</sup> January 2020	

	<p>The Deputy Finance Director (DFD) advised he was present at the meeting held on 30<sup>th</sup> January 2020.</p> <p><b>Resolved – that:</b></p> <p>(a) Subject to the above amendment, the Committee approved the minutes of the meeting held on 30<sup>th</sup> January 2020.</p>	<b>LT</b>
<b>BT 20/05/006</b>	<p><b>Action Log following the Meeting held on 30<sup>th</sup> January 2020</b></p> <p>There were no actions.</p>	
<b>BT 20/05/007</b>	<p><b>Chairs Action taken since last meeting</b></p> <p>There had been no Chairs actions taken since the last meeting.</p>	
<b>BT 20/05/008</b>	<p><b>Horatio’s Garden</b></p> <p>The Executive Nurse Director (END) introduced the paper and confirmed it provided the UHB with an update on Horatio’s Garden, along with a requirement for further funding. The Board of Trustee were directed to a letter, signed by Maria Battle, previous UHB Chair which outlined a commitment made by the UHB to Horatio’s Garden.</p> <p>To date, the UHB had committed £500,000.00 to the garden based at University Hospital Llandough (UHL) and were aware from the start of the process that 27% of the garden would require further funding to take the work forward for the Neuro Garden. The UHB requested the same architect and designers be used for the Neuro Garden as Horatio’s Garden to ensure consistency however the work required a further £150,000.00 funding which needed consideration.</p> <p>The UHB Interim Chair (IC) commented that from conversations with Horatio’s Garden, it was clear that the charity was struggling to raise the full £800,000.00 in total due to the impact of COVID-19 to fundraising. The IC asked where the additional funding would come from, if it would be the UHB or from the sale attached to Rookwood Hospital. In response, the END confirmed this decision had not been made as the Charitable Funds Committee had concern in terms of a ‘loan’ approach as it was unknown if the funds would be available long term.</p> <p>The DFD confirmed that the Health Charity was not in a good position to fund the £150,000.00, however the UHB could apply the receipts to the sale of Rookwood, which the estimated value of the sale would be £6,000,000.00.</p> <p>The Independent Member – ICT (IM-ICT) asked what the position would be on garden maintenance for the neuro garden and if this would require further funding? In response, the END confirmed, at present this was unknown.</p> <p>The END commented that the Board of Trustee held a previous conversation around dormant funds and a policy for these to be moved into</p>	

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	<p>general reserves, and asked when this could happen and if the possible yield was known. In response, the DFD explained that it was agreed at the last Charitable Funds Committee that dormant funds would be moved into general reserves, however the timing was not confirmed. Doing this could yield a significant amount of money, however, stock market levels would need to be considered.</p> <p>The IC advised the Board of Trustee that the letter of intent was a legal obligation. In relation to Rookwood, this was a concern for the Trustee to try and secure a loan against uncertain funds. The IC asked if the Health Charity could raise the additional £150,000.00, and if so, how long this would take.</p> <p>After discussion, the IC confirmed there was discomfort amongst the Board of Trustee to make a decision on the additional funding. It was agreed the following points would be raised with Horiato's Garden and brought back to the Trustee to gain further clarity;</p> <ol style="list-style-type: none"> <li>1. Assurance regarding the maintenance of the Neuro Garden, if this is covered in the outlined costs;</li> <li>2. Would this be the final request for funding from Horatio's Garden;</li> <li>3. In relation to the £300,000.00 shortfall – How would this be raised and by who?</li> <li>4. Clarification around the £30,000.00k for trees</li> <li>5. If there was a delay in funding, what would this mean for the timeframe and contractors?</li> <li>6. Clarification on which individual from the Health Charity would be managing Horatios Garden along with the Neuro Garden on behalf of the UHB.</li> </ol> <p>It was also agreed the UHB would gain further clarity on the following:</p> <ol style="list-style-type: none"> <li>1. Legacy of Rookwood</li> <li>2. As Board of Trustee if we do not have money, how are the UHB going to fund this.</li> </ol> <p>The Independent Member – Third Sector (IM-TS) requested that her concern be noted regarding the lack of clarity and information provided in relation to Horatio's Garden and the request for further funding.</p> <p><b>Resolved – that:</b></p> <ol style="list-style-type: none"> <li>(a) the Board of Trustee noted the Horatio's Garden Update</li> <li>(b) the Board of Trustee would hold a special meeting at the end of July 2020 to further consider Horatio's Garden funding.</li> </ol>	LT
BT 20/05/009 <i>07/23/2020 08:46:53</i>	<p><b>Investment Portfolio Update</b></p> <p>The DFD advised the Board of Trustee there had been a major decline in the stock market due to COVID-19 and during the course of the year the UHB had made a loss of £615,000.00. Investment advisors think there will</p>	

	<p>be a recovery during the third quarter of the year as the population returns to normal.</p> <p>The IC thanked the DFD for the update and advised it was important for the Board of Trustee to understand the impact of COVID-19 to the UHB Investment Portfolio.</p> <p>The IM-TS asked how the investments related to the UHB reserves policy. In response, the DFD advised the reserves policy addressed un restricted funds and the UHB required £1,000,000.00 in reserves.</p> <p>The IM-TS queried what the UHB plans were in terms of income and expenditure? The DFD confirmed that all general reserves would be fully expended.</p> <p>The IM-TS asked what would happen if the Board of Trustee funded the further £150,000.00 to Horatio’s Garden. In response, the DFD explained the UHB would be in a position of running out general reserves.</p> <p>After discussion, the Board of Trustee agreed to bring back the position on Dormant Funds across the UHB as this is an important aspect for general reserves, in addition to bringing a paper on what the Health Charity projections were and what income could be generated during the COVID-19 Pandemic.</p> <p><b>Resolved – that:</b></p> <p>(a) the Board of Trustee noted the Investment Portfolio Update.</p>	<b>CL RW</b>
<b>BT 20/05/010</b>	<p><b>Any Other Business</b></p> <p><b>Resolved – that:</b></p> <p>(a) There was no other business to discuss.</p>	
<b>BT 20/05/011</b>	<p><b>Items to bring to the attention of the Board</b></p> <p><b>Resolved – that:</b></p> <p>(a) There were no items to being to the attention of the Board</p>	
<b>BT 20/05/012</b>	<p><b>Date &amp; Time of Next Meeting</b></p> <p>Tuesday 23<sup>rd</sup> July 2020  09:30am – 12:00pm  Nant Fawr 2 &amp; 3, Ground Floor, Woodland House / Via Skype</p>	

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**Action Log**  
**Following Board of Trustee Meeting held on**  
**26<sup>th</sup> May 2020**

MINUTE REF	SUBJECT	AGREED ACTION	LEAD	DATE	STATUS/COMMENT
<b>Actions Completed</b>					
BT 20/05/005	Minutes of the Committee Meeting held on 30 <sup>th</sup> January 2020	Add Christopher Lewis to the in attendance list.	Laura Tolley	04/06/20	<b>Complete.</b>
BT 20/05/008	Horatio's Garden	A special meeting be organised for the end of January 2020	Laura Tolley	23/07/20	<b>Complete:</b> Special meeting booked for 23/07/2020
<b>Actions In Progress</b>					
BT 20/05/009	Dormant Funds	A paper be brought back on the position of Dormant Funds	Christopher Lewis	23/07/20	On agenda for 23/07/2020
BT 20/05/009	Health Charity Projections	A paper be brought back on the Health Charity income projection plans during COVID-19	Ruth Walker	23/07/20	On agenda for 23/07/2020
<b>Actions referred to Committees of the Board/Board Development</b>					

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<b>Report Title:</b>	<b>Presentation on Charity Activity during the Covid-19 period: “How the Arts and Health Charity have #spreadthelove during COVID-19”</b>			
<b>Meeting:</b>	Special Board of Trustee Meeting		<b>Meeting Date:</b>	23.07.2020
<b>Status:</b>	<b>For Discussion</b> ✓	<b>For Assurance</b> ✓	<b>For Approval</b>	<b>For Information</b>
<b>Lead Executive:</b>	Ruth Walker, Executive Nurse Director			
<b>Report Author</b>	Joanne Brandon, Director of Communication, Arts, Health Charity and Engagement			

## SITUATION

*This presentation outlines the work of the Health Charity team in response to the Coronavirus global pandemic (C19) and includes:*

*The emergency preparedness response, addressing the needs of staff and patients during this challenging time, with a particular emphasis on wellbeing in line with our current strategic objectives.*

*The partnership working with the Patient Experience Team, Capital Planning and Estates and numerous volunteers.*

*The continuation of fundraising and building of relationships for future events and sponsorship opportunities. Also the Business Unit ensured governance and procedures were complied with to protect staff, patients and reputation of the Health Charity and Health Board.*

*The Health Charity was a key component of the HR Health and Wellbeing Group, established to support staff and patients during unprecedented times.*

## BACKGROUND

Following the announcement of a national lockdown on 23 March 2020, the Health Charity Team has supported the staff and communities of Cardiff and Vale with a varied and dynamic approach, in line with adhering to Government guidance and continuing to raise the profile and funds of the Health Charity. This presentation provides an account to the Board of Trustees of the Health Charity activity undertaken during the COVID-19 period March – June 2020.

## ASSESSMENT

Delivered in presentation.

**ASSURANCE** is provided by:

Presentation by Director of Communication, Arts, Health Charity and Engagement

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## RECOMMENDATION

The Committee is asked to:

Accept the presentation as a reflection of the work undertaken by the Health Charity team during the Coronavirus Global Pandemic and in unprecedented times.

### Shaping our Future Wellbeing Strategic Objectives

*This report should relate to at least one of the UHB's objectives, so please tick the box of the relevant objective(s) for this report*

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	
2. Deliver outcomes that matter to people	√	7. Be a great place to work and learn	√
3. All take responsibility for improving our health and wellbeing	√	8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us	
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

### Five Ways of Working (Sustainable Development Principles) considered

*Please tick as relevant, click [here](#) for more information*

Prevention		Long term		Integration	√	Collaboration	√	Involvement	√
<b>Equality and Health Impact Assessment Completed:</b>	<b>No</b>								

Kind and caring  
Caredig a gofudd

Respectful  
Dangos parch

Trust and integrity  
Ymddiriedaeth ac uniondeb

Personal responsibility  
Cyfrifoldeb personol



# How the Arts and Health Charity have #spreadthelove during COVID-19



# In April and May 2020 the Health Charity received...

Over  
**£950,000**



In income

Which includes  
**£143,500**



From NHS  
Charities  
Together

**1077**



Donations on  
#SpreadTheLove  
JustGiving

**81**



Donations  
through the new  
Health Charity  
website

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# Just some of our young fundraisers....

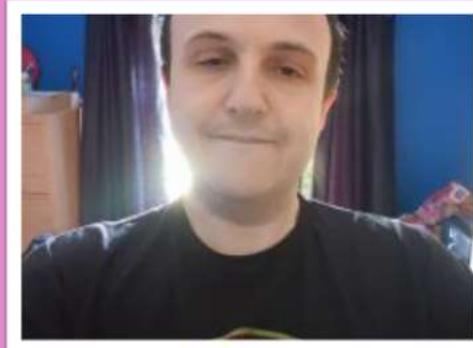


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# Just a few of our online fundraisers....



Ben's 5k challenge



Simon's walkathon



Tracy "braved the grey"



Christine's knitathon



Matt's online quizzes



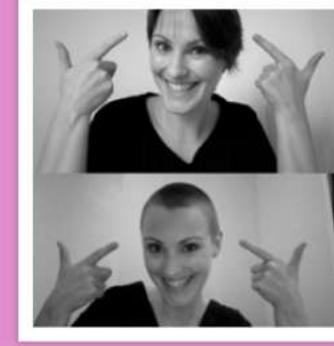
Rory's virtual Inca Trail



Oli's garden marathon



Michael's 300 mile walk

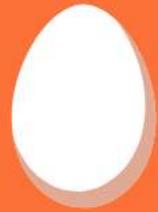


Hayley's headshave

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# In response the Health Charity has....

Received over  
**20,000**



Easter eggs

Distributed  
**200**



Treat bags to  
midwives

Delivered  
**61**



Treat boxes to  
patients and  
staff

Distributed  
**20**



VE Day  
celebration  
boxes for our  
patients

# To support our staff, the Health Charity has....

3



Helped set up  
three staff  
havens

60



Days spent  
covering the  
staff havens

Over  
16,000



Bottles of  
water  
distributed

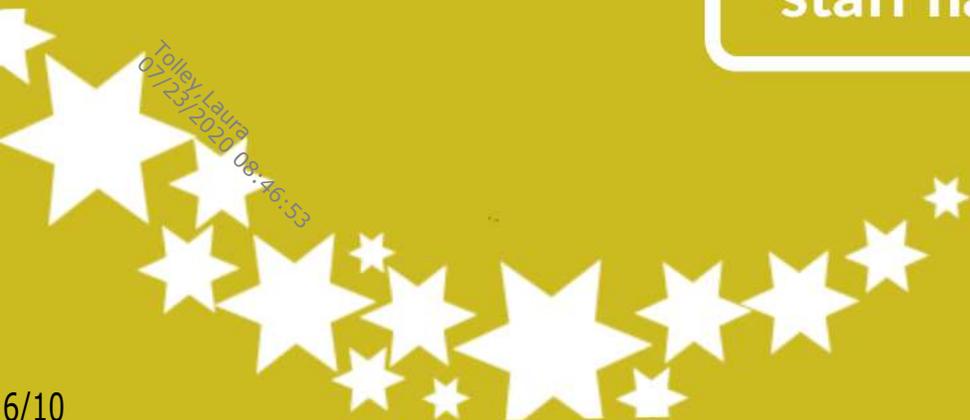
Over  
70,000



Portions of food  
delivered and  
distributed to  
staff



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**HealthCharity**  
**Elusenlechyd**  
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# The impact of #SpreadTheLove....

1697



New  
followers on  
social media

717



Posts on social  
media  
#spreadthelove

176



Media articles  
featuring the  
Health Charity

5



TV news  
items



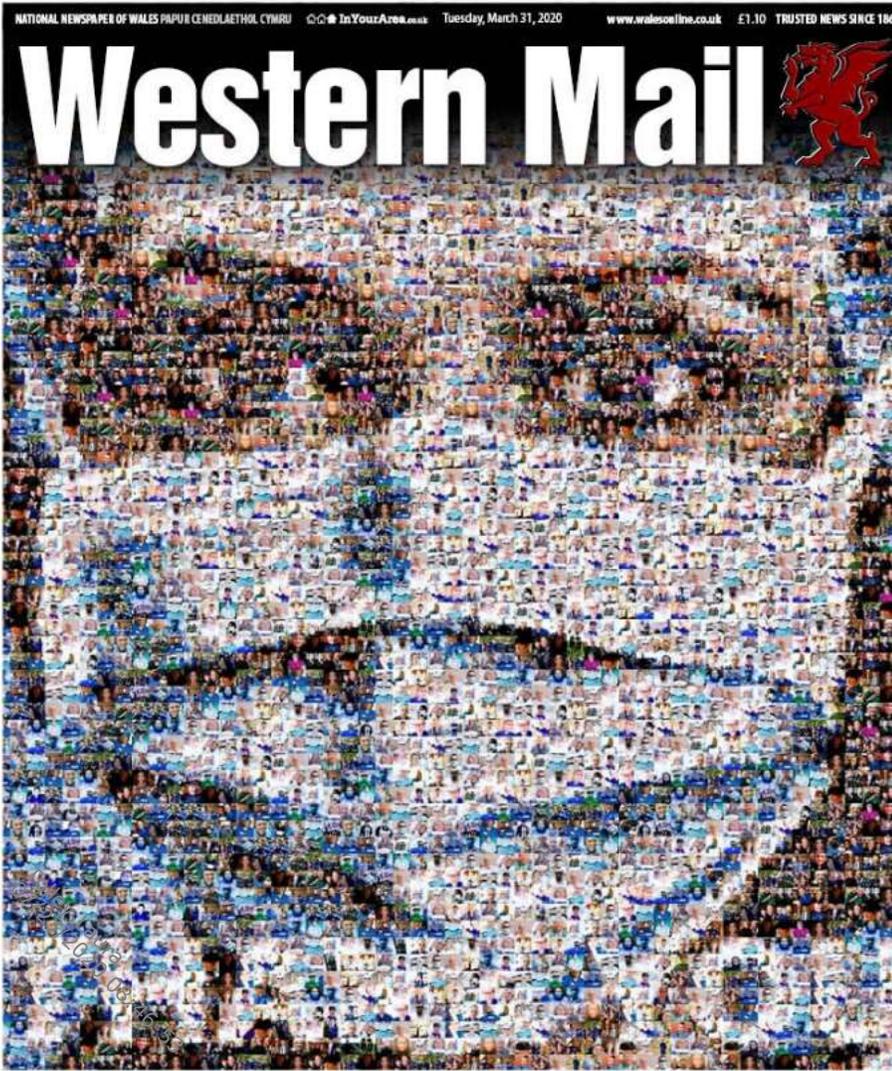
Cardiff & Vale  
**HealthCharity**  
**Elusenlechyd**  
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# Front page stories and double-page spreads

NATIONAL NEWSPAPER OF WALES PAPUR CENEDLAETHOL CYMRU InYourArea.co.uk Tuesday, March 31, 2020 www.walesonline.co.uk £1.10 TRUSTED NEWS SINCE 1869

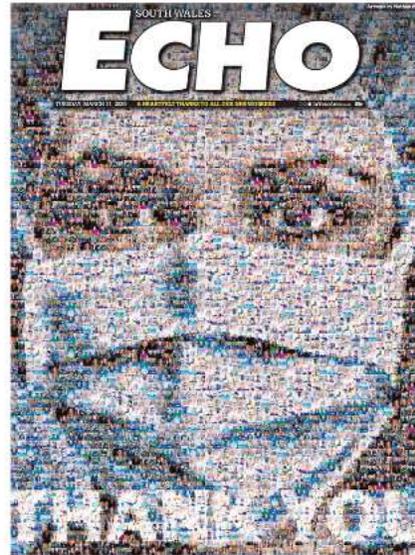
# Western Mail



**COVID-19: ARTIST'S TRIBUTE TO NHS HEROES**  
LONGER LOCKDOWN LIKELY AS DEATH TOLL RISES BY 14 TO 62 ■ REPORTS & ANALYSIS: PAGES 2-9, 18&19, 21-23 & 26

SOUTH WALES

# ECHO



**'IT'S PRETTY SCARY' - NORTH ON IMPENDING FATHERHOOD DURING CORONAVIRUS CRISIS**  
Wales star and cycling champ wife Becky expecting first child: Page 3

# Western Mail



**STAR BALE'S £500,000 GIFT FOR WALES' BIGGEST HOSPITAL**  
See Page 5

**'No avoiding recession after Covid-19' - Skates**

SOUTH WALES

# ECHO

**A window on lockdown life**  
Tales from the doorstep as South Wales copes with life indoors

**TRIBUTES TO CITY SERVANT JIMMY**  
FREE 63

**SAVE 40% ON DELIVERY**  
SOCIAL MEDIA DELIVERY OFFER: SEE PAGE 26

**BALE'S £500K GIFT TO NHS**  
WALE'S STAR'S DONATION TO CITY HOSPITAL PLUS MINISTER SAYS UK OUTBREAK HAS 'REACHED ITS PEAK' PAGES 4&5

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SOUTH WALES

# ECHO

**The war artist who captured a slice of city life in lockdown**  
See pages 6&7

**WARNOCK ON CITY'S CRUNCH OPENER**  
SPORT  
40% OFF YOUR ECHO DELIVERY  
FULL DETAILS: PAGE 36

**GRIEVING MUM CALLS FOR LAW CHANGE**  
MOTHER'S PLEA AS HER GIRL'S KILLERS SET TO BE RELEASED HALF-WAY THROUGH SENTENCE. PAGE 11



CORONAVIRUS

**War artist's intimate of life inside Dragon's**

The transformation of the Principality Stadium into a 1,500 bed field hospital has been one of the most remarkable developments of the pandemic. War artist Dan Peterson had access to the Dragon's Heart hospital and has created some remarkable and intimate artworks. Like dragons reports.



CORONAVIRUS

**Images show reality of heart field hospital**

Woman, 32, assaulted police at lockdown house party



# Since 23 March 2020 the Arts team has....





# THANK YOU



Cardiff & Vale  
**HealthCharity**  
**Elusenlechyd**  
Caerdydd a'r Fro

<b>Report Title:</b>	<b>Charitable Funds Financial Position Report for the Period Ended 31<sup>st</sup> May 2020</b>			
<b>Meeting:</b>	<b>Board of Trustee Meeting</b>		<b>Meeting Date:</b>	<b>23<sup>rd</sup> July 2020</b>
<b>Status:</b>	<b>For Discussion</b>	<b>For Assurance</b>	<b>x For Approval</b>	<b>For Information</b>
<b>Lead Executive:</b>	<b>Executive Director of Finance</b>			
<b>Report Author (Title):</b>	<b>Deputy Director of Finance</b>			

### Background and current situation:

The Trustee has responsibility in overseeing the financial management and stewardship of the charitable funds. The financial update report aims to:

- Provide information on the year to date financial performance of the Charity to the period 31<sup>st</sup> May 2020;
- Assess the forecast financial position the Charity against commitments already made.

### Executive Director Opinion /Key Issues to bring to the attention of the Board/ Committee:

There are two key issues to bring to the attention of the Trustee. These are:

- The year to date financial performance has been very strong due to the value of donations received during the COVID 19 pandemic;
- The Charity has made significant financial commitments and the recent fall in its value of investments has meant that it currently has insufficient resources in it's general reserves in order to meet that commitment. Further income generation and the application of dormant funds are two ways to mitigate against this risk.

### Assessment and Risk Implications (Safety, Financial, Legal, Reputational etc:)

#### Financial Performance for the 2 months ended 31<sup>st</sup> May 2020

The year to date financial position of the charity is summarized in the following table.

#### Statement of Financial Activities for the period ended 31<sup>st</sup> May 2020

	Unrestricted Funds £'000	Restricted Funds £'000	Endowment Funds £'000	Total £'000
<b>Fund Balances brought forward April 2020</b>	<b>4,776</b>	<b>1,913</b>	<b>2,512</b>	<b>9,201</b>
Total Incoming Resources	821	30		851
Total Resources Expended	-170	-32		-202
Net Incoming/(outgoing) Resources	651	-2		649
Gains/(Losses) on Investment Assets	260	43	3	306
<b>Net Movement in Funds</b>	<b>911</b>	<b>41</b>	<b>3</b>	<b>955</b>
<b>Fund Balances carried forward May 2020</b>	<b>5,687</b>	<b>1,954</b>	<b>2,515</b>	<b>10,156</b>

The above table shows the Charity generated £0.851m of income and spent £0.202m. This has resulted in net income of £0.649m. In addition, the charity also had market value gains on its investments of £0.306m for the period compared to the March 2020 valuation. The combined effect of these results is a net increase in fund balances for the period to May 2020 of £0.955m to £10.156m.

An analysis of the income received by the charity for the first two months of the year, is contained in the following table. This also shows the comparison of income received for the same period over the previous 2 years.

### Schedule of Income for the 2 month period April to May

Income	Unrestricted £000	Restricted £000	20/21 £000	19/20 £000	18/19 £000
Legacies					31
Donations	821		821	54	38
Staff Lottery		20	20	20	20
Appeals		10	10	28	61
<b>Total Income</b>	<b>821</b>	<b>30</b>	<b>851</b>	<b>102</b>	<b>150</b>

This shows a substantial increase in donations with some significant acts of generosity including a donation of £0.500m from Mr and Mrs Bale, £0.143m from the NHS Charities Association and £0.020m from Sir Stanley Thomas. During the same period the Charity spent £0.052m against the 'Make it Better' fund.

What is uncertain is if this upward trend will be maintained or whether it was just an initial response to support the service during the pandemic. Also lockdown and social distancing rules are likely to adversely impact upon normal fund raising activities.

The net worth of the Charity is contained in the following Table.

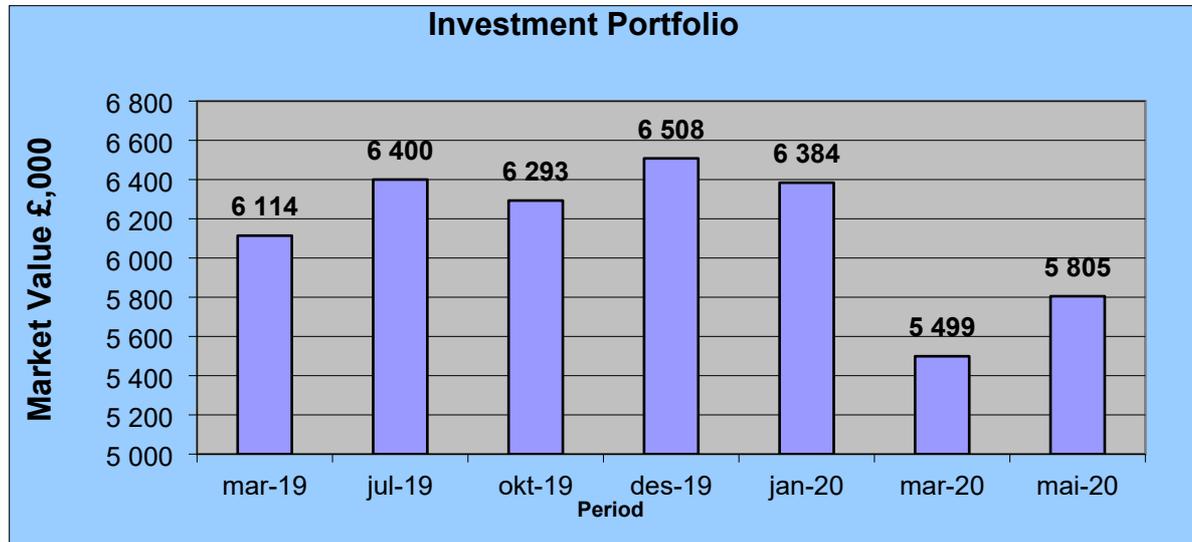
### Summary Balance Sheet as at 31<sup>st</sup> May 2020

	Opening Balance 1.4.20 £'000	Closing Balance 31.05.20 £'000
Fixed Assets	7,975	8,281
Net Current Assets / Liabilities	1,226	1,875
<b>Total Net Assets</b>	<b>9,201</b>	<b>10,156</b>
Unrestricted Funds	4,776	5,687
Restricted Funds	1,913	1,954
Endowment Funds	2,512	2,515
<b>Total Funds</b>	<b>9,201</b>	<b>10,156</b>

Of the closing fixed asset balance, £2.476m relates to Rookwood Hospital with the balance of £5.805m relating to the investment portfolio. Of the net current assets closing balance of

£1.875m, some £1.959m is supported with cash with the balance being net current liabilities of £0.084m. The fund balances have increased by £0.955m in the period to £10.156m

The following graph shows the investment portfolio's performance over the past 14 months.



The investment portfolio started the financial year with a market value of £5.499m. The value has increased to £5.805m at the end of May 2020, therefore resulting in a market value gain for the period of £0.306m.

In summary the value of the Charitable Funds has increased by £0.955m in the current year to £10.156m. This increase represents net income of £0.649m and market value gains of £0.306m

### Forecast Financial Position of the Charity

Whilst the charity has a net worth of £10.156m, it is structured around undelegated and delegated funds where financial responsibility has been delegated to named fund holders and Heads of Service. Full details of this are provided in the next agenda item which reviews the charity's delegated funds.

Within these funds that make up the charity, there are a number (delegated and undelegated) that are either specifically designated as general reserves or could be considered as general reserves. The value of these are set out below.

### Analysis of General Reserves

Restricted Funds £'000	Unrestricted Funds £'000	Endowment Funds £'000	Total Funds £'000	Rookwood (Fixed Asset) £'000	In year Investment Gains £'000	Total Value £'000
59	852	0	911	0	306	1,217

Against these general reserves the Charity has approved a number of bids which has resulted in significant financial commitments. These are assessed at being circa £1.525m.

This means that general reserves are overcommitted by circa £0.308m. A key driver for this was

the sharp loss in the Charities Investment portfolio which took place in March 2020 when the value dropped by almost £0.9m. Whilst the stock market has rallied since then and the in year investment gain is £0.306m, there is a worry that a second COVID 19 wave could well adversely impact upon the stock market and the gains that has been made this year.

This over commitment on general reserves can be mitigated by:

**Utilisation of Dormant Funds:** On the Trustee meeting agenda is a paper on dormant funds and if agreed could generate a maximum of £0.6m. This however is very much dependent upon the number of fundholders who don't produce credible expenditure plans.

**Income Generation:** Whilst the levels of income generated in the first two months have been exceptional, there is a large degree of uncertainty going forward as to what future income levels will look like. What is not known is if the upward trend experienced in the first two months will be maintained or whether it was just an initial response to support the service during the onset of the pandemic. Whilst the visibility of the charity has increased, lockdown and social distancing will impact upon the larger scale events such as the bed push and Cardiff half marathon. Notwithstanding this, further income expectations of £1m+ would not be unrealistic. It is also important to note that as there is an over commitment on general reserves, it is general unrestricted donations that are needed to mitigate this risk and provide additional funding that can be applied by the Charitable Funds Committee. It would however not be unreasonable to expect the fundraising team to generate sufficient general donations to cover their costs. The Fundraising team cost are currently a charge against the charity's general reserves with an annual cost of £0.3m.

## Reserves Policy

The current reserves policy states that the Charity should hold the following reserves:

- A fixed asset investment reserve, based on 10% of the value fixed asset investments (circa £580,000)
- A minimum of £500,000 to ensure that there is sufficient funds for on-going commitments

As the Trustee can access all unrestricted funds there is more than sufficient funds available to satisfy the reserves policy.

## Recommendation:

The Committee is asked to:

- **NOTE** the financial position of the charity;
- **NOTE** the commitments against general reserves and possible mitigating actions against financial risks.

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### Shaping our Future Wellbeing Strategic Objectives

*This report should relate to at least one of the UHB's objectives, so please tick the box of the relevant objective(s) for this report*

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	
2. Deliver outcomes that matter to people		7. Be a great place to work and learn	
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us	x
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

### Five Ways of Working (Sustainable Development Principles) considered

*Please tick as relevant, click [here](#) for more information*

Prevention	Long term	x	Integration	Collaboration	Involvement
<b>Equality and Health Impact Assessment Completed:</b>	Yes / No / Not Applicable <i>If "yes" please provide copy of the assessment. This will be linked to the report when published.</i>				



<b>Report Title:</b>	Covid-19 Income and Expenditure. Proposal and process for spend of Covid-19 donations				
<b>Meeting:</b>	Special Charitable Funds Committee			<b>Meeting Date:</b>	8 <sup>th</sup> July 2020
<b>Status:</b>	<b>For Discussion</b>	✓	<b>For Assurance</b>	<b>For Approval</b>	<b>For Information</b>
<b>Lead Executive:</b>	<b>Ruth Walker, Exective Director of Nursing</b>				
<b>Report Author (Title):</b>	<b>Joanne Brandon, Director of Communication, Arts, Health Charity and Engagement</b>				

### Background and current situation:

The purpose of this paper is to provide an update on the detail of Covid-19 donations, clarify how they were received and the governance around this. Finally to provide advice to the Trustee on a bids process for making a bid application against each tranche of money and to ensure those in most need or who are under-represented have equity of access in applying.

There are three distinct tranches of donations received. The monies received and contained in the paper are related to Covid-19 monies and not the total amount of income received by the Health Charity.

- 1. Covid-19 monies within “Make it Better Fund” received from the Just Giving platform and online donations received via the Health Charity’s online website, #spreadthelove fundraising campaign and offline donations** - Total online and offline donations received: £133,997. The donations received into the “Make it Better” fund currently have no specific criteria relating to Covid-19 to determine spend, it is a general purpose fund, however, consideration must be given to the eligibility criteria of the Health Charity as set out in Appendix 4.
- 2. NHS Charities Together** – A national umbrella body for NHS charities across the UK, supporting many NHS charities. Cardiff & Vale Health Charity has been a member for a number of years. £143,500 has been received to date and currently sits within the “Make it Better Fund”. NHS Charities Together has set criteria on spending attached to it. They have established a grant scheme in order to distribute the monies they have received across their membership.

The NHS Charities Together Grant scheme was established to support NHS staff and volunteers impacted by Covid-19 across the country.

Grant funding is awarded in stages, with each grant allocation having a broad purpose for expenditure as follows: Cardiff & Vale Health Charity have received two donations from NHS Charities together totaling £143,500.

NHS Charities Covid-19 response grants criteria is established to enable swift implementation of spend on projects which enhances the well-being of NHS staff, and volunteers, a summary of this is below.

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- Funding well-being packs/gifts for staff and volunteers on wards/departments this could include food/meal deliveries and refreshments, wash kits, overnight stay kits, furniture for rest rooms.
- Supporting patients' mental health through isolation with electronic communication devices, to enable them to communicate with family and friends.
- Other items as identified by members and their NHS bodies that enhance the well-being of NHS staff, volunteers and patients impacted by Covid-19.
- NHS Charities have been advised that dependent on local priorities and in consultation with clinical and senior managers, health boards and charities are free to use stage 1 funding for early interventions.

All of the criteria above is also aligned to our Health Charity strategic aims.

On 3 July 2020 NHS Charities Together opened up applications for further distribution of grants; The Health Charity has been invited to apply for an additional emergency grant of £50,000 with the proviso that the Health Charity *has "reported back to NHS Charities Together how you have spent the previous grants, and submitted your case studies online"*. We are **unable** able to meet this criteria within the current deadlines set by NHS Charities Together.

- 3. Gareth Bale Family Donation** – personal donation from Gareth and Emma Bale - £500,000. This donation has been ring-fenced in a separate fund. Mr & Mrs Bale expressed their wish for their donation to be spent specifically on University Hospital of Wales and have requested feedback on how the funds will be utilised. There is no date on the feedback requested.

It is proposed that the Bale Family donation is considered by the Board of Trustees.

**Proposal for discussion:**

The Health Charity proposes implementation of a bids process for receiving and assessing applications for monies similar to the approach of the Staff Lottery bids. A summary version is set out in the flow chart (Appendix 1)

This process could be utilised to ensure a similar approach to governance, which is also open, fair and equitable and subject to scrutiny, meeting the scheme of financial delegation and supported by the CFC. It will also ensure the set criteria for bids is met.

This will enable:

- Small, fast track bids to support staff in the interventions and criteria as set out above.
- The Health Charity to be responsive and act swiftly to bids, benefiting staff and patients at time of need. A fast track application form is attached for consideration (Appendix 2), accompanied with guidance notes for applicants (Appendix 3).
- A reduction in the length of time for bids to be considered via a fast-track process.
- Assurance that a process is in place to support the criteria to ensure compliance.
- Reassurance that due diligence and governance is complied with through an audit trail of the considerations given when assessing a bid.

Ensuring there is equal opportunity for the consideration of bids from across the whole of the UHB.

- Agreement that once the process is formalised, there will be promotion of the bids process to ensure equity across the UHB and its communities, to include applications from staff as well as third sector organisations and seldom heard groups etc.

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**Principles of assessing bids and encouraging bids from under-represented groups.**

Any granting of monies will be provided on the basis of real need. We recognise that some groups commonly experience poorer access to health, employment, have fewer training opportunities and are under-represented in the workforce, particularly at senior level. In addition, we know that not all groups have the same access to services and their experiences of receiving health services may be poorer. We believe that in order to level the playing field, we may need to treat people differently to help them have the same chance to take part in the bids process.

We fund initiatives that deal with the causes of disadvantage and exclusion and target our money to fund projects that help include groups at greatest risk. Our understanding of disadvantaged and excluded takes into account factors like people’s experience of discrimination.

A set of principles aligned to our UHB commitment to inclusion and the aims and objectives of the Health Charity will be developed with key individuals and groups.

**Executive Director Opinion /Key Issues to bring to the attention of the Board/ Committee:**

I support the implementation of a process for the Covid-19 monies to be distributed in a fair, equitable and timely way, meeting the criteria of all donors.

**Assessment and Risk Implications (Safety, Financial, Legal, Reputational etc :)**

The eligibility criteria is aligned to the UHB’s Guidance on core and non-core expenditure for charitable funds applications (Appendix 4).

**Recommendation:**

The Charitable Funds Committee is asked to discuss the proposal and to consider an approach to supporting bids for the Covid-19 donations, in line with meeting set criteria and governance compliance, in a timely process.

**Shaping our Future Wellbeing Strategic Objectives**

*This report should relate to at least one of the UHB’s objectives, so please tick the box of the relevant objective(s) for this report*

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	
2. Deliver outcomes that matter to people	√	7. Be a great place to work and learn	√
3. All take responsibility for improving our health and wellbeing	√	8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	√
4. Offer services that deliver the population health our citizens are entitled to expect	√	9. Reduce harm, waste and variation sustainably making best use of the resources available to us	
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

**Five Ways of Working (Sustainable Development Principles) considered**

*Please tick as relevant, click [here](#) for more information*

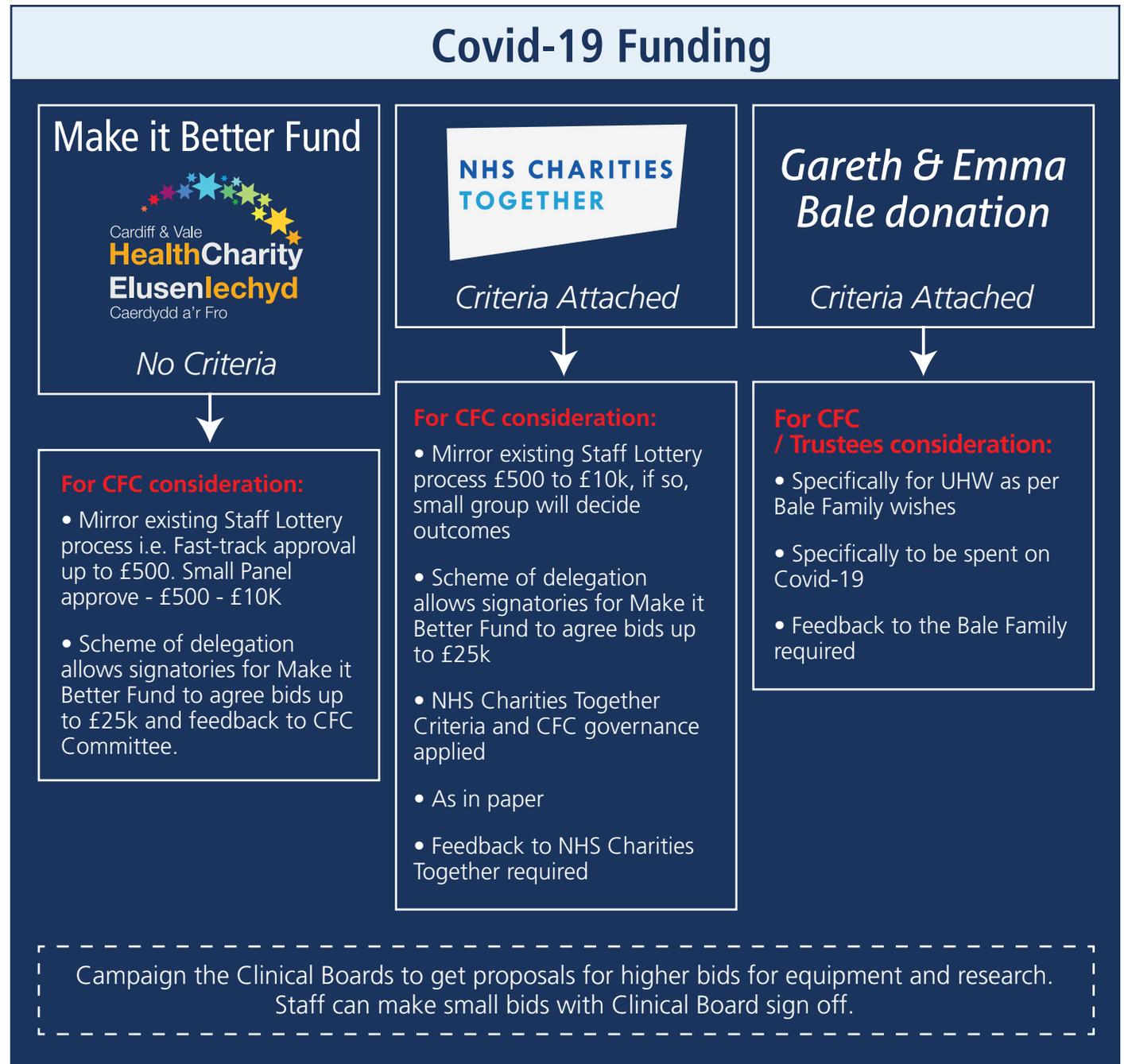
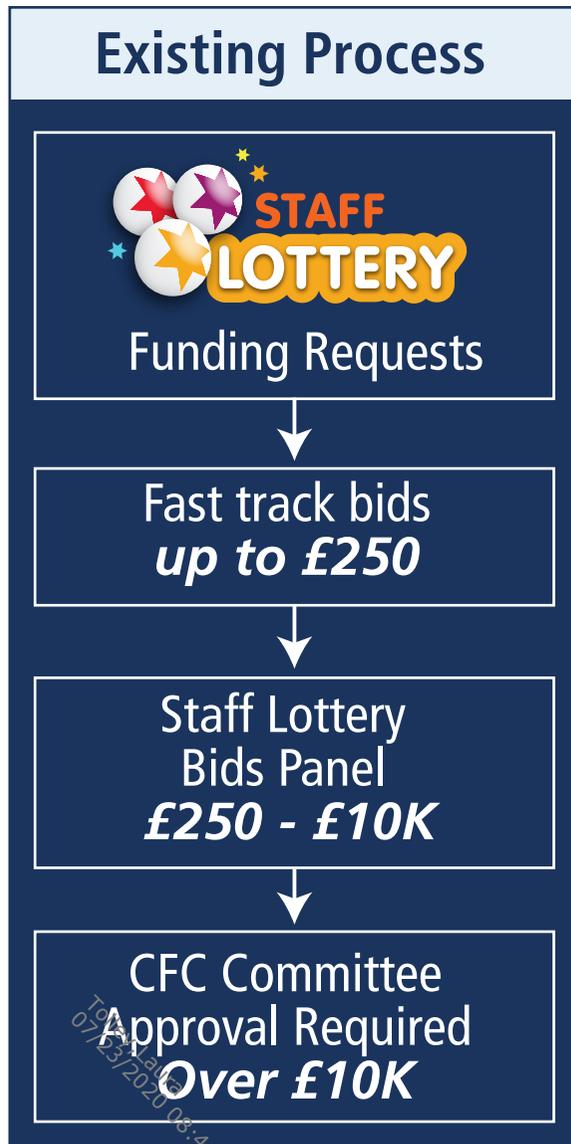
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Prevention		Long term		Integration	√	Collaboration	√	Involvement	√
<b>Equality and Health Impact Assessment Completed:</b>	<p>Not Applicable  <i>If "yes" please provide copy of the assessment. This will be linked to the report when published.</i></p>								

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# Proposal for C19 funding bids/requests





Registered Charity No. 1056544

**COVID-19 Fast-track Charitable Funds Application**  
**Patient, Staff and Volunteer Wellbeing**  
(PLEASE PRINT DETAILS)

<b>1. Name of ward, service or department:</b>		
<b>2. Main Contact:</b>		
Name:	Job Title:	Work Base:
Telephone:	Email:	
<b>3. Please provide as much information as possible regarding the items you are requesting to enhance staff and volunteer wellbeing:</b> <i>Please do not place any orders yourself; all orders will be made centrally should your request be successful</i> e.g. Description of items, number required, name of supplier, approximate cost.		
<b>4. How will this expenditure enhance the wellbeing of patients, staff or volunteers impacted by COVID-19? Max 100 words</b>		
<b>5. Management approval:</b> Please confirm who has approved the submission of your request. i.e. Senior Nurse, Service Manager, Head of Department or equivalent.		
Name:	Job Title:	
Telephone:	Email:	
<b>6. Submitted by:</b>		
Name:	Date:	
Job Title:		
<b>7. Feedback</b> – If your Charitable Funds application is successful, you will be asked to provide feedback on your spend for reporting and governance purposes.		

Send applications by email to: [Fundraising.cav@wales.nhs.uk](mailto:Fundraising.cav@wales.nhs.uk)

Any Questions: 02921 836042



Registered Charity No. 1056544

## Guidance Notes

### COVID-19 Fast-track Charitable Funds Application

This process will be reviewed in August 2020 to reassess the funding position.

This document is intended to provide guidance to Cardiff and Vale University Health Board staff on applying for charitable funds for items to enhance the wellbeing of staff, volunteers and patients impacted by the COVID-19 pandemic.

#### 1. Who can submit a request for COVID-19 charitable funds?

All Cardiff and Vale University Health Board staff are welcome to apply for charitable funds for items that will enhance the wellbeing of our staff, volunteers and patients impacted by the COVID-9 pandemic. Applications will only be considered from staff directly employed by the University Health Board or third sector partners who are sponsored by a CAVUHB employee.

#### 2. What is eligible for funding?

We welcome your ideas for items that will make the biggest difference to the wellbeing of our staff, volunteers and patients impacted by COVID-19. The items you request should be items above and beyond those that the NHS can provide. For further advice, see attached core and non-core expenditure guidance.

All ideas will be considered however, please remember that we need to be mindful of the spirit in which our charitable donations were made. If you are unsure whether your ideas are eligible for funding, please consider whether you would be happy to tell a fundraiser or donor that their donations have been used in this way. If not, it may be inappropriate to submit your request. If you are unsure, please contact us on [Fundraising.cav@wales.nhs.uk](mailto:Fundraising.cav@wales.nhs.uk) or 02921 836042.

#### 3. Can I talk to someone before submitting my application?

If you have any questions before submitting an application, please contact us on [Fundraising.cav@wales.nhs.uk](mailto:Fundraising.cav@wales.nhs.uk) or 02921 836042.

#### 4. What is not eligible for funding?

Our charitable funds cannot purchase any items that the Health Board has a statutory obligation to provide such as Personal Protective Equipment (PPE) or items that would normally be provided by the Health Board such as staff uniforms or computer equipment. Wherever possible, our charitable funds are intended to provide items that a whole ward, department or service can benefit from.

Please remember that your wards, service or department may also have access to charitable funds of your own. Consider also how these funds could also be used at this time to support items which may not be appropriate for COVID-19 charitable funding.

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Registered Charity No. 1056544

**5. How many applications can I submit?**

Wards, services and departments can apply for a maximum of £500 for items to enhance patient, staff and volunteer wellbeing.

We are currently only able to accept one application for staff and volunteer wellbeing and one application for patient wellbeing per ward, service or department. This is to ensure that as many people as possible can benefit from these funds.

**6. How can I access a larger amount of COVID-19 charitable funds?**

Please contact us on [Fundraising.cav@wales.nhs.uk](mailto:Fundraising.cav@wales.nhs.uk) or 02921 836042 to discuss any ideas you have for larger items, projects or initiatives that enhance the experiences, welfare and wellbeing of our staff, volunteer and patients impacted by COVID-19.

**7. Does my application have to be signed off by my manager?**

Yes. All applications must have management approval e.g. Senior Nurse, Service Manager, Head of department or equivalent.

**8. When will I hear back about the outcome of my application?**

We aim to get back to you within three working days of receipt of your application. You will be contacted on the email address provided on your application form.

**9. Where have our COVID-19 charitable funds come from?**

A significant amount of charitable donations have been so generously made in recent weeks to thank our NHS staff who are working tirelessly to care for our communities across Cardiff and Vale of Glamorgan.

We have also received grant funding from NHS Charities Together, the umbrella body for UK NHS charities, to meet the immediate and urgent needs of patients, staff and volunteers.

**10. I was told that my application was successful but the item(s) have not arrived. What should I do next?**

Please contact us on [Fundraising.cav@wales.nhs.uk](mailto:Fundraising.cav@wales.nhs.uk) or 02921 836042.

**11. My application wasn't successful, can I submit another application for different items?**

Yes, you may submit another application. We suggest that you contact us on [Fundraising.cav@wales.nhs.uk](mailto:Fundraising.cav@wales.nhs.uk) or 02921 836042 to discuss why your initial application was not successful before submitting another application.

**This process will be reviewed in August 2020 to reassess the funding position**

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Registered Charity No. 1056544

## Guidance on core and non-core expenditure for charitable funds applications

### The Public perception test

*When considering applying for charitable funds, ask yourself the following:-*

- *Would someone who puts a pound in a collection box be happy for it to be spent in this way?*
- *Would you be proud to tell a donor about this expenditure and the difference it will make?*
- *Is this a justifiable charitable purchase or should it come from an NHS budget?*
- *Is there a more effective use of the funds available?*

The Charitable Funds Committee has recommended the following list of items that could be considered for funding from charitable funds, staff lottery and departmental endowment funds. These recommendations are guided by the principles of the Charities Act 2011 and are subject to disclosure requirements.

Items that COULD be funded by charitable funds	Items that can-not be funded by charitable funds
<b>1. Equipment &amp; Consumables</b>	
Medical and surgical equipment and its maintenance for NHS patient care, education and research ( <i>in exceptional circumstances, when it cannot be paid for out of revenue</i> ).	Medical and surgical equipment and its maintenance for private patient care unless such use is incidental to its main NHS use (i.e. less than 2% of total activity).
Medical and surgical consumables for new charitable equipment when ordered together. Incidental 'start up' stock to constitute no more than the first year's supply.	Ongoing medical and surgical consumables (e.g. dressings, implants, cannulas, hypodermic syringes, needles).
Specialist furniture, fixtures and fittings for areas used by patients, including specialist beds and chairs. Refurbishment works or furniture, fixtures and fittings for use in non-clinical areas by staff, including staff rest-rooms and external areas, where charitable monies have been specifically raised for such projects; or would result in an improvement in staff welfare facilities, where such enhancement would not normally be funded by NHS resources.	Furniture, fixtures and fittings for use in non-clinical areas by staff to perform duties of role/core business activities, e.g. furniture for offices, bedroom furniture for staff accommodation.

IT equipment and software where used in direct patient care (e.g. attached to radiography equipment, tablet computers for use in direct diagnosis or care).	IT equipment and software where used in administrative and support roles (e.g. patient administration or business support).
	Office equipment and materials for use in administrative and support roles (e.g. stationery, filing cabinets, notes trolleys)
	Health and safety items (e.g. antibacterial gels, cleaning products/equipment, access equipment, industrial dishwashers).
Fans and air conditioning units for patient care areas.	Fans and air conditioning units in support and office areas ( <i>conditional on area making request i.e. if environment deemed detrimental to staff H&amp;S</i> ).
	Communication and navigation equipment (mobile phones and chargers, satellite navigation systems).
<b>Items that COULD be funded by charitable funds</b>	<b>Items that can-not be funded by charitable funds</b>
<b>2. Education &amp; Training</b> <b>All requests must comply with the UHB's Learning &amp; Development Policy</b> <b>Applications for study leave must be made for all education and training</b>	
Education and training (courses and conferences), over and above that provided by the NHS which will improve staff knowledge and performance in their roles within the NHS. Where no NHS resources are available, 100% of fees and associated costs can be funded in line with NHS subsistence rates.	Statutory, mandatory or essential education and training (e.g. required by law or identified as necessary for staff to undertake their roles within the NHS or required for maintenance of professional registration). Backfill for staff attending education and training programmes.
Higher award and academic studies for which significant benefit to the UHB can be quantified through training and development objectives. All applications will be referred to the Charitable Funds Committee for consideration on a case by case basis.	Education and training (courses and conferences) defined as 'Continuing Development 2' in the UHB's Learning and Development Policy, which is not normally supported by the UHB. Backfill for staff attending education and training courses.
Running costs associated with internally or externally run courses or conferences (including team skills development days) which are linked to identified education and training needs. e.g. speaker fees, room/ equipment hire, refreshments, honorariums, visiting speakers' accommodation. (*proof required that most cost-effective venue and/or accommodation option has been sourced)	Alcohol for course refreshments. Honorariums above and beyond out of pocket expenses, in line with HMRC guidelines. Team building days/time out.
Overseas courses and conferences where there is clear patient benefit and no UK provision available within 12 months. Maximum of 75% of all reasonable costs, in line with NHS subsistence	Cost of accompanying family members. (requests for overseas courses and conferences must be received at least 3 months in advance).

rates. Accommodation for a maximum of 1 night before and 1 night after the event.	
Library facilities and resources.	Requests which have not received study leave approval from the Learning & Development Department.
	Requests which have not complied with the UHB's Learning and Development Policy or received the relevant approvals.
	Applications for education and training which has already taken place.
<b>Items that COULD be funded by charitable funds</b>	<b>Items that can-not be funded by charitable funds</b>
<b>3. Patient Welfare</b>	
Items for patients (e.g. arts and crafts materials, children's themed curtains and duvet covers, patient library facilities).	
Furniture, fixtures and fittings in patient, or family/visitor rest areas.	
Additional snacks where there is a clear clinical need (e.g. for chemotherapy patients).	Tea, coffee, water coolers (adequate patient hydration is a mandatory requirement in the NHS).
Christmas extras for ward areas, gifts of nominal value (£5 each or less) for those inpatients in hospital on Christmas Day. <i>Allocation of Christmas monies is coordinated centrally on an annual basis.</i>	Gifts or distributions of money to patients at any time. All presents at Christmas must be non-monetary.
<b>Items that COULD be funded by charitable funds</b>	<b>Items that can-not be funded by charitable funds</b>
<b>4. Staff Benefit</b>	
Books, educational DVD's, posters, leaflets, information screens for patient care and/or staff education.	Televisions, games or other entertainment for staff.
	Staff celebrations or parties (including weddings, special birthdays or retirements), or gifts, including flowers.
Ward/departmental subscriptions to clinical journals where such journals are not available from the local staff library.	Personal subscriptions/memberships and professional insurance fees (can be offset against personal additional taxable income).
	Regulation staff uniforms, protective clothing, theatre shoes, non-static shoes, staff lockers (if over and above that provided by the UHB).
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Items that COULD be funded by charitable funds	Items that can-not be funded by charitable funds
<b>5. Building, Refurbishment &amp; Environment</b>	
Building and/or refurbishment works where charitable monies have been specifically raised for such projects.	Planned preventative maintenance or maintenance repair works (building and engineering).
	Health and safety expenditure consequent upon charitably funded works, e.g. safe asbestos removal.
	Upgrading/replacement of existing infrastructure or fixed plant (e.g. boilers, central switchgear) unless consequent on a charitable funded scheme. Where absolutely required and where no NHS exchequer funds are available, charitable funding of such works should never exceed 20% of total costs.
Items that COULD be funded by charitable funds	Items that can-not be funded by charitable funds
<b>6. Research &amp; Development</b>	
Non-commercial medical research with direct benefits to NHS patients where ethical approval has already been granted and no other source of funding exists.	Commercial research or non-medical research.
Research where clear public/patient benefit potential is anticipated and where the results will be made publicly available. Funding will generally be limited to the balances in those funds that are raised and held specifically for purposes of research.	Research where the charity or UHB is unable to secure the intellectual property or other rights of the research is successful.
Items that COULD be funded by charitable funds	Items that can-not be funded by charitable funds
<b>7. Other</b>	
Staff posts for a limited time period (maximum of three years) where no other source of funding exists e.g. projects piloting new models of care or part of a wider service development offering the most effective use of the funds available. <ul style="list-style-type: none"> <li>• <i>Applications must outline the benefits to patients and the wider NHS and include a detailed exit strategy.</i></li> <li>• <i>All staff posts and expenditure greater than £25k requires the approval of the CFC.</i></li> </ul>	
Healthy living and health promotion initiatives.	

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<b>Report Title:</b>	<b>Health Charity Events Planner</b> (a) Cancelled Events (b) Planned Events (c) Expected Financial Income				
<b>Meeting:</b>	<b>Special Board of Trustee Meeting</b>			<b>Meeting Date:</b>	23/07/2020
<b>Status:</b>	<b>For Discussion</b>	X	<b>For Assurance</b>	<b>For Approval</b>	<b>For Information</b>
<b>Lead Executive:</b>	<b>Ruth Walker, Executive Nurse Director</b>				
<b>Report Author (Title):</b>	<b>Joanne Brandon, Director of Communications, Arts, Health Charity and Engagement</b>				

### Background and current situation:

- Pro Bono Economics is an independent charity set up to provide economic advice to charities. It has commissioned work surveying 261 charities to identify and track weekly the issues facing charities across the UK in line with Covid-19 and an economic downturn. It predicts that 1:10 charities will struggle or fold in the next 12 months. Through a weekly tracker it has identified that one fifth of charities will face a reduction in donated income of between 50-75% as a direct impact of Covid-19 with the biggest issues identified as physical distancing reducing the ability to both fundraise and deliver services. Full details of their research and economic predictions can be read here: <https://www.probonoeconomics.com/>
- Due to the current and foreseeable physical distancing guidelines, many of the large scale events that the Health Charity had planned in 2020 to either sponsor, manage or participate have been cancelled.
- The Covid-19 pandemic has created an outpouring of support for NHS organisations and the health charities that support patients and staff, which we anticipate will have a window of opportunity.
- The current climate has opened up a range of virtual and online activities for people and communities previously not experienced, which the Fundraising Team alongside other charities would like to capitalise on.
- The Fundraising and Arts team need to adapt and diversify to the current climate to ensure that we capitalise on the current opportunities for NHS charities and to retain as much income for the Health Charity; thereby benefiting staff and patients.
- This paper proposes some operational ways forward for the Health Charity to continue to fundraise and raise its public profile during economically difficult times for our communities.

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## Executive Director Opinion /Key Issues to bring to the attention of the Board/ Committee:

It is extremely difficult to forecast fundraising related income for 2020/21. The Health Charity plans to mitigate any negative impact by focusing on digital and virtual events, legacies, staff benefits, trading and raising our profile through marketing, so that we are seen as the “charity of choice”. However this will require a comprehensive plan, which we are currently developing in alignment with the Health Charity Strategy.

## Assessment and Risk Implications (Safety, Financial, Legal, Reputational etc.):

### Operational Assessment

The fundraising team has reviewed all current planned activity and researched proposals around a continuation of events but delivered in a different way.

- Retaining the profile of those events, the causes behind them and the goodwill and commitment of the people involved, to ensure we don't lose the “momentum” of support.
- Discussion will take place with each of the fundraisers in line with their appeal portfolios to ensure that we agree a collaboration of ideas that everyone will buy into, to continue raising funds and maintaining the appeal profile.
- Assessing the art of the possible – a discussion on what can realistically be delivered and the potential to obtain online audience participation will be assessed and a view taken as to whether any outlay will be a sound investment and raise income.
- Raising profile – it is recognised that raising the profile of the charity and exposure to what it is providing, in itself doesn't raise funds directly but can be attributed to people wanting to donate to the official charity of CAV UHB i.e. Bale donation, is specifically donated for spend at UHW as well as a similar amount to the UK wide NHS Charities Together

### Risks

- It is accepted that we will be unable to reach previous fundraising amounts for individual events
- If the Health Charity doesn't diversify quickly, it will be left behind in an agile charity marketplace which is already re-grouping to assess and implement ways to capture an online market
- That we are seen to be offering “access” to the Health Charity through a range of mediums in order to retain loyalty and buy-in from supporters
- Loyal supporters (leading individual appeals i.e. Breast Centre, PROP) can see the CFC and Fundraising team are stepping up to the challenge of the “new normal” and will retain their commitment to the Health Charity and not look for alternative ways in which to support their altruism
- That an investment in digital/marketing communications will not pay for itself in the current economic climate
- Risk of not having a digital marketing person is a lack of skills within the current team and re-training opportunities will take too long or be insufficient to support virtual events.

### Positive impact;

- Increase in large celebrity donations and support for NHS by further raising our profile
- Monies received from NHS Charities Together – collaborative support
- Fundraisers supporting NHS charities via on-line/virtual fundraising
- Galvanised existing and developed new relationships with organisations, businesses and

partners who wish to support the UHB/ Health Charity/ NHS in the future

- Increase in social media followers to Health Charity
- Increase in number and range of arts interventions
- The visibility of the Health Charity has increased due to the team’s involvement in the Staff Havens and the distribution of a wide variety of public and local business donations
- Due to Staff connect app and daily CEO connects infrastructure the Health Charity has increased communication / messaging to UHB staff
- Trading partnerships have raised monies via art initiatives (T-shirts, prints etc.)
- Digital marketing would also allow the Health Charity to create integrated messages, with a mix of videos and images that can tap into the emotive side of our supporters and inspire them to fundraise in different ways.

**Negative impact;**

- Large scale/high income fundraiser events cancelled – Bed Push, 10K runs, Cardiff Half Marathon, Prop Ball, Pink Tie Ball, Strictly Top Dancer – (although many will roll over to 2021)
- Reduction in return of investment portfolio
- Current Covid related restrictions have identified a shortfall in digital/ virtual expertise to meet service requirements / fundraising capability ( currently limited within team)
- Limited attention to prevention agenda and third sector engagement in projects
- Unable to open/engage with visitors, public, staff, footfall at UHW via the POD

**Recommendation:**

The Board of Trustees is asked to :-

- Note the current position of the planned programme as laid out in papers a, b and c.

**Shaping our Future Wellbeing Strategic Objectives**

*This report should relate to at least one of the UHB’s objectives, so please tick the box of the relevant objective(s) for this report*

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	
2. Deliver outcomes that matter to people	√	7. Be a great place to work and learn	√
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us	
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

**Five Ways of Working (Sustainable Development Principles) considered**  
*Please tick as relevant, click [here](#) for more information*

Prevention	√	Long term	√	Integration	√	Collaboration	√	Involvement	√
<b>Equality and Health Impact Assessment Completed:</b>	No								

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Trustee Meeting – Item 2.5 (a/b)

HEALTH CHARITY EVENTS PLANNER 2020/21 – CANCELLED AND PLANNED EVENTS

Month	Event name	Category (link to HC Objective)	Event	2019 monies raised	Proposal: Digital/virtual/marketing
July	Waterfall Walk	<b>Objective One</b> - We will support the health and wellbeing of our population and support initiatives to enhance this.	Walking Event	£6,308	<b>Alternative event planned</b> ●Virtual one million steps or the coast of Wales – <b>Make It Better</b>
August	Barry 10K - <b>CANCELLED</b>	<b>Objective One</b> - We will support the health and wellbeing of our population and support initiatives to enhance this.	Running Event	New Event	<b>Alternative event planned</b> ●Plan to do a fun dog photo competition to benefit – <b>Our Orchard</b>
September	Cardiff 10K - <b>CANCELLED</b>	<b>Objective One</b> - We will support the health and wellbeing of our population and support initiatives to enhance this.	Running Event	£3,571	<b>Virtual Event tbc</b>
October	Cardiff Half Marathon - <b>CANCELLED</b>	<b>Objective One</b> - We will support the health and wellbeing of our population and support initiatives to enhance this.	Running Event	£18,059	<b>Virtual Event tbc</b>
	Blue Tie Ball – PROP Appeal - <b>CANCELLED</b>	<b>Objective Five</b> – We will improve and develop our fundraising capability.	Ball	£12,766	● Virtual event hosted by Nathan & Wayne ● Online auction/raffle
	Barry Hospital - 25 years - <b>CANCELLED</b>	<b>Objective Two</b> – We will support the health, wellbeing and welfare of our staff.	Celebratory event	N/A	●Internal/external promotion and engagement with staff, partners, ambassadors and supporters
	Breast Cancer Awareness Month	<b>Objective One</b> - We will support the health and wellbeing of our population and support initiatives to enhance this.	Virtual Event	New Virtual Event	● <b>Virtual Balloon Race</b> - <b>Breast Centre Appeal</b>

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<b>November</b>	Virtual/Digital Arts Sale	<b>Objective Three</b> – We will make the best use of technology to deliver the aims of the Health Charity	Arts Fundraiser	New Virtual Event	<ul style="list-style-type: none"> <li>●Interactive/digital</li> <li>●Promotions of Arts in Healthcare</li> </ul> - <b>Arts Fund</b>
<b>December</b>	10 Years of our Health Charity	<b>Objective Two</b> – We will support the health, wellbeing and welfare of our staff to lead healthier lives	Celebratory event	New Virtual Event	<ul style="list-style-type: none"> <li>●Digital /electronic Christmas cards</li> <li>●Merchandise promotion</li> </ul> - <b>Make It Better Fund</b>
	20K Staff Lottery Megadraw	<b>Objective Two</b> – We will support the health, wellbeing and welfare of our staff to lead healthier lives	Staff Lottery Draw	Online Event	<ul style="list-style-type: none"> <li>● Increase staff lottery promotion</li> <li>● Increase income to fund small grants</li> </ul> - <b>Make It Better Fund</b>
	Pink Tie Ball - <b>CANCELLED</b>	<b>Objective Five</b> – We will improve and develop our fundraising capability	Ball	£7,698	<ul style="list-style-type: none"> <li>●Alternative seasonal digital/electronic promotions and merchandise</li> </ul> - <b>Breast Centre Appeal</b>
	Christmas Jumper Day	<b>Objective Two</b> – We will support the health, wellbeing and welfare of our staff to lead healthier lives	UHB wide fundraiser	£967	<ul style="list-style-type: none"> <li>● Promotion via social media and interaction with UHB wide services – <b>ALL APPEALS</b></li> </ul>

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Trustee Meeting – Item 2.5 (c)

CARDIFF & VALE HEALTH CHARITY – EXPECTED FINANCIAL INCOME FROM VIRTUAL FUNDRAISING EVENTS DURING COVID-19

Rescheduled annual Events

MONTH	ANNUAL EVENT	2018/2019 mean of monies raised £	REPLACEMENT VIRTUAL EVENT	75% PROJECTED INCOME £	50% PROJECTED INCOME £
AUGUST	CARDIFF 10K RUNNING EVENT	3,571	VIRTUAL WELSH THREE PEAKS	2678.25	1785.50
OCTOBER	PROP (BLUE TIE) BALL	16,120.50	ONLINE BINGO / AUCTION/RAFFLE	12090.00	8060.25
DECEMBER	BREAST CENTRE (PINK TIE) BALL	7,143	VIRTUAL EVENT TBC	5357.25	3571.50
		<b>26,834.00</b>		<b>20,125.50</b>	<b>13,417.00</b>

New virtual events

MONTH	VIRTUAL FUNDRAISING EVENT	Projected Income £
AUGUST	FUN DOG PHOTO	200.00
AUGUST	YARN BOMBING	200.00
OCTOBER	VIRTUAL BALLOON RACE	200.00
NOVEMBER	VIRTUAL/DIGITAL ARTS SALE	300.00
DECEMBER	MERCHANDISE SALES	100.00
FEBRUARY	NHS APPRECIATION EVENT	200.00
		<b>1,200.00</b>

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## HORATIO'S GARDEN WALES

**SUMMARY:** Horatio's Garden Cardiff will be at the new Welsh Spinal and Neurological Rehabilitation Centre, the specialist NHS centre serving Mid and South-Wales. This will be the sixth garden for the award winning high-profile national charity, Horatio's Garden.

Currently situated at Rookwood Hospital, the new Spinal and Neurological Rehabilitation Centre is being built at the University Hospital, Llandough. Horatio's Garden, working in partnership with Cardiff and Vale Health Board, will create an exceptional garden project to enhance the physical and psychological wellbeing of people facing life changing injuries and long stays in hospital.

The charity is in a unique position to provide an outstanding, evidence based, facility which will complement and enhance the new centre. This really is a once in a generation opportunity, to create a world recognised, sustainable rehabilitation centre for the people of Wales.

Cardiff and Vale Health Board have had the foresight and vision to see the benefits the gardens will bring to patients and generously funded the enabling works. Horatio's Garden charity's constitution only allows funds to be spent on patients with spinal injuries and the Health Board have given a written undertaking to contribute funds for a separate, but adjacent garden for patients with neurological injuries, so that both groups of patients and their families can benefit from access to the beautiful gardens.

**BENEFICIARIES:** The beneficiaries of Horatio's Garden Cardiff will be the 105 annual inpatients from Wales, their families and friends and 900 annual outpatients who visit for regular check-ups, as well as the staff who work at the centre.

The charity's existing gardens are essential in patients' rehabilitation, helping support good mental health and improving their sense of wellbeing. In our 2019 impact survey:

- **94% of patients say Horatio's Garden has a positive effect on their wellbeing**
- **83% believe it positively impacts their mood**
- **76% believe the gardens are helpful in their physical rehabilitation.**
- **85% of NHS staff members say they personally benefit from the garden.**

In the current pandemic we have found that NHS staff are also using the gardens even more, to help with their wellbeing at work:

*"During this time, the one bright area is the garden which is exploding into life and is an oasis for patients and staff. I do not know what we would have done without this during the lockdown."*

Dr Alan Mclean, Lead Consultant Scottish National Spinal Unit.

Patients describe Horatio's Garden as calm, tranquil and uplifting, giving a sense of freedom from the clinical wards. They explain that being surrounded by nature lifts their mood and helps in coming to terms with their injuries. Evidence shows that adjustment and control are vital in the rehabilitation phase to prevent long term mental health issues. The garden gives a more relaxed environment for visits, laughter and tears, as well as the difficult conversations which need to take place when people's futures have changed so dramatically.

Tel 01722 326834 | [info@horatiosgarden.org.uk](mailto:info@horatiosgarden.org.uk) | [www.horatiosgarden.org.uk](http://www.horatiosgarden.org.uk) | [facebook.com/horatiosgarden](https://facebook.com/horatiosgarden)

Horatio's Garden is a Charitable Incorporated Organisation. Registered charity number 1151475/SC045386

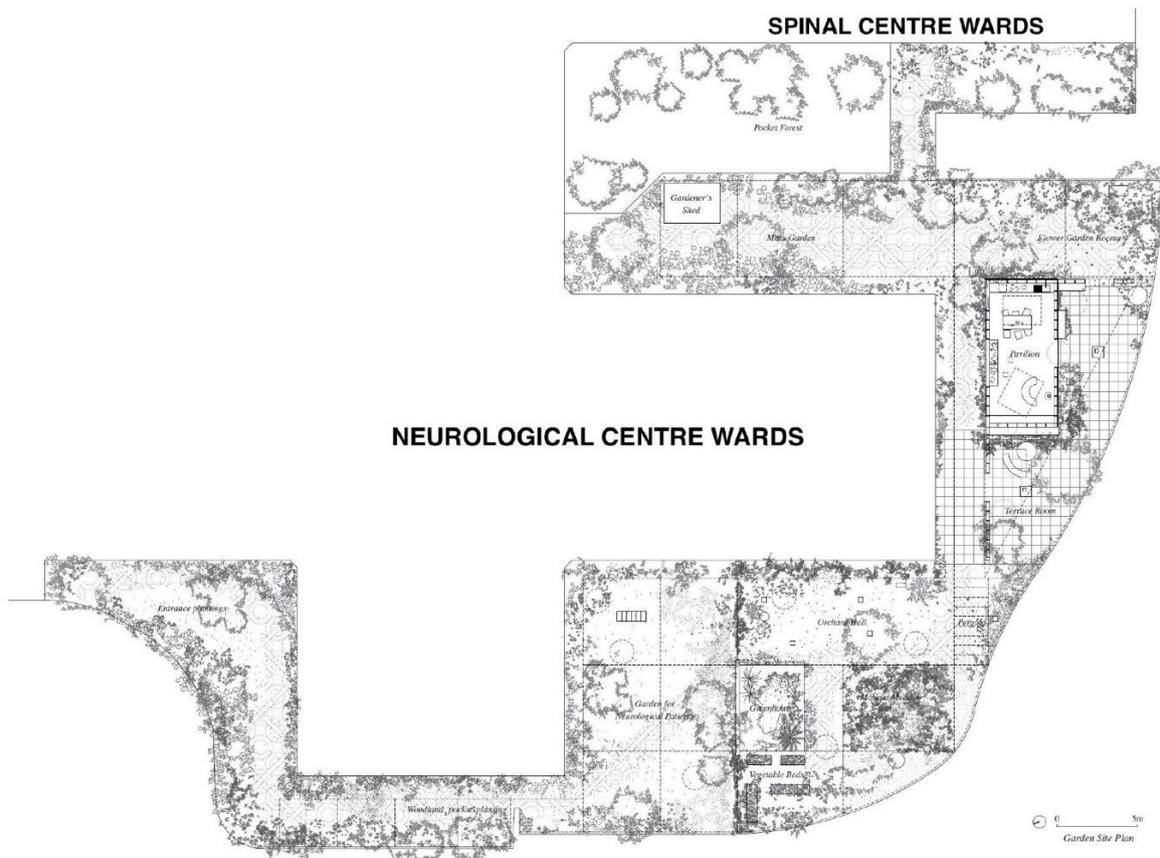
Registered address 2 Throope Down Office, Blandford Road, Coombe Bissett, Salisbury, SP5 4LN

“When I heard Wales was going to have a purpose-built Horatio’s Garden at Llandough Hospital, something went through me which is hard to explain. To be with your family away from the clinical environment helped no end with my rehabilitation. To have a bespoke garden with all of the small details considered to make it easily accessible for people with low mobility will be tremendous.” Rhian former patient

**GARDEN DESIGNER:** Sarah Price is an award-winning Welsh designer with a prestigious career. She is renowned for her artistic, naturalistic planting style in such projects as the Olympic Park and a garden at Manchester’s Whitworth Gallery. Sarah’s designs have collected numerous awards, including Gold Medals at the RHS Chelsea Flower Show. Sarah has created a beautiful, accessible garden sanctuary for patients with spinal and neurological injuries which wraps the new building bringing patients and NHS staff close to nature.



**THE DESIGN:** The garden’s designs will echo the Welsh landscape and the planting will engage all the senses, with an abundance of colour and scents carefully selected to attract birds and pollinators.



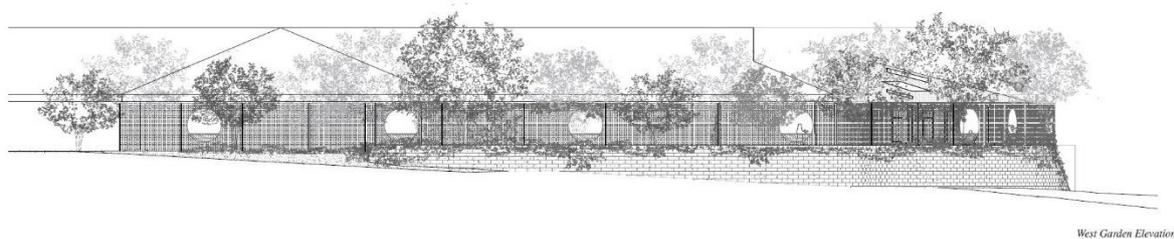
A series of interlinking small gardens will create a sense of exploration and privacy in the space with each one having a different feature. The entire garden will be easily and safely accessible to patients in beds or wheelchairs, and in dark evenings, garden lighting will give a magical environment to be seen from the wards. Every aspect of the detail is carefully planned utilising the charity’s specialist knowledge gained over the five national projects it has successfully delivered. 60% of the total costs of creating the specialist garden are for the accessible elements, so that it fully meets the needs of this group of seriously injured patients.

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The garden design for patients with neurological injuries will be seamlessly integrated but with subtle boundaries to the garden for patients with spinal injuries. Patients in the neurological centre will have views from every bedroom over the gardens. Everything has been especially designed to enhance the aspect from the wards for patients who are too unwell to go outside.



The garden for patients with neurological injuries is specifically designed to meet the needs of these patients and their families providing a safe area, easily accessible from the ward. Smooth paths wide enough for beds and wheelchairs, flexible seating, automated doors and sensory, perennial planting will bring a different perspective from that on the wards. Trees will bring shade and dappled light, blossom, scent, fruit and changing colour. Bird song will filter into the wards along with the gentle sound of the breeze in the planting.



**CAPITAL COSTS:** The charity has covered the costs of our team’s expertise, travel and time spent in co-ordinating the design process in the last 3 years and conducting all the meetings and consultation.

The budget for the entire project is £750,000. The designated area for the garden for patients having neuro rehabilitation is 256m<sup>2</sup> this compares with 1197m<sup>2</sup> for the entire garden (including the entrance and pocket forest) so it represents 21% of the space.

The costs for this area of the garden are:

Hard landscaping, the fencing, gates, planting, and garden furniture £103,464

21% of landscape design fee £8000

VAT on construction based on 5% is £5173

VAT on professional fees £1600

**TOTAL £118,250**

Other professional fees structural, drainage and M&E surveyors, planning, building control, project management, quantity surveyor

Total of £66,375: 21% contribution

**£13,938**

**Total requested funding for the garden for neurological patients: £132,188**

**MAINTENANCE:** Planting a garden is just the start – a garden needs care and expertise for it to grow and this is a vital part of Horatio’s Garden charity’s philosophy. We commit to caring for our gardens and work under a lease arrangement with the Health Board.



A qualified head gardener, working with an administrative assistant will lead a team of volunteers who will work to support patients using the garden and with garden maintenance. The Head Gardener will liaise closely with the clinical team to make sure the garden is meeting the needs of all the patients in the rehabilitation centre and is complying with all the requirements of the acute clinical environment. The charity takes responsibility for training and management of the volunteers who are all registered with the Health Board’s voluntary service and have enhanced DBS and occupational health clearance.

Head Gardener Jacquie Martin-Lof at Horatio’s Garden Stoke Mandeville.

In addition to maintenance the team organise activities and host events to offer the gentle side of rehabilitation for patients who spend months in hospital. From inclusive gardening sessions and creative art therapy sessions, to bank holiday BBQs and live music performances, there will be plenty of opportunities for patients to engage in an activity that will take their mind away from their medical concerns and offer hope for the future.

The Health Board have kindly agreed to contributing to the vital garden maintenance to cover the costs of nurturing the garden for patients with neurological injuries.

**Annual Running costs of the garden after opening**

Head gardener’s salary £25,000 (for 4 days a week)	Admin expenses £1000
Admin assistant £4000 (10 hours a week)	Travel & CPD £1650
Soil, compost and plants £3500	Additional fixtures and fittings £1800
Maintenance and servicing £3500	Insurance £1000
General garden expenses £2400	
Garden designer visits £1000	
<b>Total £44,850 pa</b>	

**Proportion to garden for neurological patients @ 21%: £9418 pa**

There are additional costs to the spinal injuries garden for patient activities eg art, food and music events and garden therapy. If these services were required for the neurological patients, there would need to be an adjustment in the contribution to reflect it. Horatio’s Garden charity takes on the responsibility of insurance, governance, training and management.

The charity will provide and care for the garden tools and equipment needed for maintenance of the garden and organise specialist contractors when needed. The designer visits regularly to ensure the garden develops as intended and to guide the head gardener.

## ADDITIONAL AREAS OUTSIDE THE SCOPE OF THE ORIGINAL DESIGN BRIEF:

We would like to request that the Health Board Charity to consider supporting these additional areas which will bring very significant long term benefits to the staff, patients and families and make a visual statement about the ethos and quality of the new Rehabilitation Centre in 2020.



### 1. MAIN ENTRANCE TO THE NEW REHABILITATION CENTRE

Creating a garden around the entrance area will also set an ambience for people arriving at the rehabilitation centre which will be welcoming, inspiring and sustainable. The entrance is also overlooked by one of the neurological wards so the planting will be seen by patients from their beds.

The entrance planting will also include a bike rack and a bench for people waiting for transport. The naturalistic planting these will extend to the roundabout outside the entrance connecting the entire outside space to the garden to create a beautiful ambience. Horatio's Garden charity will maintain this entire area for the Health Board.

**Costs £28,750**

### 2. SCREENING THE BIN STORE



The wards and garden for neurological patients overlook the hospital bin store where large yellow clinical waste bins are stored. We would like to screen this so that patients' bedrooms do not overlook it. Trees will be planted and cared for. Horatio's Garden charity will maintain the trees.

**Cost £3250**

### 3. POCKET FOREST FOR NHS STAFF

We would like to plant the lower level area outside the new rehab gym into a pocket forest with beautiful trees and underplanting. The trees will need to be containerised as they cannot go in ground due to the services in this area. We would furnish the area with outside tables and chairs to create a special area for NHS staff to use during their breaks. The pandemic has brought into the spotlight how vital it is for staff to be able to get outside in their breaks and this will provide a secluded relaxing area for them to enjoy. The trees would also bring greenery and movement at the upper storey to the patients in the spinal injury centre dappling the sunlight and encouraging bird song. Please could we apply for COVID19 related funding for this element of the project? Horatio's Garden charity will maintain this area and are just asking for support of capital costs.

**Total costs including garden furniture £27,500**

**SUMMARY:** Horatio's Garden charity would be so grateful to Cardiff and Vale Health Charity for their support to enable this exceptional project to go ahead. Together we can bring a state-of-the-art rehabilitation centre for the people of Wales – patients, relatives and NHS staff will benefit for years to come.



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<b>Report Title:</b>	<b>DRAFT HEALTH CHARITY STRATEGY 2019-2025</b>					
<b>Meeting:</b>	<b>Special Board of Trustee Meeting</b>				<b>Meeting Date:</b>	23/07/2020
<b>Status:</b>	<b>For Discussion</b>	<input checked="" type="checkbox"/>	<b>For Assurance</b>	<input type="checkbox"/>	<b>For Approval</b>	<input checked="" type="checkbox"/> <b>For Information</b>
<b>Lead Executive:</b>	<b>Ruth Walker, Executive Nurse Director</b>					
<b>Report Author (Title):</b>	<b>Joanne Brandon, Director of Communications, Arts, Health Charity and Engagement</b>					

**Background and current situation:**

Cardiff and Vale Health Charity (“the Health Charity”) is the official charity and working/trading name of Cardiff and Vale University Health Board General Purposes Charitable Fund, Charity Registration Number 1056544.

Cardiff and Vale University Health Board holds Charitable Funds as sole corporate trustee and the board members of the Health Board are jointly responsible for the management of those charitable funds. The management of Charitable Funds is a delegated responsibility from the Trustees, via the Charitable Funds Committee, to the Finance Dept. of Cardiff and Vale University Health Board.

The day to day administration of funds and operational management of the Health Charity is undertaken by a team of staff based at the Health Charity’s Business Unit at Woodland House.

This draft document (Appendix 1) is provided to the Board of Trustee’s to outline the Health Charity’s Strategy for the period 2019 - 2025.

**Executive Director Opinion /Key Issues to bring to the attention of the Board/ Committee:**

- Fundraising performance and increased income
- Raising awareness of the Health Charity
- Increased visibility and awareness of the Health Charity across Cardiff and the Vale of Glamorgan
- Increased patient, staff and public engagement with Health Charity events and fundraising opportunities.
- Supporting the education and wellbeing of staff employed within Cardiff and Vale University Health Board
- Engagement with our community

**Assessment and Risk Implications (Safety, Financial, Legal, Reputational etc.):**

Risk is an everyday part of charitable activity. The Health Charity Strategy is an essential document to provide assurance and demonstrate key objectives, adherence to governance and to safeguard the charity’s funds and assets.

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**Recommendation:**

The Board of Trustees is asked to :-

**Approve the Cardiff & Vale Health Charity Strategy 2019 - 2025**

**Shaping our Future Wellbeing Strategic Objectives**

*This report should relate to at least one of the UHB's objectives, so please tick the box of the relevant objective(s) for this report*

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	
2. Deliver outcomes that matter to people	√	7. Be a great place to work and learn	√
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us	
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

**Five Ways of Working (Sustainable Development Principles) considered**

*Please tick as relevant, click [here](#) for more information*

Prevention	√	Long term	√	Integration	√	Collaboration	√	Involvement	√
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**Equality and Health Impact Assessment Completed:**

No

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GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Caerdydd a'r Fro  
Cardiff and Vale  
University Health Board



Cardiff & Vale  
**HealthCharity**  
**Elusenlechyd**  
Caerdydd a'r Fro

# Cardiff & Vale Health Charity Strategy

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## 2019-2025



"Going above and beyond NHS services for the benefit of patients, staff and communities"

## INTRODUCTION

Cardiff & Vale Health Charity is the official charity of Cardiff and Vale University Health Board.

This strategy describes how we will plan and prioritise our resources in engaging and communicating with patients, staff members, stakeholders and the public. Also how we will strive to manage and where possible increase our fundraising income to maximise the funds available for our services.

Our aim for the Health Charity is: "Going above and beyond NHS services for the benefits of patients, staff and communities."

Health Charity funds do not replace NHS funding but optimises the generous donations it receives from patients and their families, staff and the local community for the benefit of the thousands of people cared for and employed by the Health Board.

### How we developed our strategy

To arrive at this ambitious plan we listened to many voices;

- We heard directly from people who have benefited from health charity funding and fundraisers.
- We listened to people who have received care from services within Cardiff and the Vale of Glamorgan.
- We heard from our staff, partner organisations and third sector colleagues.
- We also included the Health Boards mission - "Caring for people, keeping people well"; the overarching strategy "Shaping of Future Wellbeing" and the "Wellbeing of Future Generations Act."
- We are grateful for the generosity with which people shared their stories, thoughts and ideas, and hope they consider this plan adequately represents their contributions.

## VISION

- To be a successful and dynamic fundraising charity, recognised locally and nationally. Effective in engaging patients, staff and the community.
- To be an integral part of the Health Board, tangibly improving Cardiff and Vale services over and above what the NHS can fund.
- To improve the health and wellbeing of our staff and service users and the communities of Cardiff and Vale UHB.

## MISSION

- To raise, manage and distribute charitable funds in order to go above and beyond NHS services for the benefit of patients, staff and communities.

## VALUES

- To actively demonstrate and apply the core values of Cardiff and Vale University Health Board in all aspects of Health Charity fundraising and operational activities.



## OVERALL AIMS

- To increase funds and ensure a regular flow of income through active promotion of the Health Charity and positive engagement with our supporters and sponsors.
- To manage the charities resources effectively and prudently and in accordance with Charity Commission for England and Wales regulations.
- To ensure the Health Charity funds provide optimum benefit to patients, staff and the community.
- To engage in continous dialogue with our supporters via a survey in 2020 to establish what and how staff and service users would like the funds spent from 2020.

## THE CHALLENGES WE FACE

- Cardiff and Vale University Health Board’s global reputation for excellent patient care and pioneering medical advancements has not only transformed the lives of thousands of patients, but has also helped shaped the provision of medicine internationally.
- Service developments, research, technological and clinical advancements and improvements in patient experiences within the Health Board have been widely supported by the generous funding provided by Cardiff & Vale Health Charity and the dedication of its many supporters.
- The Health Charity receives invaluable support from hard-working Health Board staff, grateful patients, their families and friends, as well as the general public, local businesses and third sector organisations in the wider community.

As the Health Board continues its pioneering work and plans future developments, whilst experiencing increasing financial pressure, it is inevitable that the demand for charitable funds will continue to grow. We must therefore be proactive and explore all options to increase our charitable income, in order to assist our staff as much as possible to care for people and keep them well.



## OUR OBJECTIVES

### Objective One

We will support the health and wellbeing of our population and support initiatives to enhance the public health of our patients, staff and communities through innovative healthcare experiences.

### How will we do it?

- We will continue to work closely with clinicians and all of our staff to identify and support initiatives that matter to patients.
- We will support projects via our Staff Lottery that enhance services, both in hospital and the community.
- We will work with the third sector and other charities to support health and wellbeing projects.
- We will continue to support initiatives that provide wellbeing services for patients and their families.
- We will enhance the experience of healthcare by utilising creativity and arts with positive engagement.

 <p>Patients and Community</p>	 <p>Art</p>	 <p>Nurses and Health Care Support Staff</p>
 <p>Third sector and the community</p>	 <p>Staff Lottery</p>	 <p>Wellbeing</p>



## Objective Two

We will support the health, wellbeing and welfare of our staff to lead healthier lives.

### How will we do it?

- We will include healthy living and health promotion material and messaging where appropriate in our fundraising events.
- We will continue to support and promote the Health Boards staff health and wellbeing sessions and health awareness campaigns.
- We will advise and inform Health Board staff of how the Health Charity can provide funds to improve their staff environments and/or staff wellbeing projects.
- We will inform and involve our staff in the Arts programmes.
- Support cultural events and proactively engage with staff groups.

 <p>Support the health and wellbeing of our staff</p>	 <p>Engage with service providers and support their services</p>
 <p>Support national cultural events</p>	 <p>Promote healthy and active lifestyle events and opportunities</p>

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## Objective Three

We will help to create the best possible environment for sustainable healthcare, making the best use of technology to deliver the aims of the Health Charity.

### How will we do it?

- We will utilise the Health Charity’s investment in the Arts programme and Our Orchard to support the recovery and wellbeing of our patients, in line with the Health Boards commitment to deliver the Wellbeing of Future Generations Act.
- We will develop a spirit of inclusivity and “open to all ethos” by partnering with local artists, creative art groups and organisations plus patients, which allows them to express their experiences and support the recovery and wellbeing of our patients.
- We will invest wisely in expert advice to ensure that the environments we create provide an appealing and relevant environment for staff, patients and their families, and which reduces stress and anxiety.
- We will be bold and ambitious in connecting health and wellbeing with patients and staff; underpinning the principles of the Wellbeing of Future Generations Act.
- We will embrace technology and seek to use our digital platforms and social media to enhance the reach of the Health Charity and increase awareness, fundraising etc.

 <p>Use pod to engage with staff, patients and visitors to find out what matters to them</p>	 <p>Increase awareness of Health Charity support for service providers through charitable funds</p>
 <p>Support innovation and digital technology to make improvements in healthcare</p>	 <p>Support and promote the Arts in Health Programme</p>

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## Objective Four

We will manage the Health Charity efficiently and effectively, and in compliance with good governance, continuing to develop a business unit model and specifically focus on delivering the Health Charity financial plan.

### How will we do it?

- We will value our people and support them in training, self-development and recognising their efforts to deliver the Health Charity's objectives.
- We will invest in our fundraising to ensure our resources match our ambitions.
- We will maximise the opportunities to promote the Health Charity brand and increase awareness within the Health Board and the community.
- We will invest in expertise and equipment so that we communicate effectively with our stakeholders.
- We will work in partnership with our Finance and Governance colleagues to ensure that we manage and administer Health Charity Funds in line with financial probity and governance compliance requirements.
- We will learn from others and increase market share.
- We will be open and transparent in all of our business.

 <p><b>CRM</b></p> <p>Review use of Harlequin CRM and proactively use the resource</p>	 <p>Invest in staff training and digital technology to aid delivery</p>
 <p>Develop local policies and procedures with good governance</p>	 <p>Develop corporate and charity relationships</p>

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## OUR OBJECTIVES

### Objective Five

We will improve and develop our fundraising capability.

#### How will we do it?

- We will provide appropriate and relevant training and support to our fundraising team members.
- We will continue to develop positive relationships with our fundraisers, volunteers, sponsors and partners.
- We will actively promote our fundraising events via a variety of communication routes and by utilising our website capabilities.
- We will increase our engagement with staff across the Health Board and raise awareness of how the health charity can support services.
- We will inform our supporters, fundraisers, service users and general public of how their legacy donations can significantly support the Health Board via our 'Leave a Gift in your Will' awareness campaign.
- We will develop new and innovative communications and marketing initiatives to ensure the Health Charity is considered one of the official charities of choice for those involved in health and wellbeing.
- We will, as per the financial plan, look to raise the income of the General Purpose Fund.

 <p>Launch new Health Charity website</p>	 <p>New merchandise and marketing material</p>	 <p>Brand recognition using new pod and estate</p>
 <p>Promote Health Charity using social and digital media</p>	 <p>Review, increase and improve fundraising events and opportunities</p>	 <p>Increase awareness of legacy giving, staff lottery and partnership opportunities</p>



# DELIVERY

To deliver our strategic plan, we will invest in the four pillars of the Health Charity on which we'll continue to develop services provided by the Health Charity to patients, staff and communities of Cardiff and the Vale of Glamorgan:

## The Four Pillars

<b>Priorities - aligned to the strategy</b>	<b>Income generation</b>	<b>Financial plan</b>	<b>Passion of individuals</b>
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We will aim to do this by:

- Raising awareness.
- Fundraising.
- Education and wellbeing.
- Providing support.
- Engagement.

We will achieve these objectives through our charitable bids process, fast track bids process, volunteering and fundraising programmes, enabled by:

- Generate income through our investment, fundraising, "Leave a Gift in your Will" awareness campaign and staff lottery.
- Produce a full schedule of fundraising activities and events.
- Increasing our visibility and profile within the hospitals and wider community.
- Health Charity staff development.
- Engagement with our community.
- Arts Programmes.
- Supporting the Third Sector with our annual Grant Scheme.
- Collaborating with organisations and businesses.
- Developing our corporate and charity partnerships.
- Managing and supporting fundraising events.
- Celebrating the Welsh language and marking cultural events.



## GOVERNANCE ARRANGEMENTS

To ensure that we comply with the requirements of the Trustees, there will be an annual planning focus led by the Executive Lead for the Health Charity and the Health Charity Committee Chair.

### Our annual focus

- Pre-planned events.
- Financial process and income generation - linking into priorities.
- Board to decide on the length and support for each project.

### Generate income for the General Purpose Fund

- Big income events.
- Fundraising.
- Relationship building/promoting the charity's message.
- Brand awareness and PR.

### Evaluating success

- Difference the charity makes to staff, patients and communities, going above and beyond.
- Branding/added value - good news stories and the impact of projects funded through the charity.
- Financial benefits.

The implementation of this strategy will be supported by the Charitable Funds Committee of Cardiff & Vale Health Charity.

Registered with the Charity Commission: 1056544.

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<b>Report Title:</b>	Annual Report 2019/20 – Charitable Funds Committee					
<b>Meeting:</b>	Board of Trustee				<b>Meeting Date:</b>	23/07/2020
<b>Status:</b>	For Discussion		For Assurance		For Approval X	For Information
<b>Lead Executive:</b>	Director of Corporate Governance					
<b>Report Author (Title):</b>	Corporate Governance Officer					

**Background and current situation:**

The Charity Trustee must ensure that the Chair of the Charitable Funds Committee operating on its behalf formally, regularly and on a timely basis reports to the Charity Trustee on the activities of the Committee. This is due to the fact that responsibility for spending of Charitable Funds remains with the Charity Trustee as Corporate Trustee of the Cardiff and Vale University Health Board

**Executive Director Opinion /Key Issues to bring to the attention of the Board/ Committee:**

The Chair of the Charitable Funds Committee reports to the Board after each of The Charitable Funds Committee meetings in a document called ‘Chairs report to the Board’. This is to ensure the Board is aware of discussions at a Committee as soon as possible after the Committee but before the minutes are actually approved by the Board. This provides timely assurance to the Board that the Committee is adhering to its duties set out in its Terms of Reference.

In addition to the regular reporting to the Board Chairs of Committees are required to do an Annual Report to the Board or in this case the Charity Trustee.

**Assessment and Risk Implications (Safety, Financial, Legal, Reputational etc:)**

The attached Annual Report 2019/20 of the Charitable Funds Committee demonstrates that the Committee has undertaken the duties as set out in its Terms of Reference.

**Recommendation:**

The Charity Trustee is asked to:

- **APPROVE** the Annual Report of the Charitable Funds Committee

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## Shaping our Future Wellbeing Strategic Objectives

This report should relate to at least one of the UHB's objectives, so please tick the box of the relevant objective(s) for this report

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	
2. Deliver outcomes that matter to people	X	7. Be a great place to work and learn	X
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us	
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

## Five Ways of Working (Sustainable Development Principles) considered

Please tick as relevant, click [here](#) for more information

Prevention	X	Long term	X	Integration		Collaboration	X	Involvement	X
<b>Equality and Health Impact Assessment Completed:</b>	Yes/No / Not Applicable If "yes" please provide copy of the assessment. This will be linked to the report when published.								

Kind and caring  
Caredig a gofudd

Respectful  
Dangos parch

Trust and integrity  
Ymddiriedaeth ac uniondeb

Personal responsibility  
Cyfrifoldeb personol



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Caerdydd a'r Fro  
Cardiff and Vale  
University Health Board

# **Annual Report of the Charitable Funds Committee 2019/20**

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## 1.0 Introduction

In accordance with best practice and good governance, the Charitable Funds Committee produces an Annual Report to the Board setting out how the Committee has met its Terms of Reference during the financial year.

## 2.0 Membership

The Committee membership is a minimum of three Independent Members. In addition to the Membership, the meetings are also attended by the Executive Nurse Director and/or an Executive Director to ensure the quorum of the Committee. Meetings are also attended by the Director of Corporate Governance, Deputy Chief Executive Officer / Executive Director of Workforce & Organisational Development, Executive Director of Therapies & Health Science and the Director of Communications, Arts & Health Charity. The Chair of the Board is not a Member of the Committee but attends at least once annually after agreement with the Committee Chair. Other Executive Directors are required to attend on an ad hoc basis.

## 3.0 Meetings & Attendance

The Committee met three times during the period 1 April 2019 to 31 March 2020. This is in line with its Terms of Reference. The Charitable Funds Committee achieved an attendance rate of 75% (80% is considered to be an acceptable attendance rate) during the period 1<sup>st</sup> April 2019 to 31<sup>st</sup> March 2020 as set out below:

	11/06/2019	10/09/2019	10/12/2019	17/03/2020	Attendance
Akmal Hanuk (Chair)	✓	✓	✓	✓	100%
John Union (Vice Chair)	✓	✓	✓	✓	100%
Sara Moseley	X	X	X	✓	25%
<b>Total</b>	<b>67%</b>	<b>67%</b>	<b>67%</b>	<b>100%</b>	

## 4.0 Terms of Reference

The Terms of Reference were reviewed and approved by the Committee on the 17<sup>th</sup> March 2020 and were approved by the Board on 28<sup>th</sup> March 2020.

## 5.0 Work Undertaken

During the financial year 2019/20, the Charitable Funds Committee reviewed the following key items at its meetings:

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**11<sup>th</sup> June 2019, 10<sup>th</sup> September 2019, 10<sup>th</sup> December 2019 & 17<sup>th</sup> March 2020**

- **Fundraising Report**

At all meetings the Committee welcomed a detailed report regarding all fundraising activity that had taken place and were pleased to note the increased funds and Charity brand awareness.

- **Staff Lottery Bid Panel Report**

A report from the Staff Lottery Bid Panel was presented at all meetings, the Committee were encouraged to note the significant increase in bids which resulted in positive staff morale. The Committee were also pleased to note that Cardiff & Vale University Health Board (UHB) were leading in this area with other Health Boards approaching the UHB to find out what makes the Cardiff & Vale Staff Lottery so successful.

- **Finance Report**

At all meetings a report outlining the Health Charity Financial Position was brought and at the September meeting the Committee were advised by the Deputy Director of Finance that the Charity had a number of financial commitments for 2019/20, therefore further financial commitments needed to be postponed as a financial re-structure was required to enable a further release of funds to the Health Charity.

**11<sup>th</sup> June 2019 & 10<sup>th</sup> September 2019**

- **Staff Benefits Group Update**

On two occasions the Committee were provided with a report which outlined the work undertaken by the Staff Benefits Group and in September 2019, the Committee approved a proposal from the Staff Benefits Group Review Panel to accept the Affinity Partnership Scheme with Nathaniel Car Dealership. This scheme would replace the agreement with Griffin Mill to provide excellent benefits for UHB Staff Members.

**11<sup>th</sup> June 2019**

- **BSL Training & Awareness Update Report**

The Committee were encouraged to note that the UHB planned to train up to 500 staff over the next year through BSL Equality Training and Taster sessions. The Committee were pleased to hear feedback from staff regarding the training, which had been very positive.

- **Investment Report**

The Committee welcomed a presentation from the Portfolio Director and were pleased to note an increase in the value of the portfolio and that the Health Charity had outperformed the composite benchmark.

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- **Staff Benefits Group Terms of Reference**

The Committee reviewed the Staff Benefits Group Terms of Reference and referred them to the Board of Trustees for consideration.

- **Self-Assessment of Committee Effectiveness**

The Committee noted the results of the Committee Effectiveness Review for 2019 and agreed that the action plan for improvement would be completed by March 2020.

- **Charitable Funds Scheme of Delegation**

The Committee proposed a change to the Charitable Funds Scheme of Delegation so that any sum over £125,000 would be recommended to the Board of Trustees for approval.

- **UHB Transport Timeframes**

The Committee were informed that the frequency of the Park & Ride service from Pentwyn to University Hospital of Wales had increased and that work was being undertaken to get Park & Ride Facilities running from the University Hospital of Wales to other sites.

- **Charitable Funds Bid Applications**

During the June meeting the Committee considered the following bids;

- a) **Employee Wellbeing**

The Committee referred this application to the Board of Trustees for consideration;

- b) **Reminiscence Interactive Therapy & Activities**

The Committee approved the purchase of four Reminiscence Interactive Therapy & Activities units for wards at University Hospital Llandough and Barry Hospital

- c) **Patient Information Screens for the University Dental Hospital**

The Committee approved the purchase of four Patient Information Screens for the University Dental Hospital.

- **Cardiff & Vale Health Charity Website Proposal**

The Committee considered information provided in relation to the future of the Charity's Website and the quotes received from the three different development companies. After

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discussion, the Committee approved the appointment of Celf Creative as the new website provider.

- **Arts Programme Report**

The Committee noted the Arts Report which provided an overview of the activities and progress made by the Arts Programme during the six month period from December 2018.

- **Barry Hospital Update**

The Committee reviewed and noted the update on how the funds approved by the Committee for the Barry Hospital First Impressions Programme were being spent.

### **10<sup>th</sup> September 2019**

- **Wales for Africa Steering Group**

The Committee discussed the purpose of the Wales for Africa Steering Group and acknowledged the need for further structure within the group. Therefore it was agreed going forward that the minutes of the Steering Group would report in to the Committee for information.

- **Food Sense Wales – Update**

The Committee were pleased to note that Cardiff & Vale Health Board had received a commendation from Vaughn Gethin, Minister for Health & Social Wellbeing, for the work undertaken in the School Enrichment Programme.

- **Governance regarding Charitable Funds Committee Project Funding**

The Committee acknowledged new governance arrangements which would be instigated around Health Charity Bids. The new arrangements and tracking system is ensuring supported bids are being delivered as per the Committee agreements.

- **Endowment Order**

The Committee approved the purchase of the Care Cube System for the one-off cost of £33,000, using money currently held on Fund 9494 Biggs Legacy Cardiac Research.

- **Health Charity Strategy 2019-2024**

The Committee were introduced to the first Health Charity Strategy 2019/-24. After Committee discussion it was agreed that further work on the strategy was required and this would come to the Committee for further discussion and referral to the Board of Trustees for approval.

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- **Health Charity Branding Guidelines**

The Committee were provided with a helpful report which outlined the revised Health Charity Branding Guidelines that ensure the Health Charity logo is used with consent and in the correct way in addition to the Health Charity image becoming professionalised.

- **Sustainable Staffing Paper**

The Committee were advised that to ensure continued Health Charity achievements and growth, the team required further capacity. After Committee discussion, it was agreed that a further report would be brought to the Committee which contained staffing options and finances for Committee consideration.

- **Horatio's Garden**

The Committee were provided with a detailed report outlining a timeframe on Horatio's Garden and the total costs to date. The Committee were also advised of a number of events planned to visit the garden to see the progress made.

- **Staff Benefits Meeting Minutes**

The Committee reviewed and noted the Staff Benefits Meeting Minutes.

### **10<sup>th</sup> December 2019**

- **New Charitable Funds Bid Application Template**

The Committee approved a new Charitable Funds Bid Application template developed by the Director of Corporate Governance. This is a positive improvement as it will ensure that the Charity can demonstrate that bids meet the charitable objectives as well as ensuring that the correct processes are followed when funds are applied for.

- **Annual Accounts**

The Committee were informed that the Charitable Accounts Audit was still under development and the final version of the accounts would be submitted for the Trustee meeting on 30<sup>th</sup> January.

- **Sustainable Staffing**

The Committee discussed in detail three positions that supported the development of the Charity. It was explained that the positions had not yet been aligned with the Health Charity Strategy, therefore, the Committee agreed to support the ongoing funding of the positions until the end of the financial year, whilst recognising that a final decision on the permanent staffing posts needed to be made by the end of January 2020.

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- **Endowment Order**

The Committee approved the purchase of twenty breast pumps with stands and cases, for a one-off cost of £30,018, using money currently held on Fund 9116 Child Health Neonatal Intensive Care. This will allow the Unit to provide breast pumps at every cot space, to facilitate expressing of baby milk for every mum, next to their baby, in addition to encouraging and increasing the Unit's rate of breast feeding which is known to be beneficial for all sick or premature babies.

- **Charitable Funds Final Internal Audit Report**

The Committee were pleased to note the Reasonable Assurance received following an Internal Audit. The Committee were informed that a recommendation of high importance was included in the report, which was the treatment of dormant funds. Following this recommendation, Internal Audit have been advised that the use of dormant funds would be addressed by the Committee and Trustee.

- **Investment Manager Update**

The Committee were informed that the Investment Portfolio had gone out to tender and feedback had been provided to all suppliers who had put themselves forward. The scoring process was challenged therefore, two independent bodies were appointed to re-score. These bodies also produced different outcomes, therefore the tender has been re-distributed. The Committee were encouraged to hear that learning had been taken on board from the independent scoring and the UHB scoring criteria had been revised.

- **Patrons Process**

The Committee discussed the appointing of Charity Patrons and agreed that a memorandum of understanding needed to be drawn up and signed by the Patrons. It was also agreed that the appointment of Patrons would be signed off by the Trustee.

- **Any Other Business**

The Committee noted a concern raised with the number of Third Sector Organisations who were able to fundraise in concourse areas of the UHB.

The Committee approved for the December 2020 Staff Lottery Mega Draw being a one off amount of £20,000.00 for 2020.

**17<sup>th</sup> March 2020**

**Financial Review of Delegated Funds**

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The Committee reviewed and approved the implementation of a policy that any unrestricted funds that have been dormant for two full financial year are transferred to general reserves, approved that all restricted fund holders that have dormant funds be requested for expenditure plans and approved the consolidation of all funds that are deemed to be general reserves.

- **Events Planner 2020**

The Committee noted the Events Planner 2020.

- **Health Charity Strategy – Final Draft**

The Committee discussed and approved the Health Charity Strategy – Final Draft

- **Health Charity Annual Report – Final Draft**

The Committee approved the final version of the progress and activities of the Health Charity Fundraising Team plus the statement of financial accounts for Charitable Funds, as advised in the Draft Health Charity Annual Report 2018-19 and for publishing accordingly.

- **Patrons Protocol – Final Draft**

The Committee discussed and approved the final draft of the Health Charity Patron Process.

- **Change Account**

The Committee reviewed the Change Account and agreed to review this in 6 months time to evaluate the financial benefit to the UHB and the relationship. The Committee also agreed to reallocate fundraising staff resources according to the Health Charity's commitments and priorities.

- **Horatio's Garden Update**

The Committee received a detailed update on Horatio's Garden and accepted the report as assurance of the progress made to date.

- **Committee Annual Report 2019/20**

The Committee reviewed and recommended the Committee Annual Report to the Board for approval.

- **Committee Terms of Reference 2020/21**

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The Committee reviewed and recommended the Committee Terms of Reference to the Board for approval.

- **Committee Work Plan 2020/21**

The Committee reviewed, approved and recommended the Committee Work Plan to the Board for approval.

- **Arts Annual Report**

The Committee noted the Arts Annual Report.

## **6.0 Reporting Responsibilities**

The Committee has reported to the Board after each of the Charitable Funds Committee meetings by presenting a summary report of the key discussion items at the Charitable Funds Committee. The report is presented by the Chair of the Charitable Funds Committee.

## **7.0 Opinion**

The Committee is of the opinion that the draft Charitable Funds Committee Report 2019/20 is consistent with its role as set out within the Terms of Reference and that there are no matters that the Committee is aware of at this time that have not been disclosed appropriately.

**Akmal Hanuk**

**Committee Chair**

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<b>Report Title:</b>	<b>Staff Benefits Group – Terms of Reference</b>					
<b>Meeting:</b>	Charity Trustee				<b>Meeting Date:</b>	23 <sup>rd</sup> July 2020
<b>Status:</b>	<b>For Discussion</b>	x	<b>For Assurance</b>		<b>For Approval</b>	x <b>For Information</b>
<b>Lead Executive:</b>	<b>Director of Corporate Services</b>					
<b>Report Author (Title):</b>	<b>Director of Corporate Services</b>					

**Background and current situation:**

In line with good governance, Terms of Reference for Committees and Groups, should be reviewed on an annual basis.

**Executive Director Opinion /Key Issues to bring to the attention of the Board/ Committee:**

The Terms of Reference for the Staff Benefits Group were last reviewed in June 2016 to run until April 2019 so they are 12 months overdue for a review.

The Charity Trustee will be aware that over the previous 12 months the governance arrangements around the Charitable Funds Committee and the Charity Trustee have been strengthened. This has resulted in the Charitable Funds Committee comprising a Membership of 3 Independent Members and 3 Executive Directors with the Executive Nurse Director being appointed as Executive Lead of the Committee.

This has ensured that an Executive Member of the Charity Trustee was leading the Committee in addition to an Independent Member as Chair. To further strengthen the governance arrangements it is now recommended that an Executive Member of the Charity Trustee also Chairs the Staff Benefits Group. This would mean that at each level of decision making there is a Member of the Charity Trustee involved.

**Assessment and Risk Implications (Safety, Financial, Legal, Reputational etc:)**

The Terms of Reference for the Staff Benefits Group have been reviewed by the Director of Corporate Governance and prior to this meeting discussions have also taken place with Members of the Charitable Funds Team, the Chair of Charity Trustee and Executive Directors of the Charity Trustee. The main change to the Terms of Reference is in relation to the Chair and the Membership of the Group.

**Recommendation:**

The Charity Trustee is asked to:

**APPROVE** the changes to the Terms of Reference and in particular approve the appointment of the Deputy Chief Executive and Executive Director of Workforce and OD as Chair of the Staff Benefits Group with effect from the next meeting of the Group.

## Shaping our Future Wellbeing Strategic Objectives

*This report should relate to at least one of the UHB's objectives, so please tick the box of the relevant objective(s) for this report*

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	
2. Deliver outcomes that matter to people	x	7. Be a great place to work and learn	x
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us	
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

## Five Ways of Working (Sustainable Development Principles) considered

*Please tick as relevant, click [here](#) for more information*

Prevention		Long term		Integration	x	Collaboration	x	Involvement	x
<b>Equality and Health Impact Assessment Completed:</b>	<p>Yes / No / Not Applicable  <i>If "yes" please provide copy of the assessment. This will be linked to the report when published.</i></p>								

Kind and caring  
Caredig a gofudd

Respectful  
Dangos parch

Trust and integrity  
Ymddiriedaeth ac uniondeb

Personal responsibility  
Cyfrifoldeb personol



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Caerdydd a'r Fro  
Cardiff and Vale  
University Health Board

# STAFF BENEFITS GROUP

## Terms of Reference and Operating Arrangements

Approved by Charity Trustee:

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July 2020

## 1. PURPOSE

The role of the Staff Benefit Panel is to consider applications from external companies / organisations to provide benefits to staff for using their services / products. In general terms this will take the form of a discounted price for staff for the goods / service.

In fulfilling this function, the Group will:

- Ensure all staff benefits comply with policies of the Health Board
- Evaluate the suitability of the Staff Benefits to ensure all staff can benefit from the discount being offered.
- Ensure the most efficient and effective use of benefits to staff
- Avoid duplication of other staff benefits schemes

## 2. ROLE AND FUNCTION

- a) The Staff Benefits Group will explore and implement opportunities for staff to benefit from exclusive deals from external organisations.

These benefits will include:

- Eating in/out
- Education and Childcare
- Entertainment
- Financial Services
- Health and Beauty
- Home and Garden
- Hotels, Travel and Holidays
- Motoring and Servicing
- Retail outlets
- Sports and Recreation
- Utilities
- Weddings
- Mobile phones
- Salary Sacrifice Scheme for a range of products
- Staff Lottery
- Staff Wellbeing

- b) The Group works closely with Cardiff & Vale Health Charity to maximise opportunities for partnership working and fundraising with key external partners.

- c) The work of the Group, and when necessary recommendations for the Group, will be reported twice a year to the Local Partnership Forum and Charitable Funds Committee.

July 2020

### **3. MEMBERSHIP – FREQUENCY OF MEETINGS**

The Membership of the Group comprises:

- Chair – Deputy CEO and Executive Director or Workforce and OD
- Director of Communications, Health Charity and the Arts
- Senior Hospital General Manager, University Hospital Llandough/Barry Hospital
- Head of Staff Side
- Head of Workforce Governance
- Head of Health Charity and Arts
- Head of Employee Health and Wellbeing Services
- Head of Procurement (or Deputy)
- Head of Commercial Services (or deputy)
- Head of Transport and Sustainability
- Payroll Services Manager
- Business/Operational Manager

Meetings of the Staff Benefits Group will be held on a quarterly basis after which a report will be provided to the Charitable Funds Committee.

### **4. QUORUM**

The quorum for the Group will be five members including either the Chair.

### **5. REPORTING AND ASSURANCE ARRANGEMENTS**

The Staff Benefits Group will report to the following Committees of the Board:

- Local Partnership Forum (LPF)
- Charitable Funds Committee

### **6. SECRETARIAT**

Cardiff & Vale Health Charity will be responsible for providing operational support to the Group.

### **7. REVIEW**

The Terms of Reference will be reviewed every 12 months.

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July 2020

<b>Report Title:</b>	<b>The Health Charity Patron's Protocol</b>				
<b>Meeting:</b>	<b>Special Board of Trustee Meeting</b>			<b>Meeting Date:</b>	23.07.20
<b>Status:</b>	<b>For Discussion</b>	<b>For Assurance</b>	<b>For Approval</b>	√	<b>For Information</b>
<b>Lead Executive:</b>	<b>Ruth Walker, Executive Director of Nursing</b>				
<b>Report Author (Title):</b>	<b>Joanne Brandon, Director of Arts, Health Charity, Arts and Engagement</b>				

**Background and current situation:**

Cardiff & Vale Health Charity is the official charity of Cardiff and Vale University Health Board. The Health Charity manages more than 300 individual ward and area funds for equipment, research, treatment and patient care. Donations support work and projects that are over and above NHS funding.

Patrons help to raise awareness of the Health Charity. This is a really important role as it helps us to reach new people, inspire new fundraising activity and thank our supporters for the work they are doing.

The Charitable Funds Committee requested confirmation of the Health Charity's patron process in line with Governance procedures. This was presented to the Committee on 17.03.20 and agreed with amendments, for final approval by the Board of Trustees.

**Executive Director Opinion /Key Issues to bring to the attention of the Board/ Committee:**

Approval of the patron process and strategy will:

- allow the Health Charity to partner with patrons, in line with existing UHB governance procedures
- increase the visibility of the Health Charity
- potentially further increase income and potentially impact future fundraising and deliver on patient and staff initiatives in line with the Health Boards aspirational vision

**Assessment and Risk Implications (Safety, Financial, Legal, Reputational etc:)**

There could be a risk to the reputation of the Health Charity and by association the Health Board if the Patron procedure was not in place.

**Recommendation:**

The Special Board of Trustee Meeting is asked to:

**Approve the final draft of the Health Charity Patron's Protocol**

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### Shaping our Future Wellbeing Strategic Objectives

*This report should relate to at least one of the UHB's objectives, so please tick the box of the relevant objective(s) for this report*

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	
2. Deliver outcomes that matter to people		7. Be a great place to work and learn	√
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	√
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us	
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

### Five Ways of Working (Sustainable Development Principles) considered

*Please tick as relevant, click [here](#) for more information*

Prevention		Long term		Integration	√	Collaboration	√	Involvement	√
<b>Equality and Health Impact Assessment Completed:</b>	Yes / No / Not Applicable <i>If "yes" please provide copy of the assessment. This will be linked to the report when published.</i>								

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Cardiff & Vale Health Charity (“the Health Charity”) is the official charity of Cardiff and Vale University Health Board (“the UHB”). The Health Charity and its staff work alongside volunteers, third sector bodies, ambassadors and patrons to deliver its strategic objectives.

The UHB and the Health Charity recognise the unique and important contribution that volunteers make in complementing the services that each provide, and the Health Charity supports and encourages the efforts of individual ambassadors and patrons for the benefit of service users, their relatives, carers and the UHB.

In light of the work undertaken by volunteers, ambassadors and patrons they are often portrayed as the face of the UHB and Health Charity. Accordingly, it is vitally important that they are subject to and conduct themselves in accordance with the same rules, regulations and standards of behaviour as UHB and Health Charity employees.

This document sets out the responsibilities, values and behaviours that patrons are expected to comply with.

## **PATRON RESPONSIBILITIES**

As representatives of the UHB it is the responsibility of all Health Charity patrons to act in accordance with the UHB’s organisational values, behaviours, policies and procedures, including, but not limited to, the UHB’s confidentiality, data protection and safeguarding policies and procedures.

Further information regarding patron responsibilities is detailed below.

## **VALUES AND BEHAVIOURS**

The UHB and Health Charity operates within a defined set of organisational values and behaviours which underpin all that we are and do as an organisation. Living our values supports us in providing person centred care. It is an expectation that everyone is committed to adhering to the Health Boards ‘*Values and Behaviours*’;

## **EQUALITY STATEMENT**

Cardiff and Vale University Health Board and Cardiff & Vale Health Charity are committed to ensuring that, as far as is reasonably practicable, the way we provide services to the public and the way we treat our staff, patients and others reflects their individual needs and does not discriminate, harass or victimise individuals or groups on the basis of sex, pregnancy and maternity, gender, reassignment, disability, race,

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age, sexual orientation, disfigurement, religion and belief, family circumstances including marriage and civil partnership. These principles run throughout our work and are reflected in our core values, our staff employment policies, our service standards and our Strategic Equality Plan and Equality Objectives. We believe that all staff and volunteers should have fair and equal access to training as highlighted in both the Equality Act 2010 and 1998 Human Rights Act. The responsibility for implementing this plan falls to all employees and UHB Board members, volunteers, agents or contractors delivering services or undertaking work on behalf of the UHB, including Health Charity Patrons.

## **First Steps - Considering being a Patron**

Initially, contact the Health Charity Team for advice and an informal discussion about the role of Health Charity patrons.

Contact Details:

*Cardiff & Vale Health Charity, 2<sup>nd</sup> Floor, Woodland House, Maes y Coed Road, Cardiff. CF14 4HH Tel: 029 218 36052 / e.mail: [fundraising.cav@wales.nhs.uk](mailto:fundraising.cav@wales.nhs.uk)*

Thereafter, the following steps will be followed:

### **Step 1 -The Process**

Following receipt of an initial enquiry, or notification of potential patrons from other sources the Health Charity team will communicate with prospective Patrons to carry out an initial assessment, register their interest and provide relevant information about opportunities.

The initial assessment of any patron will be undertaken by a minimum of three Health Charity team members (one of which must be the Head of Arts and Health Charity) to ensure that the process is seen to be fair and equitable.

Where a prospective patron is deemed to be unsuitable following the initial assessment, they will be informed of the reasons in writing and, if appropriate, alternative roles may be offered or suggested (e.g. volunteering)

If, following the initial assessment the prospective Patron is deemed to be suitable, then a Patron Nomination Form will be completed and processed by the Health Charity Team. The Health Charity team will then arrange a meeting with the Patron to proceed to Step 2.

### **Step 2 - Developing a Patron Role Description**

After satisfying preliminary suitability checks, the Health Charity and potential patrons shall work together to produce a bespoke Patron Role Description. The UHB Charitable Funds Committee and the Health Charity Trustees will be consulted when appointing patrons to ensure that their appointment is appropriate for the prospective activity and the role that they will fulfil. It is therefore important that the Patron Role

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Description is as accurate and detailed as possible to allow the Trustees and Charitable Funds Committee to make an informed decision.

### **Step 3 – Charitable Funds Committee and Health Charity Trustee Approval**

Once a Patron Role Description has been prepared and agreed by the Health Charity Team and the prospective patron, the Description will be placed before the Charitable Funds Committee and Health Charity Trustee for approval.

Once the Patron Job Description has been approved at Committee and by the Health Charity Trustee, the Health Charity will undertake final suitability checks on the potential patron. Final approval will be required by the Executive Lead, prior to a formal appointment being made.

### **Step 4 – Additional Considerations**

Adequate support/supervision will be available to each patron. The type and level of support will depend on the needs of the patron and the role they have undertaken.

Each patron will have a clearly identified contact within the Health Charity team who is responsible for their support and guidance. All Health Charity team members will be expected to provide support as appropriate, and to deputise in the absence of the identified contact person.

Opportunities will also be provided through meetings, training and social events to meet other patrons for mutual support and discuss issues of common interest. Additionally, Patrons can contact the Health Charity team to arrange a one to one discussion at a mutually convenient time.

The nature of some charity work means that patrons may at times undertake activity in the community and they may be at greater risk where their activities occur away from a controlled environment such as a ward or department. Where appropriate, specific lone working training and/or support will be provided to patrons.

**There are a number of considerations which should be discussed and noted before a Patron can be nominated:**

- Risk assessment to be undertaken pertaining to the role.
- A criminal records (DBS) check is required for all patrons, the level of DBS check required will be dependent on the role undertaken by the patron.
- Identify adequate support and supervision and a named staff member identified as a point of contact.
- Agree any training that will be required and how this can be provided and funded.
- Identify how the role will allow the individual to feedback important information.

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- Consideration should be taken as to how the impact of the patron can be evaluated.

## Health Charity Team Responsibilities

The Health Charity Team will be responsible for overseeing the recruitment and placement of individual patrons within the UHB.

The Health Charity Team will ensure the following:

- that they keep up to date with current legislation and guidelines relating to patrons;
- that patrons are made aware of relevant UHB policies and procedures; and
- that the health, safety and welfare of patrons is supported in the same way as for employees.

## Following Successful Recruitment of a patron

1. Advise and support patrons if required and regularly review their progress.
2. Ensure that the contributions of patron's are recognised.
3. Work in liaison with the UHB to ensure that patrons receive appropriate training, support and supervision for their role.

## Confidentiality

All patrons are expected to comply with the UHB's Data Protection Policy by signing the confidentiality statement. It is essential that all patrons understand the absolute need for confidentiality to safeguard both our patients and staff and that any breach will be taken very seriously by the UHB.

## Support and Supervision

Each patron will have an identified contact person who they will report to, who is responsible for their day-to-day support, guidance and feedback on a regular basis. In the absence of the identified contact person this responsibility will fall to their deputy or other named staff member. In addition the Health Charity Team will meet with the patron for support/supervision as and when required.

## Patron Responsibilities

It is the responsibility of the patron to:

- As part of the application and/or interview process, disclose any criminal convictions or cautions to the Health Charity Team.
- Follow the instructions or guidance given to them by the Health Charity named staff member to whom they report.
- Adhere to the UHB's values and behaviours at all times.

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- Follow the policies and procedures of the UHB, as appropriate for their role, at all times.
- Ensure that they consider the health, safety and welfare of themselves and others as they undertake their role.
- Undertake any training deemed necessary to their role by the Health Charity Team.
- Inform the Health Charity Team if they are unable to undertake their role due to sickness or other reason as soon as possible, so that alternative arrangements can be made.

## Problem Solving

Cardiff and Vale University Health Board staff and patrons will work co-operatively, ensuring that both parties jointly benefit from the roles undertaken. However, on occasion, difficulties may occur which cannot be resolved through normal support channels. The Health Board aims to treat people fairly, objectively and consistently. To deal with these situations, both parties will be able to use this procedure for settling differences. The aim of the procedure is to assist both parties to find a mutually acceptable way of overcoming difficulties.

### **If the patron has a concern with a member of staff:**

#### **Stage one:**

The first point of contact should be the Health Charity nominated person. At this first stage the aim should be to resolve the issue through informal discussion.

#### **Stage two:**

If unresolved the patron should contact the Health Charity Team Manager who will aim to resolve.

#### **Stage three:**

The patron should put their concerns in writing to the Executive Director of Nursing and their decision will be final.

If a patron has a concern against a Health Charity Team member their first point of contact will be the Health Charity team manager.

### **If a patron has a concern about a process, patient or relative**

The patron will need to bring this to the attention of the appropriate Manager who will aim to resolve the concern, keeping the patron informed throughout the process. If the patron believes the concerns have not been addressed they will need to bring it to the attention of the Health Charity Team Manager.

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## **If the department has a concern about a patron**

If a concern is received about a patron, they have the right to be informed of the concerns brought against them, giving them the opportunity to state their case. The person who raised the concern should be kept informed.

### **Stage one:**

The Health Charity Team member should aim to resolve the concern informally through discussion. The Patrons shortcomings should be discussed and he/she should be offered support, encouragement and the opportunity to achieve the role in a satisfactory manner. Options such as additional support, supervision and training should be offered where necessary and clear aims along with a review date should be set.

### **Stage two:**

If the concern has not been resolved at stage one of the process, the concern should be referred to the Health Charity Team Manager, where the problem will be raised in a formal meeting with the patron. The patron will be entitled to put their case. The Health Charity Team can, if appropriate, offer alternative roles, issue the patron a letter outlining the reason for the concern along with clear objectives and a review date. The patron can be accompanied at the meeting on these issues by staff member, friend or volunteer (Not acting in a legal capacity).

If the problem is still not resolved, a meeting should be convened involving the patron, Health Charity Team member, Health Charity Team Manager and if required, the Director of Communications. This may result in withdrawal of the patron position. The patron can be accompanied at the meeting by another volunteer, staff member or friend.

In the event that it is believed that the patron has behaved in a manner that may seriously affect the reputation of the organisation; for example, committing serious misconduct (this may include, but is not limited to, theft, acts of violence, harassment, malicious damage, serious breaches of the letter or spirit of the equal opportunities policy and so on), they will be suspended from Patron activities whilst the matter is investigated by the Health Charity Team and appropriate Manager. The patron will be able to put their case forward and a decision made. If the concern is upheld, the patron will then be asked to permanently cease their role with the Health Charity. In all cases the patron can be accompanied at the meeting on these issues by a volunteer, or friend.

**If the nature of the offence has been deemed of a serious nature where we require the involvement of e.g. Police, Social Services, advice and support will be immediately sought through the Health Board and Health Charity.**

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**Term Period**

Term period will be four years.

**Review Period**

A review of individual patron agreements will be held annually to ensure that both parties remain satisfied with arrangements.

**Completion of Role**

Patrons who wish to end their patron activity in advance of the review period should inform the Health Charity Team as soon as possible before leaving, so that alternative arrangements can be made.

The Health Charity reserves the right to ask a patron to withdraw his/her help. The Health Charity may, at any time decide to end a patron’s relationship with the organisation following proper discussions with all parties.

**Signatories:**

**Patron**

**Chair of Charitable Funds Committee**

Name .....  
(print)

Name .....  
(print)

Signature .....

Signature .....

Date .....

Date .....

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<b>Report Title:</b>	<b>Disposal of Rookwood Hospital</b>				
<b>Meeting:</b>	Corporate Trustee Cardiff and Vale Health Charity			<b>Meeting Date:</b>	23 <sup>rd</sup> July 2020
<b>Status:</b>	<b>For Discussion</b>	x	<b>For Assurance</b>		<b>For Approval</b> x <b>For Information</b>
<b>Lead Executive:</b>	<b>Director of Corporate Governance</b>				
<b>Report Author (Title):</b>	<b>Head of Risk and Regulation</b>				

### Background and current situation:

The Executive Director of Strategic Planning had previously brought this matter to be reviewed by the Corporate Trustee at the meetings dated 27<sup>th</sup> June and 25<sup>th</sup> July 2019.

It has previously been confirmed that the UHB has had its business case approved by Welsh Government for a new build on the UHL site for the provision of neuro and spinal rehabilitation services. This means that most of the current Rookwood Hospital site will become surplus to requirements. It has therefore been proposed that the Health Charity dispose of part of the Rookwood Hospital site. For reference purposes, further details of the proposed disposal and the papers previously placed before the Corporate Trustee, can be found at Appendix 1.

Corporate Trustee minute: 19/07/005 requested that further enquiries are made with the Charity Commission regarding disposal options and that legal advice previously obtained be shared with the Corporate Trustee.

Legal advice has been received from Bethan Lloyd at Geldards LLP. A copy of her advice is attached at Appendix 2. No formal approach has been made to the Charity Commission as the content of the legal advice adequately sets out the options available to the UHB.

The Corporate Trustee is asked to consider the content of Ms Lloyd's advice and agree a way forward for the disposal of the Rookwood Hospital site keeping in mind the proposals put forward in the report dated 27<sup>th</sup> June 2019 at Appendix 1.

### Executive Director Opinion /Key Issues to bring to the attention of the Board/ Committee:

The key points to note from Ms Lloyds advice are as follows:

- The existing objects of the charity state that the land, of which the disposal site forms part, must be used as a "hospital or home...for sick and disabled persons...". The proposed sale of the site, either to the Council for social housing, or otherwise on the open market, will not be consistent with the existing objects of the Charity and as such it cannot be the case that the disposal of the land is made in furtherance of the charitable objects.
- The UHB must comply with sections 177 to 121 of the Charities Act 2011 ("ChA 2011") in relation to any disposal of the land. In this regard, the UHB must obtain written advice

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from a properly qualified surveyor and advertise the proposed sale on the open market, for such period and in such a manner as the surveyor advises.

The UHB must follow the advice of the surveyor in relation to advertising the proposed sale, unless the surveyor advises that such action would not be in the best interests of the Charity.

If the UHB decides not to advertise the sale (either at all or not in accordance with the surveyor's advice), then it must apply to the Charity Commission's for an Order authorising the sale at an undervalue. Such an application must be made under section 105 ChA 2011 (power to authorise dealings with charity property).

In summary, as sole trustee, the UHB is required to advertise the proposed sale in accordance with the surveyor's advice (section 119(1)(b) ChA 2011) unless permission is otherwise given by the Charity Commission. The UHB cannot proceed with a disposal without prior advertisement until it has obtained a Charity Commission Order pursuant to section 105 ChA 2011.

- The land is designated land (i.e. land that must be used for a particular purpose, in this case as a "hospital or home...for sick and disabled persons..."). As such, under section 121 of ChA 2011 (additional restrictions applying to land held for stipulated purposes) public notice of the proposed sale must be given (section 121(2)).

The exception to giving public notice under section 121(2) is where the proceeds of sale will be used to purchase replacement property for the Charity. Spending the proceeds on developing other existing hospital sites is not the same as purchasing replacement property in this context.

Alternatively, the UHB can apply to the Charity Commission for a direction that section 121(2) will not apply to the proposed sale. In making the direction, the Commission must be satisfied that this is in the best interests of the Charity, so a strong case must be made.

- The land is also permanent endowment, being an asset that is intended to be held in perpetuity/forever. Where the land is sold the existing objects of the Charity will attach to the proceeds of sale as opposed to the land.

The question then arises as to how the proceeds of sale can be spent (which must be in furtherance of the existing objects). Purchasing land is an acceptable expenditure of permanent endowment but paying for buildings (which are considered to be wasting assets) would not be. In this regard, the UHB would need to obtain the Charity Commission's consent by way of an Order to expend permanent endowment on Buildings or other proposed assets, most likely with a requirement for "recoupment".

- If the UHB consider that the existing charitable objects are too restrictive and that these objects (which will attach to the proceeds of sale and continue to apply to the two sites that will remain with the Charity) should be widened/modernised, then an application must be made to the Charity Commission for a cy pres scheme pursuant to section 61 ChA 2011.

Section 62 ChA 2011 sets out the occasions in which a cy pres situation may arise. The Disposal Report dated 27 June 2019 refers to Rookwood Hospital being no longer suitable for use as a modern healthcare facility and that the care and services currently provided at Rookwood Hospital will be provided at UHL from 2020/2021. On this basis, any application for a cy pres scheme should set out that the original purposes cannot be carried out according to the directions given in the original gift. Other reasons may also apply.

The disposal options previously submitted to the Corporate Trustee were:

- 1) Enter into negotiations with Cardiff Council which has expressed an interest in the site for housing, and potentially a shared health and care facility. The Council has indicated interest in purchasing the site at full market rate; or
- 2) Pursue a sale on the open market which would be a two staged process: Firstly invite expressions of interest for the property from a wide market audience and to for this to be lotted for various parts of the site. This would establish the full level of interest in the property and structure a sale which maximises net sale receipts. The second stage would entail a competitive informal tender process inviting those selected from stage 1 to submit detailed proposals.

Before proceeding with either course of action it is recommended that the advice of Ms Lloyd is followed. It is recommended that the following actions are taken:

- I. Clarification be obtained regarding allocation/use of the proceeds of sale. This will have an impact on the legal route followed moving forward;
- II. Obtain specialist advice from a Surveyor in relation to advertising the sale on the open market and for what period;
  - If the property is not advertised, in accordance with advice or otherwise, then the UHB will need to make an application authorising the sale of land at an undervalue (S105 ChA 2011);
- III. If the sale proceeds are to be used for a purpose other than the acquisition of replacement land, as the case will be here, then a Public Notice will need to be issued inviting representations to be made within a time specified in the notice (not less than one month from the date of the notice) (s.121 ChA 2011). This requirement may be set aside if the UHB can satisfy the Charity Commission that it would be in the best interests of the charity to do so;
- IV. Assuming that the charitable objects are too restrictive for our intended use of the sale proceeds, then an application for a Cy Pres Scheme will need to be made to the Charity Commission to widen or modernise it's objects.

It has been noted that legal advice regarding a Cy Pres Scheme was sought from Eversheds Sutherland Solicitors in 2015. At that time the Charity Commission was of the view that a cy pres case could be made on the basis that Rookwood Hospital will no longer be required once the new facility at UHL has been built.

It should be noted that a Cy Pres Scheme application can be made before or after the

disposal of land, however, if the scheme is obtained after the disposal, the proceeds of sale must not be spent on the new wider objects until the scheme has been properly obtained. This is not a quick process and can take between 6 and 12 months to obtain, depending on any direction by the Commission to give public notice of the proposed scheme and new purposes.

### Assessment and Risk Implications (Safety, Financial, Legal, Reputational etc:)

Failure to follow the advice of Ms Lloyd and more generally charity law duties, will expose the Health Charity to a risk of being found to have mismanaged the charity and its assets.

Given the location of the site, the likely interest in the site from private companies (as referenced at page 5 of Savills Disposal Strategy Paper) and the interest that the sale will draw from the public, there is a real risk that the sale will be brought to the attention of the Charity Commission if due process is not followed.

This could lead to enforcement action being taken by the Charity Commission pursuant to its statutory powers detailed in the Charities Act 2011. These powers include, Enforcement Orders (s.335 ChA 2011) to make good defaults, the imposition of an Order of the High Court (s. 336 ChA 2011) to remedy failures to comply with orders, or a direction that a formal public Inquiry be carried out.

### Recommendation:

The Corporate Trustee of the Cardiff and Vale Health Charity is asked to:

- **AGREE** and note the legal advice of Ms Lloyd copied at Appendix 2;
- **AGREE** to proceed with the recommended courses of action detailed at points i to iv above.

### Shaping our Future Wellbeing Strategic Objectives

*This report should relate to at least one of the UHB's objectives, so please tick the box of the relevant objective(s) for this report*

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	
2. Deliver outcomes that matter to people	x	7. Be a great place to work and learn	
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us	
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where	

innovation thrives

**Five Ways of Working (Sustainable Development Principles) considered**  
*Please tick as relevant, click [here](#) for more information*

Prevention

Long term

Integration

Collaboration

Involvement

**Equality and Health Impact Assessment Completed:**

Yes / No / Not Applicable  
*If "yes" please provide copy of the assessment. This will be linked to the report when published.*

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## Appendix 1

1. Corporate Trustee Meeting Papers – 27<sup>th</sup> June 2019; and
2. Minute CTM 19/06/009; and
3. Minute 19/07/005.

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### CARING FOR PEOPLE



GIG  
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NHS  
WALES

Bwrdd Iechyd Prifysgol  
Caerdydd a'r Fro  
Cardiff and Vale  
University Health Board

<b>Report Title:</b>	<b>Disposal of Rookwood Hospital</b>			
<b>Meeting:</b>	<b>Corporate Trustee Cardiff and Vale Health Charity</b>	<b>Meeting Date:</b>	<b>27<sup>th</sup> June 2019</b>	
<b>Status:</b>	<b>For Discussion</b>	<b>For Assurance</b>	<b>For Approval</b>	<b>x For Information</b>
<b>Lead Executive:</b>	<b>Executive Director of Strategic Planning</b>			
<b>Report Author (Title):</b>	<b>Deputy Director of Finance</b>			

## SITUATION

The UHB has had its business case approved by Welsh Government for a new build on the UHL site for the provision of neuro and spinal rehabilitation services. This means that most of the current Rookwood Hospital site will become surplus to requirements. This paper sets out the proposed disposal strategy for the Rookwood Hospital site.

## REPORT

### BACKGROUND

Rookwood Hospital is a fixed asset owned by the Charity. It was bequeathed as a charitable donation to the health service as an asset to be used in perpetuity to support paraplegic patients. This has expanded and changed over time and now supports neuro and spinal injury rehabilitation services. The asset is no longer fit to be used as a modern healthcare facility and upon completion of the new build at the UHL site in 2020/21 will become surplus to requirements. It does however have a considerable value and in line with the intentions of the donor, the Trustee on advice from the Charitable Funds Committee, have agreed the framework on how this resource will be applied.

It is clearly not in the interests of the Charity to have a vacated deteriorating asset that cannot be usefully applied to support the wishes of the donor. The spirit of the original donation can however be maintained if the asset is sold and the receipts are applied to support the services currently delivered there. At its meeting in July 2016 the Corporate Trustee agreed the sale of the asset and also agreed that to maintain the longevity of the donation future expenditure will be capped at:

- The utilisation of investment income received;
- The application of part of the capital limited to an annual value of a maximum of 5% of the value of the original net sales receipts.

Enquiries setting out the background and the changes being made to service provision at Rookwood Hospital have already been made with the Charity Commission. They confirmed in principle in 2015 that when services are transferred to UHL, the asset can be sold as it would no longer fit with the original intentions of the donor. They have also confirmed in principle that it would be permissible to widen the objects of this part of the Charity.

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The UHB has now had its business case approved for a new build on the UHL site for the provision of neuro and spinal rehabilitation services. Work has started on the new build which is planned to be completed and opened in early 2021. Therefore, the Charity needs to consider and agree a disposal strategy for the Rookwood Hospital site.

## ASSESSMENT

The Estates Department have engaged Savills and have been working with them and NWSSP Facilities Services to support the disposal process. Their first task has been to provide a professional assessment of the open market value of the site in its current state. This has been done and the value of the site has been estimated as follows:

- £6m - Main Hospital
- £3.6m - Artificial Limb and Appliance Centre
- £0.6m - Rookwood Lodge

The detailed valuation report for Rookwood Hospital is attached for information.

Upon opening of the new facility at UHL, only the main hospital will be vacated for disposal as the other two areas will continue to provide clinical services. Disposal proposals in this report therefore, only relate to the main hospital site and the other two areas of land will continue to be owned by the charity.

The Rookwood site is identified as a non-strategic housing site within the Cardiff Council Local Development Plan. It therefore has policy support for residential development and there are very good prospects of securing planning permission for residential development on the site.

Rookwood Hospital is a listed building and it is likely that the planning authority will support its conversion into residential units within the existing structure. This sort of development opportunity tends to attract specialist operators rather than volume housebuilders. The site also has potential for commercial use.

The Board of Trustees is asked to consider the following options for disposal of the site:

1. Enter into negotiations with Cardiff Council which has expressed an interest in the site for housing, and potentially a shared health and care facility, the details of which would need to be worked up. The Council has indicated interest in purchasing the site at full market rate, and were this an NHS property, rather than the Charity's we would be entering into discussion with the Council as part of the asset management arrangements between public sector partners. Cardiff Council has a clear strategy to increase the housing provision for the people of Cardiff and this is very much part of the Liveable Cities agenda, and contributes to wellbeing.
2. Pursue a sale on the open market which would be a two staged process: Firstly invite expressions of interest for the property from a wide market audience and to for this to be lotted for various parts of the site. This would establish the full level of interest in the property and structure a sale which maximises net sale receipts. The second stage would entail a competitive informal tender process inviting those selected from stage 1 to submit detailed proposals.

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It is likely that option 1 would mean lower disposal costs. It is possible that option 1 could result in a lower purchase price than going on the open market. Equally, it is possible that the sale via competitive tender could result in a price lower than market value, or be a conditional sale based on planning permission.

There is no material advantage in the UHB demolishing buildings prior to the sale. Given the range of potential uses for the site the proposed route would be to invite bids on either unconditional or more likely subject to planning permission with the responsibility of obtaining this resting with the selected tenderer. Prior to marketing it is recommended that planning advisors engage with the local authority and agree a planning report which sets out parameters for the future development of the site.

The detailed Disposal Strategy for Rookwood Hospital is attached for information.

The costs of progressing this disposal strategy are assessed at circa £155k and are detailed in Appendix 1. It is proposed that this is met by the Health Charity and reimbursed upon completion of the sale. The funds available for the future investments will be the capital receipt net any disposal costs.

If this disposal strategy is agreed, the intention is to start the disposal process in July 2019.

## ASSURANCE

Assurance is gained by:

- the specialist and technical support services being provided to support the sale of Rookwood Hospital and the strategy to maximise net capital receipts;
- Support from the Charitable Funds Committee for this disposal strategy.

## RECOMMENDATION

The Corporate Trustee of the Cardiff and Vale Health Charity is asked to:

- **AGREE** the disposal of the site following option 1 in the first instance and moving onto option 2 if that does not conclude in a purchase at the market rate, in a timely way.
- **AGREE** to the commencement of the disposal process in July 2019.

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### Shaping our Future Wellbeing Strategic Objectives

*This report should relate to at least one of the UHB's objectives, so please tick the box of the relevant objective(s) for this report*

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	
2. Deliver outcomes that matter to people	x	7. Be a great place to work and learn	
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us	x
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

### Five Ways of Working (Sustainable Development Principles) considered

*Please tick as relevant, click [here](#) for more information*

Prevention		Long term	x	Integration		Collaboration		Involvement	
<b>Equality and Health Impact Assessment Completed:</b>	Not Applicable								

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## Appendix 1

### Estimated Disposal Costs for Rookwood Hospital

Item	Budget Cost (excl VAT)	VAT	Comments
Marketing Agent	£ 30,000.0 0	£ 6,000.00	Based on sale at £6m.
Legal – disposal	£ 20,000.0 0	£ 4,000.00	Variable depending on negotiations
SI (intrusive)	£ 20,000.0 0	£ 4,000.00	
Planning Advisor	£ 20,000.0 0	£ 4,000.00	
Ecology – bat surveys	£ 5,000.0 0	£ 1,000.00	Allowance for update to previous.
Listed building structural reports	£ 5,000.0 0	£ 1,000.00	
Marketing - Aerial photographs, Brochures etc	£ 5,000.0 0		
Traffic survey	£ 5,000.0 0	£ 1,000.00	
Valuation	£ 5,000.0 0	£ 1,000.00	
Drainage – foul & surface water	£ 4,000.0 0	£ 800.00	
Marketing Agent - Fixed Consultancy Fee	£ 3,000.0 0	£ 600.00	
Planning Report	£ 3,000.0 0	£ 600.00	
Utilities Report	£ 2,000.0 0	£ 400.00	
Topographical Survey	£ 1,000.0 0	£ 200.00	Allowance for update to previous.
Tree survey	£ 1,000.0 0	£ 200.00	Allowance for update to previous.
Legal – report on title	£ -	£ -	Previously provided.
Asbestos Report			UHB to provide
Floor Plans			UHB to provide

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£ 129 £ 2  
,000.00 4,800.00

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## Disposal Strategy

Land and buildings at Rookwood Hospital, Llandaff, Cardiff

Prepared on Behalf of

The Rookwood Hospital Charity and Cardiff & Vale UHB

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**APPENDIX 1 - SITE PLAN**

**APPENDIX 2 – INDICATIVE DISPOSAL PROGRAMMES**

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## 1. INTRODUCTION

Savills were appointed by Cardiff & Vale University Health Board (the UHB) in October 2011 as property agent in contemplation of declaring part of the Rookwood Hospital site surplus to requirements and implementing a sale for development purposes.

For a variety of reasons, that process was delayed but a business case has since been approved and works commenced to enable the relocation of neuro and spinal rehabilitation services to a new unit at University Hospital Llandough (UHL).

As a result, it is expected that patients will transfer to UHL during 2020 meaning that a significant element of Rookwood Hospital will become vacant during the early part of 2021 and this report considers an appropriate disposal strategy, setting out the next steps required to bring the site forward for ultimate disposal with timescales aligned to closure of the facility in order to limit (or avoid entirely) void cost liabilities.

## 2. THE SITE

The extent of the Rookwood Hospital site is shown edged red, blue and green on the plan attached in **Appendix 1**. The gross area within the red line is 4.26 hectares (10.53 acres). The area shaded red indicates the approximate extent of surplus land currently identified for disposal. This area measures approximately 3.26 hectares (8.06 acres) but could be subject to further amendment.

The surplus area can be divided into three distinct elements. Firstly, the southernmost portion of the site features a range of low rise purpose-built accommodation, some of which comprise interconnected buildings used for operational purposes. Secondly, Rookwood House comprises a substantial former private residence which has been adapted, converted and extended to provide mainly office accommodation. To the rear of this building is a range of further purpose-built surplus accommodation. Thirdly, the gardens which lie to the west of Rookwood House comprise an area of lawns and woodland within which is a dilapidated summer house and underground vaulted chamber.

The site has extensive frontage to Fairwater Road which is a principal thoroughfare leading from the centre of Llandaff Village. The surplus part of the site is generally level, however, it rises from grade as its eastern end and there is approximately a 2 metre difference in level between Fairwater Road and the site at its western end.

Principal access to the hospital site adjoins the former lodge along the eastern boundary. This roadway currently provides access to most of the buildings on the surplus site and encloses Rookwood House providing access to various car parks. It also provides access to the retained part of the site. At the western edge of the Rookwood site there is a secondary access off Fairwater Road.

Rookwood House is principally a two storey building; however, part of the rear wing has accommodation in the roof void. The building is a Grade II listed structure and features original architectural detail both internally and externally. The aforementioned summer house and vaulted chamber below is also Grade II listed. The whole of the area designated for disposal is included within the register of landscapes parks and gardens of historic interest in Wales (Grade II).

The surplus area features a significant number of substantial mature trees covered by a Tree Preservation Order. Other ecological constraints are the likely presence of bats and nesting birds.

Property surrounding the majority of the site is predominantly residential detached and semi-detached high value private housing. Immediately to the north of the Rookwood site are the grounds of the BBC Cymru Wales administration block and adjoining Cardiff Metropolitan University (formerly UWIC) halls of residence. BBC have agreed a sale of the their administration facilities, to

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Taylor Wimpey for residential development on vacant possession being available, which is expected by the end of 2019/early 2020.

### 3. PLANNING CONTEXT

The Rookwood Hospital site comprises previously developed, or “brownfield” land lying within the built-up area and is sustainably located for public transport and access to community facilities and local services. Although the site is not located within the Llandaff Conservation Area, it has a number of environmental constraints including:

- two listed buildings (Grade II): Rookwood House and the summerhouse and underground vaulted chamber, the latter being seriously dilapidated;
- the site’s inclusion in Cadw’s non-statutory *Register of Landscapes, Parks and Gardens of Special Historic Interest in Wales* (Grade II);
- the existence of a large number of trees, groups of trees and an area of woodland which are statutorily protected by Tree Preservation Orders;
- the presence of bats (all species of which are statutorily protected) and breeding birds.

The site is identified as a Non-Strategic Hosing Site with an estimated capacity of 90 units within the Cardiff Local Development Plan (LDP) which was adopted in January 2016 and as such there is policy support for residential redevelopment, but any planning application for residential development will need to carefully consider the following:

- landscape;
- open space;
- listed buildings;
- nature conservation;
- trees; and
- traffic generation.

Overall, there are considered to be very good prospects of securing planning permission for residential development (and a range of other potential uses for conversion of the main house) on the site. It is a very sustainable location for new residential development and presents an outstanding opportunity to create a quality environment. However, given the significant environmental constraints, the local planning authority will expect an application for planning permission to present a clear, compelling strategy as to why permission should be granted. Key to this will be proposals:

- to secure the future well-being of the listed buildings;
- to retain and manage the historic garden and protected trees; and
- to create a quality residential scheme.

### 4. DISPOSAL STRATEGY

#### 4.1 Disposal Strategy

The Rookwood Hospital site is situated in a prime residential area of the city of Cardiff where end sales values are some of the highest in South Wales.

Development opportunities of this quality in this part of Cardiff are limited and historic infill developments has featured larger executive housing, examples of which are found along Fairwater Road and indeed adjoining the western boundary of the site (Llandaff Chase). The most recent new-build developments in Llandaff Village have been undertaken by retirement operators on two adjoining sites on Cardiff Road and we understand that there remains a desire from this type of

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operator to provide extra-care or retirement accommodation in this location, many of which pay a premium above residential land values. Other nearby development worthy of comment are the redevelopment of Churchill Hotel (Portabella) and Penhill Bowls Club (Waterstone Homes), both of which have delivered new executive style housing.

Rookwood House is a listed structure and as such it is likely that the planning authority will (subject to detailed design criteria) support its conversion to a number of residential units within the existing structure, possibly with some new-build additions. This sort of development opportunity tends to attract specialist operators rather than volume housebuilders as the latter specialise only in new-build accommodation. In addition to the residential potential, we would not rule out demand for the building for some form of commercial use such as education, childcare, hotel or the provision of consulting rooms associated with a healthcare operation.

Overall, we expect strong levels of demand for this development opportunity from PLC and regional housebuilders, retirement and care operators, local high net worth investors and potentially a range of non-residential developers for the main house (such as a care home, children's crèche or boutique hotel use). As such, the disposal strategy needs to consider alternative disposal options that could maximise the development potential and capital receipt.

In order to do so, we would recommend a two stage disposal process which firstly invites expressions of interest for the property from a wide market audience with a variety of end uses. We would recommend that at this stage, the property is identified as capable of being lotted, so that developers have the opportunity to express interest in either specific parts such as (i) the main house, (ii) a smaller development parcel suitable for retirement use, or the whole. This will enable us to establish the full level of interest in the property and structure a sale which maximises value by producing a comprehensive development of the site with the highest end use value, assuming that there are good prospects of obtaining an appropriate planning permission for the proposed uses.

The second stage of the process would entail a competitive informal tender process inviting those selected from the Stage 1 process to submit detailed development proposals along with their financial bid for consideration and selection of a preferred party/ies.

In order to ensure that robust bids are received and to limit the amount of bid conditionality we recommend that a comprehensive information pack is produced at bid stage, to include:-

- Site Plan
- Title Report
- Topographical Survey
- Tree Condition Survey and Plan
- Asbestos Report
- Existing Floor Plans
- Intrusive Site Investigation incl. porosity testing and foundation solution
- Ecology Survey (incl. Bat Survey)
- Structural Report on summerhouse and Listed building
- Traffic Survey
- Drainage and Utilities Report
- Demolition Quotes
- Planning Report (see section 4.2)

Assuming the programme as set out in Section 5, we see no material advantage in the UHB demolishing buildings prior to sale. To some degree it will be safer for these to remain in place until planning permission is secured for the proposed re-development, with permission for the demolition forming part of the developers planning submission.

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#### 4.2 Planning Strategy

The property now benefits from a non-strategic housing allocation in the LDP and as such, there is in principal support for residential development at the site. However, the environmental and heritage constraints will strongly influence the form and capacity of development.

Given the presence of listed buildings which will form part of the proposed development, it is expected that a full or at least hybrid planning application would need to be submitted along with Listed Building consent for works to Rookwood House and the dilapidated summerhouse and for the demolition of the curtilage listed buildings (those built before 1 July 1948), regardless of their apparent lack of architectural or historic merit.

However, given the range of uses and form of development that could take place on the site, and the relative time (and money) incurred in submitting and supporting the planning process, we consider the most appropriate route would be to invite bids on either an un-conditional or (more likely) a subject to planning basis, whereby the responsibility for obtaining planning permission and listed building consent would rest with the selected tenderer. In assessing tenders, consideration would need to be given not only to the financial offers received but also to the likelihood of the tenderer's proposals being granted planning permission. The contract with the successful tenderer would need to include provisions to enable the UHB's advisers to be consulted on the tenderer's planning strategy and its implementation.

Prior to marketing, however, we would recommend that planning advisors engage with the local planning authority (LPA) and prepare a planning report which sets out parameters for the future development of the site in terms of uses, constraints, access, height, developable area and capacity and impact on the Listed Building and gardens which can be provided to interested parties as part of the information pack in order to guide proposals and enable the consultant team to consider the appropriateness of any proposed development.

We would recommend that as part of the planning consultation with the LPA an EIA screening opinion is made at an early stage in the process to establish whether the local planning authority would require the planning application to be accompanied by an EIA. If this is the case, we will need to consider a revision to the programme below.

#### 5. DISPOSAL PROGRAMME

We have considered the timescales required in order to implement the strategy as set out above and have enclosed at **Appendix 2** an indicative programme which aims to align with the proposed vacant possession timescale anticipated for early 2021.

As can be seen from the programme, there is sufficient time between now and the vacant possession date to procure a suitable development partner/s and for them to obtain planning permission for their proposed development ensuring that risks, maintenance liabilities and costs incurred in holding the building post vacant possession are minimised, or at best eliminated completely, but there is very little headroom in the programme and should planning permission be refused and an appeal required, this would pose a risk to the programme with completion likely to be delayed by potentially up to twelve months.

Should planning permission be granted prior to the vacant possession date, the contract will provide for a delayed completion until such time as the UHB are able to deliver vacant possession.

It is recommended that progress is made swiftly in order to adhere to the identified programme.

#### BUDGET COSTS TO PROGRESS DISPOSAL STRATEGY

We have set out below budget costs that are required in order to implement the disposal strategy referred to above. These budget estimates do not include the professional fees of WYG Planning

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and Design, Savills (UK) Ltd or the UHB's legal advisors costs associated with the disposal, which have been dealt with in separate submissions of appointment.

A number of surveys have already been procured, so the table below sets out the estimate costs going forward and not the costs to date.

Costs Relating to the Marketing and Disposal of the Site		
Item of Expenditure	Estimated Cost (£)	
Topographical Survey	1,000	Previously procured. Budget sum allowed in the event that updates are required.
Tree Survey	1,000	Previously procured. Budget sum allowed in the event that updates are required.
Site Investigation	20,000	
Report on Title		Previously provided
Ecology (incl. Bat Survey)	5,000	Previously procured but updates required.
Listed Building Structural Report	5,000	Reports provided previously. Budget sum provided in the event of additional work required.
Traffic Survey	5,000	
Drainage Report	4,000	
Utilities Report	2,000	
Asbestos Report	Nil	To be provided by UHB
Floor Plans	Nil	To be provided by UHB
Planning Report	3,000	
Aerial Photographs/ Brochures/Adverts	5,000	
<b>TOTAL</b>	<b>51,000</b>	

The approximate overall costs amount to approximately £51,000. However we would suggest the allowance of a contingency to cater for any unexpected requirements that are either required by the LPA or additional works which may flow from results of some of the technical survey work that is undertaken and therefore, we would suggest an allowance in the order of £60,000.

## 7. RECOMMENDATIONS

Now that there is certainty of delivering vacant possession in agreed timescales, the extent and form of final development (including the variety of uses) is not known and the time period between now and vacant possession is relatively constrained, we would recommend that the UHB offer the property to the market with a comprehensive information pack on an unconditional or subject to planning basis as described within this report.

This will enable maximum flexibility and exposure of the property to the market and should shorten the planning programme slightly, when compared with the scenario of the LHB submitting their own hybrid application followed by developer reserved matters applications (and potentially a fresh full application on the house).

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Our proposed two stage marketing campaign will help to ensure that capital receipts are maximised, and in doing so approval is required for the expenditure as set out in section 6 relating to the marketing and disposal of the site which will enable the consultants to procure the necessary technical and survey work to bring the property to market, commencing in July 2019, in accordance with the programme.

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# APPENDIX 1

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## APPENDIX 2

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ROOKWOOD HOSPITAL - SUBJECT TO PLANNING DISPOSAL

								2020												2021			
	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	
Preparation and update to Technical Information	Yellow	Yellow																					
Preparation of Planning Report & Marketing Collateral	Yellow	Yellow																					
Expressions of Interest Stage			Yellow	Yellow																			
Second Stage Marketing Campaign					Yellow	Yellow																	
Appoint Selected Developer(s)						Yellow																	
Legal							Yellow	Yellow	Yellow														
Exchange of Conditional Contracts										Yellow													
Developer Planning Period											Yellow												
Completion (Following receipt of planning)																							Yellow

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Note: Programme assumes that permission is granted at committee and therefore an appeal is not required. If permission is refused, an appeal could add a further 12 months to the programme.

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# Report & Valuation

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Rookwood Hospital, Fairwater Road, Llandaff,  
Cardiff, CF5 2YN

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28 February 2019

Ref: 434618

Cardiff & Vale University Health Board  
University Hospital of Wales  
Heath Park  
Cardiff  
CF14 4XW

For the attention of Jonathan Nettleton

Dear Jonathan,

**PROPERTY: ROOKWOOD HOSPITAL, FAIRWATER ROAD, LLANDAFF, CARDIFF, CF5 2YN**

In accordance with the instructions contained in your email to us dated 16 January 2019, as confirmed in our letter to you dated 25 January 2019, we have inspected the property and made such enquiries as are sufficient to provide you with our opinion of value on the basis stated below. Copies of your instruction letter and of our letter of confirmation are enclosed at **Appendix 1**.

We draw your attention to our accompanying Report together with the General Assumptions and Conditions upon which our Valuation has been prepared, details of which are provided at the rear of our report.

We trust that our report meets your requirements, however should you have any queries, please do not hesitate to contact us.

Yours faithfully

For and on behalf of Savills (UK) Limited

**Scott Caldwell MRICS**  
RICS Registered Valuer  
Director

**Andrew Weeks MRICS**  
RICS Registered Valuer  
Associate Director

**Abbey Bennett MRICS**  
Surveyor

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Offices and associates throughout the Americas, Europe, Asia Pacific, Africa and the Middle East.

Savills (UK) Limited. Chartered Surveyors. Regulated by RICS. A subsidiary of Savills plc. Registered in England No. 2605138.  
Registered office: 33 Margaret Street, London, W1G 0JD

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### Appendices

Appendix 1 – Confirmation of Instruction Letter

Appendix 2 – Site Plan

Appendix 3 – Property Market Overview

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## Executive Summary

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# Report & Valuation

Rookwood Hospital, Fairwater Road, Llandaff, Cardiff, CF5 2YN



## Background and Proposal

Cardiff and Vale University Health Board (the Health Board) are considering declaring part of the property as surplus to requirements and are therefore looking to internally apportion for accounts purposes value between the elements of the property it proposes to retain and those which it is considering declaring surplus.

## Property Overview

The property extends to a total gross area of 10.53 acres (4.26 hectares). The property is irregular in shape and generally level, albeit, the site rises in gradient from east to west with an approximate split level of 2m between Fairwater Road and the site at its western end. There are two access points along the southern boundary of the site via Fairwater Road; the access at the eastern side being the primary access.

The property is valued in three elements as described fully within the report but in summary as follows:

- Site 1: Rookwood Lodge - Building at the entrance to the site on a plot of approximately 0.30 acres (0.122 hectares).
- Site 2: Artificial Limb & Appliance Centre – A single storey red brick building on a site of 2.17 acres (0.88 hectares) located in the north eastern corner of the overall site.
- Site 3: Rookwood House, Former Stables and Southern Area of Site on a total site of 8.06 acres (3.26 hectares).

## Tenure

Assumed unencumbered freehold with vacant possession.

## SWOT Analysis

Strengths	Opportunities
<ul style="list-style-type: none"><li>▪ High value residential location.</li><li>▪ Close proximity to transport links.</li><li>▪ Close proximity to local facilities and services.</li></ul>	<ul style="list-style-type: none"><li>▪ Allocated for approximately 90 units within the Local Development Plan.</li><li>▪ Clearance of unsightly buildings.</li><li>▪ Creating a viable new use for Grade II Listed Rookwood House.</li><li>▪ Enabling restoration of dilapidated Grade II Listed summer house.</li></ul>
Weaknesses	Threats
<ul style="list-style-type: none"><li>▪ Development of the property will maximise value.</li><li>▪ Environmental constraints which include TPO's, listed buildings and an historic park.</li></ul>	<ul style="list-style-type: none"><li>▪ Potential for extensive planning obligations.</li><li>▪ Costs associated with Listed Building requirements.</li><li>▪ Uncertainty in the market with Brexit.</li></ul>

## Principal Valuation Considerations

- Located in a prime suburb of Cardiff where there is a sustained demand for good quality housing;
- Assumed that ground conditions are suitable for development without significant abnormal costs being required;
- Anticipated that there will be good levels of demand for residential development land and new homes in this location;
- Anticipated that there will be a level of interest from care operators;
- Good re-development prospects given the site is brownfield and situated in a built up area.

## Approach to Valuation

In arriving at our opinion of Market Value, we have adopted the comparable method of valuation having considered the sale of other development sites within the area.

# Report & Valuation

Rookwood Hospital, Fairwater Road, Llandaff, Cardiff, CF5 2YN



## Valuations

No.	Map Key	Site	Market Value
1	Green	Rookwood Lodge	£600,000
2	Blue	Artificial Limb & Appliance Centre	£3,600,000
3	Red	Rookwood House, Former Stables and Southern Area of Site	£6,000,000
<b>Total:</b>			<b>£10,200,000</b>

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# Report & Valuation

Rookwood Hospital, Fairwater Road, Llandaff, Cardiff, CF5 2YN

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## 1. Instructions and Terms of Reference

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# Report & Valuation

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# Report & Valuation

Rookwood Hospital, Fairwater Road, Llandaff, Cardiff, CF5 2YN



## 1.1. Instructions

### 1.1.1. Instructions and Basis Of Valuation

You have instructed us to provide our opinions of value on the following basis:

- The Market Value of the freehold interest subject to full vacant possession ("Market Value").

### 1.1.2. General Assumptions and Conditions

All our valuations have been carried out on the basis of the General Assumptions and Conditions set out in the relevant section towards the rear of this report.

### 1.1.3. Date of Valuation

Our opinions of value are as at the date of this report, 28 February 2019. The importance of the date of valuation must be stressed as property values can change over a relatively short period.

### 1.1.4. Definition of Market Value

In undertaking our valuations, we have adopted the RICS definition of Market Value, as detailed below:

Valuation Standard VPS 4 1.2 of the Red Book defines Market Value (MV) as:

"The estimated amount for which an asset or liability should exchange on the valuation date between a willing buyer and a willing seller in an arm's length transaction, after proper marketing and where the parties had each acted knowledgeably, prudently and without compulsion."

### 1.1.5. Purpose of Valuations

You instruct us that our valuations are required for internal purposes.

### 1.1.6. Conflicts of Interest

As you are aware we were appointed as the selling agent for the property in October 2011. For the purpose of this valuation we will be acting as External Valuers and will be providing you with an independent valuation.

### 1.1.7. Valuer Details and Inspection

The due diligence enquiries referred to below were undertaken by Scott Caldwell MRICS and Abbey Bennett MRICS. The valuations have also been reviewed by Andrew Weeks MRICS and Gareth Carter.

The property was inspected on 18 February 2019 by Scott Caldwell MRICS and Abbey Bennett MRICS. We were able to inspect the whole of the property, both externally and internally, but limited to those areas that were easily accessible or visible. The weather on the date of our inspection was cloudy.



Scott Caldwell MRICS and Andrew Weeks MRICS are also RICS Registered Valuers. Furthermore, in accordance with VPS 3.7, we confirm that the aforementioned individuals have sufficient current local, national and international (as appropriate) knowledge of the particular market and the skills and understanding to undertake the valuation competently.

## 1.1.8. Extent of Due Diligence Enquiries and Information Sources

The extent of the due diligence enquiries we have undertaken and the sources of the information we have relied upon for the purpose of our valuation are stated in the relevant sections of our report below.

Where reports and other information have been provided, we summarise the relevant details in this report. We do not accept responsibility for any errors or omissions in the information and documentation provided to us, nor for any consequences that may flow from such errors and omissions.

## 1.1.9. Liability Cap

Our letter confirming instructions at **Appendix 1** includes details of any liability cap.

## 1.1.10. RICS Compliance

This report has been prepared in accordance with Royal Institution of Chartered Surveyors' ("RICS") Valuation – Global Standards 2017 incorporating the IVSC International Valuation Standards issued June 2017 and effective from 1 July 2017, and the RICS Valuation – Global Standards 2017 - UK national supplement issued 14 November 2018 and effective from 14 January 2019, together (the "RICS Red Book"), and in particular in accordance with the requirements of VPS 3 entitled Valuation reports and VPGA 2 Valuation of interests for secured lending, as appropriate.

Our report in accordance with those requirements is set out below.

## 1.1.11. Verification

This report contains many assumptions, some of a general and some of a specific nature. Our valuation is based upon certain information supplied to us by others. Some information we consider material may not have been provided to us. All of these matters are referred to in the relevant sections of this report.

We recommend that you satisfy yourself on all these points, either by verification of individual points or by judgement of the relevance of each particular point in the context of the purpose of our valuation. Our valuation should not be relied upon pending this verification process.

## 1.1.12. Confidentiality and Responsibility

Finally, in accordance with the recommendations of the RICS, we would state that this report is provided solely for the purpose stated above. It is confidential to and for the use only of the party to whom it is addressed, and no responsibility is accepted to any third party for the whole or any part of its contents. Any such parties rely upon this report at their own risk. Neither the whole nor any part of this report or any reference to it may be included now, or at any time in the future, in any published document, circular or statement, nor published, referred to or used in any way without our written approval of the form and context in which it may appear.

# Report & Valuation

Rookwood Hospital, Fairwater Road, Llandaff, Cardiff, CF5 2YN

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## 1.2. Background

Cardiff and Vale University Health Board (the Health Board) are considering declaring part of the property surplus to requirements and are therefore looking to internally apportion for accounts purposes value between the elements of the property it proposes to retain and those which it is considering declaring surplus.

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## 2. The Property, Statutory & Legal Aspects

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## 2.1. Location

The property is located in Llandaff, a suburb of Cardiff approximately 2.5 miles north-west of Cardiff city centre, and approximately 3 miles from Junction 32 of the M4 motorway.

Cardiff is the capital city of Wales and its main commercial and cultural centre, with a wide range of leisure, commercial and retail facilities. It is home to the Wales Millennium Centre, the Millennium Stadium, St David's Shopping Centre and the International Sports Village. Cardiff has excellent road links to the M4 at junction 33 from the west, junction 32 from the north and junctions 29 and 30 from the east. Cardiff Central railway station has rail services to London Paddington with journey times of just over 2 hours. Cardiff Wales Airport is approximately 12.5 miles (20.11 km) west of the city.

Cardiff has an urban population of 346,090 (2011 Census) and 682,767 within 21km of the centre. The city has a socio economic structure which is very typical of other UK cities, with the main employment sectors being other services (29.6%), banking, financial and business services (17.4%) and retail (15.9%).

We enclose below a General Location Map showing the location of Llandaff in its regional context.



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## 2.2. Situation

The property is located in Llandaff, an affluent suburb of Cardiff situated approximately 2.5 miles north-west of the city centre. Access to the property can be gained via Fairwater Road which is located to the south of the property.

The surrounding area to the property is primarily made up of low/ medium density housing. The former BBC Cymru headquarters offices are located to the north of the property where planning permission has been granted for 360 residential dwellings. Other surrounding uses include Llandaff Cathedral, Llandaff Primary School, Bishop of Llandaff High School and a number of public houses, all situated within 0.3 miles of the property.

The property benefits from good public transport with Fairwater railway station situated 0.5 miles from the property and a number of bus stops situated within close proximity.

We enclose below a plan showing the situation of the property.



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## 2.3. Description

The property extends to a total gross area of 10.53 acres (4.26 hectares). The property is irregular in shape and generally level, albeit, the site rises in gradient from east to west with an approximate split level of 2m between Fairwater Road and the site at its western end. There are two access points along the southern boundary of the site via Fairwater Road; the access at the eastern side being the primary access.

The extent of the property is shown as three separate parcels for the purposes of this valuation, edged red, green and blue, on that plan attached at **Appendix 2** and can be best described as follows:-

### **Site 1 (Green): Rookwood Lodge**

Rookwood Lodge is a two storey property of stone construction with Bath stone facings. The hipped roof is overlaid with clay tiles and features two chimneys. The property dates back to 19<sup>th</sup> Century when Rookwood House was built.

A single storey extension was built to the north of the lodge in the 1970s and this property is now used as a National Centre for Electronic Assistive Technology by the Health Board.

The gross area of this site is 0.30 acres (0.122 hectares).

### **Site 2 (Blue): Artificial Limb & Appliance Centre**

The Artificial Limb and Appliance Centre is a purpose built property of single storey brick construction under a pitched roof overlaid with clay tiles. There are two surface car parks to the east and south of this property; the southern car park provides access to a detached gymnasium hall. To the south of the gymnasium comprises tank, boiler and generator houses which service the hospital.

The gross area of this site is 2.17 acres (0.88 hectares).

### **Site 3 (Red): Rookwood House, Former Stables and Southern Area of Site**

Rookwood House is a Grade II Listed former private residence of stone construction with Bath stone facings, built in 1866. The property has been converted and extended to provide office accommodation for the hospital and is somewhat institutionalised. To the west of Rookwood House there are gardens comprising lawns and woodland within which is a dilapidated Grade II Listed summer house.

The southern area of the site is made up of a range of poor quality, low rise purpose-built hospital accommodation, some of which comprise interconnected buildings used for operational purposes.

The former stables comprises a detached property of stone construction with Bath stone facings. The property is currently used as an Engineer's Workshop. This property dates back to 19<sup>th</sup> Century when Rookwood House was built but is not identified in the listing.

The gross area of this site is 8.06 acres (3.26 hectares).

Photographs of the property taken on the date of our inspection are provided overleaf.

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Site Entrance off Fairwater Road



Rookwood Lodge and Adjoining Building



Gymnasium Building



Main Car Park



Artificial Limb & Appliance Centre



Dilapidated Summer House

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Rookwood House



Rookwood House



Southern Site Boundary



Road running parallel to Fairwater Road

## 2.3.1. Site Area

The site of the property is irregular in shape and is bounded by Cardiff Metropolitan University and the former BBC Wales Headquarters to the north, residential dwellings to the east and west and Fairwater Road to the south.

By reference to the plan below, we have been informed by the Health Board that the property has a total gross site area of 10.53 acres (4.26 hectares) which can be broken down as follows:

- Land edged red: 8.06 acres (3.26 hectares);
- Land edged blue: 2.17 acres (0.88 hectares);
- Land edged green: 0.30 acres (0.122 hectares).

We attach an Ordnance Survey extract provided by the Health Board overleaf and at **Appendix 2**.

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## 2.4. Existing Accommodation

Each of the buildings provide the following internal accommodation. These areas have been provided by the Health Board. We assume they are complete and correct, and are the gross internal floor areas measured in accordance with the RICS Property Measurement 2nd edition, published in January 2018, which updated the RICS Code of Measuring Practice 6th Edition.

Building	Floor	Sq Ft	Sq M
Rookwood House	Basement	363	33.7
	Ground	8,516	791.1
	First	5,676	527.3
	Second	1,395	129.6
		<b>15,950</b>	<b>1,481.7</b>
Rookwood Lodge	Ground	3,748	348.23
	First	346	32.19

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Building	Floor	Sq Ft	Sq M
		<b>4,094</b>	<b>380.42</b>
Works Department (former stables block)	Ground	2,085	193.67
	First	1,694	157.34
		<b>3,779</b>	<b>351.01</b>
Summer House (Dilapidated)	Ground	261.99	24.34
		<b>261.99</b>	<b>24.34</b>

## 2.5. Condition

As instructed, we have not carried out a structural survey, nor have we tested any of the services. However, we would comment, without liability, that during the course of our inspection for valuation purposes, we observed that some of the buildings appear to be in poor condition, whereas others were in fair condition. During the course of our inspection we noted that repair works were being undertaken to the roof covering of the main house.

## 2.6. Environmental Considerations

### 2.6.1. Informal Enquiries

As instructed, we have not carried out a soil test or an environmental audit on the site in relation to the potential presence of contamination, albeit we expect that the hospital is constructed on made ground and that asbestos is present in underground pipework etc. There is potentially the possibility of contamination hotspots across the site.

We would stress that we have not carried out, nor are we qualified to carry out an Environmental Audit. We would recommend for an Environmental Audit to be undertaken to gain a better understanding the extent of any contamination on site.

### 2.6.2. Assumption

We have valued the property on the basis that there is the potential for contamination at the site but should it be established that significant land contamination exists at the property, or on any neighbouring land, then we would wish to review our valuation advice.

### 2.6.3. Flooding

We have made enquires with regard to potential flooding at the Natural Resources Wales website, [www.naturalresources.wales](http://www.naturalresources.wales) and note that the property is located in an area considered to be at little or no risk of fluvial or coastal/ tidal flooding.

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## 2.7. Town Planning

### 2.7.1. Statutory Background

We have made informal enquiries of the local planning authority, Cardiff City Council, who inform us that the statutory plan covering planning policy and development control for the area is the Cardiff Local Development Plan (LDP), which was adopted in January 2016.

The property is identified within the LDP as a non-strategic housing site (Site Ref: H1.3), allocated for approximately 90 units. The property is not stated to be located within a conservation area albeit there are a number of environmental constraints associated with the site which include the following:

- Two listed buildings (Grade II): Rookwood House and the summerhouse and underground vaulted chamber, the latter being seriously dilapidated;
- The site's inclusion in Cadw's non-statutory Register of Landscapes, Parks and Gardens of Special Historic Interest in Wales (Grade II);
- The existence of a large number of trees, groups of trees and an area of woodland which are statutorily protected by Tree Preservation Orders;
- The presence of bats (all species of which are statutorily protected) and breeding birds.

### 2.7.2. Planning History

Planning decisions relating to the property revealed by our enquiries are as follows:

Application No	Description of Development	Date of Decision	Decision
99/00872/W	To provide additional car parking space and covered parking area for disabled drivers assessment	13-07-1999	Permission
13/00940/DCO	Construction of new footpath	10-07-2013	Permission
18/02058/MNR	Restoration and repair works to roof and internal roof structure	14-12-2018	Permission

### 2.7.3. Summary

In valuing the property we have assumed that the buildings are used in accordance with their present lawful uses and that the buildings comply with current planning laws and building regulations and that they are not subject to any adverse proposals or possible enforcement actions. However, our valuations are predicated on the basis of the property's redevelopment.

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## 2.8. Taxation

### 2.8.1. Rates

From informal enquiries of the Valuation Office Agency Internet Rating List [www.voa.gov.uk](http://www.voa.gov.uk), we understand that the following entry appears on the 2017 Valuation List:

Property Address	Description	Rateable Value
Rookwood Hospital, Fairwater Road, Cardiff, CF5 2YN	Hospital and premises	£142,000
	Total	£142,000

The Uniform Business Rate in Wales for 2018/19 financial year is 0.514 pence in the pound. We calculate that the rates currently payable are £72,988 excluding any transitional or other relief.

### 2.8.2. VAT

Our valuation is exclusive of VAT.

## 2.9. Tenure

The property is registered at the Land Registry under title number CYM505439, with the registered proprietors stated as Cardiff and Vale University Local Health Board.

We have not been provided with a report on title and have not seen a copy of the title deeds. We have assumed that full rights of access are enjoyed and that no third parties enjoy any rights over the property. Your solicitors should confirm that there are no onerous restrictions or obligations as part of the due diligence process.

It is assumed for valuation purposes that the property is not subject to any unusual or onerous covenants that are likely to affect the valuations herein provided.

We would strongly advise that your legal advisors confirm our understanding to be correct and to ensure that there are no further elements, restrictions or charges contained that are likely to have a detrimental effect upon the valuations as herein reported. We reserve the right to revise our valuation should it subsequently emerge our assumptions relating to the legal title are incorrect.

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## 3. Market Commentary

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## 3.0. Property Market Overview

We enclose a Property Market Overview at **Appendix 3**.

## 3.1. Healthcare Market

The health and care services that we require have changed dramatically over the last 50 years. We live longer, our population is larger and as medicine has advanced our healthcare needs have evolved. Reforming health and care to match these needs will be all the more difficult in an era of constrained public finances. Combined local authority and NHS capacity has now fallen to 6.5% of total supply. With public sector unit costs running at double or more the independent sector equivalent, the public sector share of provision is expected to decline even further in the future.

In the recent years, there has been a shift in focus by the NHS, who are slowing moving investment from the secondary care and hospital sector to primary and community care facilities.

The Healthcare Intelligence Specialists, Laing and Buisson, reported that the UK's total expenditure on healthcare in 2017 totalled £192 billion, up 3.6% on the 2015 total. It was forecast that this expenditure would rise by £20 billion in 2018.

In October 2018 Laing and Buisson released a Healthcare Construction UK Market Report. The report advised that the government have announced a forward pipeline of approximately £5.7 billion worth of healthcare capital projects taking place between now and 2020 and beyond. There are around 597 individual health projects under almost 700 schemes with a combined value of circa £5.7 billion.

## 3.2. RICS Housing Market Survey

House prices dropped 0.7% in December according to Nationwide. That surprisingly weak performance coincided with raised political uncertainty leaving annual house price growth at 0.5% for 2018, marginally undershooting their forecast of 1.0%. Annual growth varied across the regions: it was strongest in the East Midlands at 4.0%, followed by Wales at 3.9% and Yorkshire & the Humber at 3.7%. After a long period of outperformance that has left affordability constrained, London has fared the worst, with values down 2.2% since the start of the year. Wales was the strongest performer in Q4, whilst the East and West Midlands slowed. This is in line with their forecast that house price growth in Wales and the North will overtake the Midlands over the next two years.

Although house price growth was weaker than expected at the end of 2018, transaction volumes appear to have stabilised across all regions in October. That stability continued into November at a national level, according to data from HMRC. But new instructions and enquiries both continued to fall in December, according to the RICS survey. They reached their lowest levels since the immediate aftermath of the Brexit vote.

Brexit is the most cited cause (according to the RICS survey) for reduced activity, and housing market uncertainty is likely to continue until some clarity emerges.

The southern Welsh districts of Torfaen, Newport and Caerphilly saw the strongest house price growth, all up approximately 10% during the year to October 2018. London continued to struggle, with the largest falls in Westminster, Hammersmith & Fulham and Camden, of -9.0%, -5.2% and -4.8% respectively.

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### 3.3. Local Market Summary

According to the most recent Land Registry House Price Index, annual growth in Cardiff was 4.02%, lower than the average rise for Wales of 5.48%. The Land Registry average house price in Cardiff in November 2018 was £207,976, showing a -0.32% price drop from the previous month. The average price of a detached house in Cardiff was £388,201 in November 2018, having grown 4.58% from the previous year where the average price was £371,212.

The majority of sales in Llandaff during the last year were semi-detached properties, selling for an average price of £316,242. Terraced properties sold for an average of £224,458, with flats fetching £186,599. Llandaff, with an overall average price of £293,438, was similar in terms of sold prices to nearby Danescourt (£298,572), but was more expensive than Llandaff North (£237,698) and Fairwater (£177,044).

### 3.4. Sales Transactions

In reaching our opinion of value for the property we have had regard to a number of sales of comparable properties for both development land and completed units in the vicinity and discussions with both our own agents and local agents.

We have highlighted comparable sales and made adjustments to the comparable evidence to reflect the individual characteristics of each property, including: location, size, outside space and condition.

Our valuation is based on market evidence which has come into our possession from numerous sources. That from other agents and valuers is given in good faith but without liability. It is often provided in verbal form. Some comes from databases such as the Land Registry or computer databases to which Savills subscribes. In all cases, other than where we have had a direct involvement with the transactions, we are unable to warrant that the information on which we have relied is correct although we believe it to be so.

#### 3.4.1. Comparable Evidence

##### The Rise, Penhill Road, Pontcanna



This 0.61 acre brownfield site with detached 19<sup>th</sup> Century villa extending to 10,990 sq ft sold at auction for £1,600,000 in October 2017, reflecting £2,622,951 per acre and £145.59 per sq ft. The site has since been cleared and planning permission granted for the development of 8 no. five storey townhouses, 1 no. detached house and 4 no. semi-detached houses.

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## The Orchards, Llanishen



This 2.06 acre brownfield site sold for £3,800,000 in March 2017, reflecting £1,844,660 per acre. The property was bought by McCarthy & Stone and has since been developed as a Later Living scheme and Assisted Living Complex.

## Suffolk House, Llandaff Road/ Romilly Road, Canton



This 0.67 acre brownfield site with three storey detached locally listed building extending to 5,387 sq ft sold for £800,000 in February 2017, reflecting £1,194,030 per acre and £148.51 per sq ft. Since the sale a planning application has been submitted for part demolition of modern extensions to Suffolk House and re-development to provide 10 no. apartments and construction of 7 no. townhouses.

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## Lozelles, Church Road, Lisvane



The site extending to 0.89 acres with outline planning permission for 3 detached plots whilst retaining the existing residence. The site sold for £1,425,000 in June 2016, reflecting £1,600,000 per acre. The site has since received full planning permission in February 2018 for a development of 2 houses and 11 self-contained apartments. The S106 agreement obligations equal £257,187.

## Land Between 3 and 5 The Avenue, Llandaff



This greenfield site adjoining the property extending to 0.40 acres sold for £700,000 in February 2015, reflecting £1,750,000 per acre. The site has since been developed and comprises 1 no. detached and 2 no. semi-detached new build houses.

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## Former BBC Wales Headquarters, Llantrisant Road, Llandaff



This brownfield site adjoining the property and extending to 17.45 acres (gross)/ 11.7 acres (net) formed as two separate parcels sold on a subject to planning and vacant possession basis for £20,050,000 in 2014, reflecting £1,148,997 per gross acre and £1,713,675 per net acre. The site is proposed for 360 dwellings, 20% of which will be on site affordable units. The BBC have yet to provide vacant possession which is anticipated at the end of 2019/ early 2020. We understand that terms of purchase require a revaluation 3 months prior to legal completion

## Churchills Hotel, Cardiff Road, Llandaff



This Grade II Listed 23-bed hotel building and row of cottages offering 9 additional rooms occupying a 0.96 acre site sold for £2,400,000 in June 2015, reflecting £2,500,000 per acre. The site has since been redeveloped, converting the main hotel building into a pair of semi-detached houses, cottages demolished and 7 no. new dwellings built in the grounds of the hotel.

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## Trenewydd, 5 Fairwater Road, Llandaff



This detached property extending to 7,728 sq ft formerly used as offices by the Health Board occupying a 0.30 acre site sold for £650,000 in March 2014, reflecting £2,166,667 per acre and £84.11 per sq ft. The property has since gained planning permission for re-development into a 5-bed residential dwelling.

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## 4. Valuation Advice

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## 4.1. Principal Valuation Considerations

The principal matters that impact on the value of the property are as follows:

### 4.1.1. Location and Situation

The property is in a prime north Cardiff suburb where house prices are higher than the Cardiff average and where there is a sustained demand for good quality housing.

### 4.1.2. Planning

The property does not benefit from planning permission for re-development. However the site is allocated within the Local Development Plan as a non-strategic housing site for approximately 90 units. In arriving at our valuation, we have assumed that planning permission will be forthcoming in a suitable form. Our valuation does not allow any discount to reflect an unconditional sale without planning, but instead assumes that the Health Board would dispose of the property on a subject to planning basis.

### 4.1.3. Environmental Considerations

There are a number of environmental constraints associated with the site which include the presence of two Listed Buildings, a large number of Tree Protection Orders, bats and breeding birds and the inclusion in Cadw's non-statutory Register of Landscapes, Parks and Gardens of Special Historic Interest in Wales (Grade II).

### 4.1.4. Potential Contamination

The property is a brownfield site and it is therefore possible that land contamination exists. We recommend that further investigation is undertaken to establish this position but our valuation assumes, in the absence of this information, that ground conditions are suitable for development without any significant abnormal costs being required. We have made allowances for demolition within our valuations where we consider this is likely to enable redevelopment.

### 4.1.5. Tenure

The property is held freehold and is occupied by the freeholder, Cardiff & Vale UHB. Our valuations assume that good freehold title is available for the property, that rights for access are available and that there are no onerous restrictions or obligations on title.

### 4.1.6. Market

Given that Llandaff is considered a desirable residential suburb, we expect the continuation of good levels of demand for residential development land and new homes in this location. We also anticipate that there will be a level of interest from care and retirement operators. The listed building could potentially be utilised for a variety of uses including the conversion to residential, institutional use, hotel and/or restaurant.

## 4.2. Approach To Valuation

We have valued the three distinct elements of the site, as shown on the plan at **Appendix 2**, in isolation of one another to arrive at our opinion of value for the property as a whole.

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We have considered the sale of development sites within the area. Each development site has its own peculiarities and different development difficulties. We have therefore adjusted and analysed our comparables to reflect these differences. The comparables show a wide range in values demonstrating the importance of understanding the location, proposed development, costs and marketing of individual development sites.

We provide a summary of our valuation methodology for the three distinct sites as follows:

## **Site 1 (Green): Rookwood Lodge**

In arriving at our opinion of value for the area shaded green on the site plan we have adopted the comparable method of valuation. We have applied a value of £600,000 to this site which reflects £1,714,286 per acre and £147 per sq ft. Our opinion of value is supported by the following comparable evidence.

The sale of the land between 3 and 5 The Avenue proved a useful comparable as it is located within close proximity to Rookwood Lodge and had a similar site area extending to 0.40 acres. The property sold for £700,000 in February 2015, reflecting £1,750,000 per acre. The sale of The Rise on Penhill Road also proved a useful comparable. The property sold for £1,600,000 in October 2017, reflected £146 per sq ft.

## **Site 2 (Blue): Artificial Limb & Appliance Centre**

In arriving at our opinion of value for the area shaded blue on the site plan we have adopted the comparable method of valuation. We have assumed a net developable area in the order of 2 acres and applied a value of £3,600,000 to this site which reflects £1,800,000 per net acre. Our opinion of value is supported by the following comparable evidence.

The sale of The Orchards in Llanishen proved a useful comparable as the site had a similar site area to the subject property, extending to 2.06 acres. The property sold for £3,800,000 in March 2017, reflecting £1,844,660 per acre. The property has been re-developed for care and retirement living which is potentially an appropriate use for the future development of the subject site.

## **Site 3 (Red): Rookwood House, Former Stables and Southern Area of Site**

In arriving at our opinion of value for the area shaded red on the site plan we have adopted the comparable method of valuation. We have assessed the site in three parts; Rookwood House, the former stables (on the basis that there may be some pressure to retain this building) and the southern area of the site.

We have applied a value of £250,000 to the former stables part of the site which reflects £1,515,152 per acre. The sale of the land between 3 and 5 The Avenue proved a useful comparable for this part of the site as it is located within close proximity. The property sold for £700,000 in February 2015, reflecting £1,750,000 per acre, albeit the site of the former stables is slightly more constrained and as such we have applied a slightly lower pro-rata value.

We have applied a value of £500,000 to Rookwood House and the land lying to the west. This is a unique asset which makes it more difficult to make direct comparisons with. Suffolk House is our most useful comparable in terms of its location and the property is a locally listed building. The property sold for £800,000 in February 2017. It is possible that a sale of Rookwood House in isolation would achieve a higher value. However, in consideration of Site 3 as a whole we consider the most likely purchaser would be a housebuilder who would view Rookwood House as a constraint, and therefore we have adopted a more cautious approach to its valuation.

# Report & Valuation

Rookwood Hospital, Fairwater Road, Llandaff, Cardiff, CF5 2YN



We have assumed a net developable area of the southern area of the site of circa 4 acres and have applied a value of £5,300,000, reflecting £1,250,000 per acre. This takes into consideration costs associated with putting the summer house into repair estimated at £260,000, S106 and off-site affordable housing contributions, demolition and some abnormal costs. The sale of the former BBC Wales Headquarters proved a useful comparable due to its close proximity to the subject site. A sale was agreed in 2014 for £20,050,000, reflecting £1,713,675 per acre.

In addition, we are aware of serviced parcels on the Plasdwr strategic development site on the northern outskirts of Cardiff transacting at values equivalent to approximately £1,300,000 per net acre, which is helpful in understanding the tone of values that national housebuilder are paying for good quality mainstream housing sites in this location.

### 4.3. Valuation

Having carefully considered the property, as described in this report, we are of the opinion the current Market Value of the three elements of property with full vacant possession, and on the assumption that they are sold on a subject to planning basis is in the order of:

No.	Map Key	Site	Market Value
1	Green	Rookwood Lodge	£600,000
2	Blue	Artificial Limb & Appliance Centre	£3,600,000
3	Red	Rookwood House, Former Stables and Southern Area of Site	£6,000,000
<b>Total:</b>			<b>£10,200,000</b>

**£10,200,000**

**(TEN MILLION TWO HUNDRED THOUSAND POUNDS)**

We consider that a period of 18-24 months is a reasonable period within which to negotiate completion of a sale by private treaty of the property at the level of our valuation on a subject to planning basis, taking into account the nature of the property and the state of the market.

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07/23/2020 08:46:53

# Report & Valuation

Rookwood Hospital, Fairwater Road, Llandaff, Cardiff, CF5 2YN

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Tolley, Laura  
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## 5. General Assumptions & Conditions to Valuations

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# Report & Valuation

Rookwood Hospital, Fairwater Road, Llandaff, Cardiff, CF5 2YN

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## 5.1. General Assumptions and Conditions

### 5.1.1. General Assumptions

Unless otherwise stated in this report, our valuation has been carried out on the basis of the following General Assumptions. If any of them are subsequently found not to be valid, we may wish to review our valuation, as there may be an impact on it.

1. That the property is not subject to any unusual or especially onerous restrictions, encumbrances or outgoing contained in the Freehold Title. Should there be any mortgages or charges, we have assumed that the property would be sold free of them. We have not inspected the Title Deeds or Land Registry Certificate.
2. That we have been supplied with all information likely to have an effect on the value of the property, and that the information supplied to us and summarised in this report is both complete and correct.
3. That the building has been constructed and is used in accordance with all statutory and bye-law requirements, and that there are no breaches of planning control. Likewise, that any future construction or use will be lawful (other than those points referred to above).
4. That the property is not adversely affected, nor is likely to become adversely affected, by any highway, town planning or other schemes or proposals, and that there are no matters adversely affecting value that might be revealed by a local search, replies to usual enquiries, or by any statutory notice (other than those points referred to above).
5. That the building is structurally sound, and that there are no structural, latent or other material defects, including rot and inherently dangerous or unsuitable materials or techniques, whether in parts of the building we have inspected or not, that would cause us to make allowance by way of capital repair (other than those points referred to above). Our inspection of the property and this report do not constitute a building survey.
6. That the property is connected, or capable of being connected without undue expense, to the public services of gas, electricity, water, telephones and sewerage.
7. That in the construction or alteration of the building no use was made of any deleterious or hazardous materials or techniques, such as high alumina cement, calcium chloride additives, woodwool slabs used as permanent shuttering and the like (other than those points referred to above). We have not carried out any investigations into these matters.
8. That the property has not suffered any land contamination in the past, nor is it likely to become so contaminated in the foreseeable future. We have not carried out any soil tests or made any other investigations in this respect, and we cannot assess the likelihood of any such contamination.
9. That the property does not suffer from any risk of flooding. We have not carried out any investigation into this matter.
10. That the property either complies with the Disability Discrimination Acts and all other Acts relating to occupation, or if there is any such non-compliance, it is not of a substantive nature.
11. That the property does not suffer from any ill effects of Radon Gas, high voltage electrical supply apparatus and other environmental detriment.



12. That there are no adverse site or soil conditions, that the property is not adversely affected by the Town and Country Planning (Assessment of Environmental Effects) Regulations 1988, that the ground does not contain any archaeological remains, nor that there is any other matter that would cause us to make any allowance for exceptional delay or site or construction costs in our valuation.

## 5.1.2. General Conditions

Our valuation has been carried out on the basis of the following general conditions:

1. We have made no allowance for any Capital Gains Tax or other taxation liability that might arise upon a sale of the property.
2. Our valuation is exclusive of VAT (if applicable).
3. No allowance has been made for any expenses of realisation.
4. Excluded from our valuation is any additional value attributable to goodwill, or to fixtures and fittings which are only of value in situ to the present occupier.
5. Energy Performance Certificates (EPCs) are required for the sale, letting, construction or alteration of all residential buildings on non-domestic residential buildings over 538 sq ft (50 sq m) in England and Wales and on all buildings in Scotland. The effect of EPCs on value is as yet unknown, given that the market has yet to respond to their introduction. Therefore, we have not considered the property's EPC rating in forming our opinion of value. However, should this position alter, we reserve the right to reconsider our opinion of value.
6. No allowance has been made for rights, obligations or liabilities arising under the Defective Premises Act 1972, and it has been assumed that all fixed plant and machinery and the installation thereof complies with the relevant UK and EU legislation.
7. Our valuation is based on market evidence which has come into our possession from numerous sources. That from other agents and valuers is given in good faith but without liability. It is often provided in verbal form. Some comes from databases such as the Land Registry or computer databases to which Savills subscribes. In all cases, other than where we have had a direct involvement with the transactions, we are unable to warrant that the information on which we have relied is correct although we believe it to be so.

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# Report & Valuation

Rookwood Hospital, Fairwater Road, Llandaff, Cardiff, CF5 2YN

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## Appendices

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# Report & Valuation

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# Report & Valuation

Rookwood Hospital, Fairwater Road, Llandaff, Cardiff, CF5 2YN

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## Appendix 1

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Tolley, Laura  
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25 January 2019



Jonathan Nettleton  
Cardiff & Vale University Health Board  
University Hospital of Wales  
Heath Park  
Cardiff  
CF14 4XW

Scott Caldwell MRICS  
E: [scaldwell@savills.com](mailto:scaldwell@savills.com)  
DL: +44 (0) 2920 368943

2 Kingsway  
Cardiff CF10 3FD  
T: +44 (0) 29 20 368900  
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[savills.com](http://savills.com)

Dear Jonathan

**PROPERTY: ROOKWOOD HOSPITAL, FAIRWATER ROAD, LLANDAFF, CARDIFF, CF5 2YN**

**Confirmation of terms of engagement for the provision of valuation advice**

1. Thank you for your email to us dated 16 January 2019. We are grateful to you for your kind instructions to advise and now write to confirm the terms upon which Savills (UK) Limited (**Savills, we or us**) will provide Cardiff & Vale University Health Board (**you**) with a valuation report (the **Valuation or Report**) in respect of the above property (**Property**).
2. Our Valuation will be undertaken on the terms set out in this letter, including its appendices.
3. Please sign and return a copy of this letter to us to confirm your acceptance of the terms set out herein. In particular, we draw your attention to the fact that when signing this letter you are confirming your agreement to the limitation of our liability set out at paragraphs 8 -12 inclusive.
4. Please note we will be unable to formally issue our final Report to you, and you will be unable to rely upon the contents of our Report, until such time as we have received your signed copy of this letter.
5. To the extent that there is conflict or inconsistency between this confirmation of instruction letter and your email referred to above, this confirmation of instruction letter will prevail.
6. **Conflicts of Interest**

We confirm that Savills (UK) Limited does not have a material connection or involvement with the subject property or any other parties and there are no other factors that could limit the valuer's ability to provide an impartial and independent valuation. Therefore, the valuer will report an objective and unbiased valuation.

**RICS Red Book**

7. We shall prepare our Valuation in accordance with the RICS Valuation – Global Standards 2017 (incorporating the IVSC International Valuation Standards) and the RICS Valuation – Global Standards 2017 - UK national supplement, together the "**Red Book**". Accordingly, we confirm that:
  - (a) Identification and status of the Valuer
    - (i) The Valuation will be the responsibility of and the Report will be signed by Scott Caldwell MRICS, RICS RV, Director (the **Valuer**). The Valuer will work with colleague(s) as

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Offices and associates throughout the Americas, Europe, Asia Pacific, Africa and the Middle East..

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Registered office: 33 Margaret Street, London, W1G 0JD





appropriate, and the Report will be counter-signed by at least one other RICS Registered Valuer;

- (ii) The Valuer has sufficient current knowledge of the particular market(s) and sufficiently developed skills and understanding to undertake the valuation competently.

(b) Identification of the client and other intended users

The client is the addressee of this letter. We will address our Report to Cardiff & Vale University health board (the **Addressee**).

(c) Identification of the asset or liability to be valued

- (i) The Property address is Rookwood Hospital, Fairwater Road, Llandaff, Cardiff, CF5 2YN
- (ii) The interests to be valued is freehold. The Property will be valued with vacant possession, details to be confirmed in our Report.
- (iii) The interest to be valued comprises an operational hospital proposed for residential development following relocation of the service and is currently held for owner occupation but is expected to be declared surplus to requirements and available for redevelopment.

(d) The valuation will be in pounds sterling

(e) Purpose of the valuation

The Valuation is required for internal purposes. It is important that the Report is not used out of context or for the purposes for which it was not intended. We shall have no responsibility or liability to any party in the event that the Report is used outside of the purposes for which it was intended, or outside of the restrictions on its use set out at sub-paragraph (l) below.

(f) Basis of value

The basis of our Valuation will be Market Value the definitions (and source) of which are set out at **Appendix 1** (attached).

(g) Valuation date

The Valuation date will be the date of our report. You will appreciate that in providing you with our Valuation, we shall have regard to market conditions as at the Valuation date. Naturally, these are subject to change and it is therefore important that the Addressees take account of any such change in conditions that may occur from the Valuation date before making any binding decision in relation to the Property. Please do not hesitate to contact us ahead of making any binding decision which takes account of our Valuation if you have any concerns in this respect.

(h) Extent of investigation

We will carry out an inspection of the Property and undertake investigations to the extent necessary to undertake the Valuation. We will not carry out a structural survey or test the services and nor will we inspect the woodwork and other parts of the structures which are covered, unexposed or inaccessible.

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(i) Nature and source of information to be relied upon

- (i) We will carry out our Valuation on the information listed below:
- (ii) To the extent that you have provided us with information and / or instructed us to obtain it from a third party you agree, unless it is otherwise agreed by us in writing, that we can safely rely upon the accuracy, completeness and consistency of this information without further verification and that you will not hold us responsible in the event that any dispute regarding the Valuation arises from the accuracy of such information.
- (iii) Floor areas: We will not be measuring the Property. It is agreed that we will rely on floor areas provided to us by you.
- (iv) We will not make formal searches with local planning authorities, but shall rely on the information provided informally by the local planning authority or its officers. We recommend you instruct lawyers to confirm the position in relation to planning and that the Report is reviewed in light of advice from your solicitors in this respect.
- (v) For the avoidance of doubt, we accept no liability for any inaccuracy or omission contained in information disclosed by you or any third party or from the Land Registry or any database to which we subscribe. We will highlight in our Report where we have relied on such information.

(j) Assumptions and Special Assumptions

Unless otherwise agreed, our Valuation will be reported on the basis of the general assumptions attached at **Appendix 2**.

(k) Format of Report

We will adopt the relevant Savills (UK) Limited long form / short form valuation report template, adapted, as necessary, to accommodate your instructions.

(l) Restrictions on use, distribution or publication

- (i) Our Report shall be confidential to, and for the use only of, the Addressee and no responsibility shall be accepted to any third party for the whole or any part of its contents.
- (ii) Neither the whole nor any part of our Report or any reference to it may be included in any published document, circular or statement, nor published, reproduced, referred to or used in any way without our prior written approval (with such approval to be given or withheld at our absolute discretion).
- (iii) Where any addressee is a lender, in the event of a proposal to place the loan on the Property in a syndicate, you must notify us so that we can agree the extent of our responsibility to further named parties. If this is not done or we do not agree to be responsible to further named parties, we shall have no responsibility to any party other than the Addressee(s).
- (iv) Draft reports, if provided, will be sent on the basis that they are provisional (i.e. subject to completion of our final report) and for your internal purposes only. They must not be published or disclosed and you will not be entitled to rely upon them for any purpose whatsoever. Savills neither owes nor accepts a duty of care to you in connection with any drafts and shall not be liable to you for any loss, damage, cost or expense of whatever nature caused by your use of or reliance on them. Should you choose to rely upon a draft

you do so entirely at your own risk and you are responsible for carrying out your own independent investigations.

- (v) We confirm that our valuation will be undertaken in accordance with the RICS Valuation – Global Standards (2017) which incorporate the International Valuation Standards (IVS) and the RICS Valuation – Global Standards 2017 - UK national supplement, together the “Red Book”.
- (m) The basis on which the fee will be calculated
  - (i) The agreed fee for the provision of the Valuation is £5,000 plus VAT but inclusive of expenses and is payable in pounds sterling.
  - (ii) Our agreed fee and any expenses, together with any VAT (at the prevailing rate) on such amounts, shall become due and payable by you to us within 30 days of us issuing you with a valid VAT invoice in respect of such amounts. In the event that our fee is not paid by the date for payment we reserve the right to charge default interest at a rate of 4% above the Barclays Bank base rate for payment.
  - (iii) In the event of our instructions being terminated at any time prior to completion of our work, a fee will become payable on a time basis (at our prevailing rates) for work carried out up to the date of termination, subject to a minimum of 50% of the agreed fee, together with all expenses incurred.
  - (iv) If we incur any expenditure on solicitors or other third parties in order to recover the fee due, such amounts will be payable by you.
  - (v) If we perform any additional services for you, we will agree an additional fee with you in respect of such services and such fee shall be payable in the manner set out above.
  - (vi) You acknowledge that you shall not be entitled to rely upon our Report until such time as our fees have been paid as detailed here.
- (n) Savills Complaints Handling Procedure  
A copy of our Client Complaints Handling Procedure can be made available to you on request.
- (o) Monitoring under RICS conduct and disciplinary regulations  
Savills (UK) Limited is regulated by the RICS. Compliance with the standards set down in the Red Book may be subject to monitoring by the RICS under its conduct and disciplinary regulations.

#### Limitations on Liability

- 8. Subject to paragraph 12 below, our aggregate liability to any one, or more, or all of the Addressees or any other party who otherwise becomes entitled to rely upon the Report under or in connection with this agreement and our Valuation, however that liability arises (including, without limitation, a liability arising by breach of contract, arising by tort, including, without limitation, the tort of negligence, or arising by breach of statutory duty) shall be limited to the lower of:
  - (a) 25% of the Value (as defined below) of the Property stated in our Report; and
  - (b) £75M.

9. In paragraph 8, **Value** means:
- (a) where more than one value is stated for the same Property on different bases, the highest valuation figure recorded in our Report; and
  - (b) in the case of valuations of portfolios, estates, shopping centres and other multi-unit properties within one Report, the aggregate of our valuations included in the one Report.
10. You acknowledge and agree that we shall not be liable under or in connection with this agreement and the provision of our Valuation in tort (including negligence), breach of contract, breach of statutory duty or otherwise due to, under and/or arising out of or in connection with this agreement to the extent such loss or damage is consequential, indirect, special or punitive.
11. You acknowledge and agree that none of our employees, partners or consultants individually has a contract with you or owes you a duty of care or personal responsibility. You agree that you will not bring a claim against any such individuals personally in connection with our services.
12. Nothing in this agreement shall exclude or limit our liability for death or personal injury caused by our negligence or for any other liability that cannot be excluded by law.

#### **Insurance**

13. During the period that we are producing our Valuation and for a period of six years thereafter, we will maintain in force, with insurers or underwriters approved by the RICS, professional indemnity insurance in an amount not less than the amount of our liability cap, as calculated pursuant to clause 8 above and shall, on your request, produce confirmation of the same from our insurance broker.

#### **Reliance**

14. As stated above, we accept responsibility for our Report only to the Addressees and no third party may rely on our Report. We do not accept any responsibility to, and shall have no liability in respect of, any third parties unless otherwise agreed writing even if that third party pays all or part of our fees, or is permitted to see a copy of our Valuation. In addition, the benefit of our Report is personal and neither you nor any other Addressee may assign the benefit of our Report to any third party without our prior written consent (with such consent to be given or withheld at our absolute discretion). You acknowledge that if we agree to extend reliance on our Report to any third party or to the benefit of our Report being assigned, we will require the relevant third party or assignee to enter into a reliance letter before such party is entitled to rely upon our Report. We will provide you with a copy of our reliance letter on request. If we agree to any such extension or assignment, we may charge you an additional fee.

#### **Confidentiality**

15. Neither party shall disclose any confidential information relating to the affairs, business, customers or clients of the disclosing party to any other party without the disclosing party's prior written consent except to those of the disclosing party's employees, officers, representatives and/or advisors who need to know the information for the purposes of carrying out the receiving party's obligations under this agreement (save to the extent that the receiving party is compelled to disclose such information by law).
16. Our Report is confidential to and for the use only of the Addressees, but the Addressees may disclose the Report on a non-reliance and without liability basis to their directors, officers, employees and professional advisers provided the relevant Addressee procures any person to whom our Report is disclosed pursuant to this paragraph 16 keeps the Report confidential and does not disclose it to any other party.



### **Data Protection**

17. We may use your personal information in our provision of services to you. Please see our Privacy Notice for details of how your personal information will be used. Our Privacy Notice can be found at the following web address: <http://www.savills.co.uk/footer/privacy-policy.aspx>

### **Reinstatement Costs**

18. If you have instructed us to report on the reinstatement cost of the Property for insurance purposes, we will provide you with an approximate opinion of such cost only. You acknowledge and agree that the provision of our opinion of the reinstatement cost is provided to you strictly without liability and on a non-reliance basis. If you require a reinstatement cost figure on which you may rely, please let us know and we will ask our building surveying colleagues to provide a fee estimate.

### **Sub-Contracting**

19. We may sub-contract the provision of any services to be performed by us pursuant to this agreement (including, without limitation, to other companies that are direct or indirect subsidiaries of Savills plc) provided that we will remain responsible to you for the provision of those services and the provision of our Report. We may request that you pay any sub-contractor directly for those of our fees which relate to work carried out by the sub-contractor. In these circumstances, the fees in question are to be paid by you directly to the sub-contractor and we will be entitled to assign to the sub-contractor any rights that we have in respect of those fees.

### **Money Laundering**

20. You shall promptly, upon request, provide us with any information reasonably required to enable us to comply with our obligations under the Money Laundering Regulations and our internal compliance policies relating to the same. For the avoidance of doubt, searches may also be conducted on your directors and "beneficial owners" as is required by the legislation. You agree that we may retain such information and documentation for these purposes and make searches of appropriate databases electronically. If such information is not provided within a reasonable time or you do not meet the requirements set out in our relevant internal policies, we may terminate this instruction immediately upon written notice to you.

### **Health and Safety**

21. If we are undertaking physical inspections of the Property, you shall take reasonable steps to procure that the owner and/or occupier of the Property: (a) advises us of any hazards to which our staff may be exposed at the Property (b) provides us with any relevant health and safety policies and (c) arranges for any site visits to the Property to be hosted by a representative of the owner/occupier of the Property.

### **Jurisdiction**

22. This agreement and any dispute arising from the Valuation is subject to English jurisdiction and law.

Tolley, Laura  
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**Appendices**

23. Your attention is drawn to the attached appendices which form part of the agreement between us and on which our Valuation will be reported. By signing a copy of this letter you are also confirming your agreement to them.

Yours sincerely

**Scott Caldwell MRICS Registered Valuer  
Director**

**Client Acceptance**

I confirm Cardiff & Vale University Health Board's agreement to this letter and the attached appendices and, in particular, confirm that the limitation on liability set out in paragraph 8 above is acknowledged, considered reasonable and accepted:

Signed by **Cardiff & Vale University Health Board** by its duly authorised signatory

Name in capitals

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Position

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Date

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## Appendix 1: Definitions and Bases of Valuation - definitions

**Assumption:** A supposition taken to be true. It involves facts, conditions or situations affecting the subject of, or approach to, a valuation that, by agreement, do not need to be verified by the valuer as part of the valuation process. (RICS Valuation – Global Standards, 2017)

**Depreciated Replacement Cost:** The current cost of replacing an asset with its modern equivalent asset less deductions for physical deterioration and all relevant forms of obsolescence and optimisation. (RICS Valuation – Global Standards, 2017)

**Existing Use Value:** The estimated amount for which an asset or liability should exchange on the Valuation date between a willing buyer and a willing seller in an arm's length transaction after proper marketing and where the parties had acted knowledgeably, prudently and without compulsion, assuming that the buyer is granted vacant possession of all parts of the asset required by the business and disregarding potential alternative uses and any other characteristics of the asset that would cause its market value to differ from that needed to replace the remaining service potential at least cost. (RICS Valuation – Global Standards 2017 – UK national supplement)

NB Existing Use Value is to be used only for valuing property that is owner occupied by a business, or other entity, for inclusion in financial statements.

**External Valuer:** A valuer who, together with any associates, has no material links with the client, an agent acting on behalf of the client or the subject of the assignment. (RICS Valuation – Global Standards 2017). Unless otherwise stated, External Valuer does not refer to the role of an external valuer within the context of the Alternative Investment Fund Managers Directive 2011/61/EU and its implementing provisions in the United Kingdom unless agreed otherwise in writing.

**Equitable Value** The estimated price for the transfer of an asset or liability between identified knowledgeable and willing parties that reflects the respective interests of those parties. (IVS 104 – Bases of Value).

**Fair Value:** The definition adopted by the International Accounting Standard Board (IASB) is: The price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

**Investment Value (worth):** The value of an asset to a particular owner or prospective owner for individual investment or operational objectives. (IVS 104 paragraph 60.1)

**Market Rent:** The estimated amount for which an interest in real property should be leased on the valuation date between a willing lessor and a willing lessee on appropriate lease terms in an arm's length transaction, after proper marketing and where the parties had each acted knowledgeably, prudently and without compulsion. (IVS 104 paragraph 40.1)

**Market Value:** The estimated amount for which an asset or liability should exchange on the valuation date between a willing buyer and a willing seller in an arm's length transaction, after proper marketing and where the parties had each acted knowledgeably, prudently and without compulsion. (IVS 104 paragraph 30.1)

**Special Assumption:** An assumption that either assumes facts that differ from the actual facts existing at the valuation date or that would not be made by a typical market participant in a transaction on the valuation date. (RICS Valuation – Global Standards, 2017)

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## Appendix 2: General assumptions and conditions applicable to all Valuations

Unless otherwise agreed in writing and /or stated in our report, our Valuation will be carried out on the basis of the following general assumptions and conditions in relation to each Property that is the subject of our Report. If any of the following assumptions or conditions are not valid, this may be that it has a material impact on the figure(s) reported and in that event we reserve the right to revisit our calculations.

1. That the Property is not subject to any unusual or especially onerous restrictions, encumbrances or outgoing and good title can be shown. Should there be any mortgages or charges, we have assumed that the property would be sold free of them. We have not inspected the Title Deeds or Land Registry Certificate.
2. That we have been supplied with all information likely to have an effect on the value of the Property, and that the information supplied to us and summarised in this Report is both complete and correct.
3. That the building(s) has/have been constructed and is/are used in accordance with all statutory and bye-law requirements, and that there are no breaches of planning control and any future construction or use will be lawful.
4. That the Property is not adversely affected, nor likely to become adversely affected, by any highway, town planning or other schemes or proposals, and that there are no matters adversely affecting value that might be revealed by a local search, replies to usual enquiries, or by any statutory notice (other than those points referred to above).
5. That the building(s) is/are structurally sound, and that there are no structural, latent or other material defects, including rot and inherently dangerous or unsuitable materials or techniques, whether in parts of the building(s) we have inspected or not, that would cause us to make allowance by way of capital repair (other than those points referred to above). Our inspection of the Property and our Report do not constitute a building survey or any warranty as to the state of repair of the Property. Our Valuation is on the basis that a building survey would not reveal material defects or cause us to alter our Valuation materially.
6. That there is unrestricted access to the Property and that it is connected, or capable of being connected without undue expense, to the public services of gas, electricity, water, telephones and sewerage.
7. Sewers, mains services and roads giving access to the Property have been adopted, and any lease provides rights of access and egress over all communal estate roadways, pathways, corridors, stairways and the use of communal grounds, parking areas and other facilities.
8. That in the construction or alteration of the building(s) no use was made of any deleterious or hazardous materials or techniques, such as high alumina cement, calcium chloride additives, woodwool slabs used as permanent shuttering and the like (other than those points referred to above). We have not carried out any investigations into these matters.
9. That the Property is free from environmental hazards and has not suffered any land contamination in the past, nor is it likely to become so contaminated in the foreseeable future. We have not carried out any soil tests or made any other investigations in this respect, and we cannot assess the likelihood of any such contamination.
10. That any tenant(s) is/are capable of meeting its/their obligations, and that there are no arrears of rent or undisclosed breaches of covenant.

11. In the case of a Property where we have been asked to value the site under the special assumption that the Property will be developed, there are no adverse site or soil conditions, that the Property is not adversely affected by the Town and Country Planning (Environmental Impact Assessment) Regulations 2017 that the ground does not contain any archaeological remains, nor that there is any other matter that would cause us to make any allowance for exceptional delay or site or construction costs in our Valuation.
12. We will not make any allowance for any Capital Gains Tax or other taxation liability that might arise upon a sale of the Property.
13. Our Valuation will be exclusive of VAT (if applicable).
14. No allowance will be made for any expenses of realisation.
15. Excluded from our Valuation will be any additional value attributable to goodwill, or to fixtures and fittings which are only of value in situ to the present occupier.
16. When valuing two or more properties, or a portfolio, each property will be valued individually and no allowance will be made, either positive or negative, should it form part of a larger disposal. The total stated will be the aggregate of the individual Market Values.
17. In the case of a Property where there is a distressed loan we will not take account of any possible effect that the appointment of either an Administrative Receiver or a Law of Property Act Receiver might have on the perception of the Property in the market and its/their subsequent valuation, or the ability of such a Receiver to realise the value of the property(ies) in either of these scenarios.
18. No allowance will be made for rights, obligations or liabilities arising under the Defective Premises Act 1972, and it will be assumed that all fixed plant and machinery and the installation thereof complies with the relevant UK and EEC legislation.
19. Our Valuation will be based on market evidence which has come into our possession from numerous sources, including other agents and valuers and from time to time this information is provided verbally. Some comes from databases such as the Land Registry or computer databases to which Savills subscribes. In all cases, other than where we have had a direct involvement with the transactions being used as comparables in our Report, we are unable to warrant that the information on which we have relied is correct.

Tolley, Laura  
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# Report & Valuation

Rookwood Hospital, Fairwater Road, Llandaff, Cardiff, CF5 2YN

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## Appendix 2

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**Partneriaeth  
Cydwasaethau  
Gwasanaethau Ystadau Arbenigol  
Shared Services  
Partnership  
Specialist Estates Services**

**N.H.Davies**  
BSc (Hons), Dip Proj Man (RICS),  
MRSA, MRICS, FHEEM  
Director

**Specialist Estates Services**

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Ordnance Survey [100025847]

Hawffrant y Goron a hawliau cronfa ddata 2011

Arolwg Ordnans [100025847]

ORDNANCE SURVEY TILE ST 1578  
NATIONAL GRID REFERENCE ST 150780

Clive Ball BSc (Hons) MRICS

Head of Property  
Specialist Estates Services

Title

**Rookwood Hospital,  
Llandaff,  
Cardiff.**

Disposal area = 3.26 ha  
8.06 acres

Scale  
**1:1250 @ A3**

Produced by  
Drawing Number

CLKB/TJE

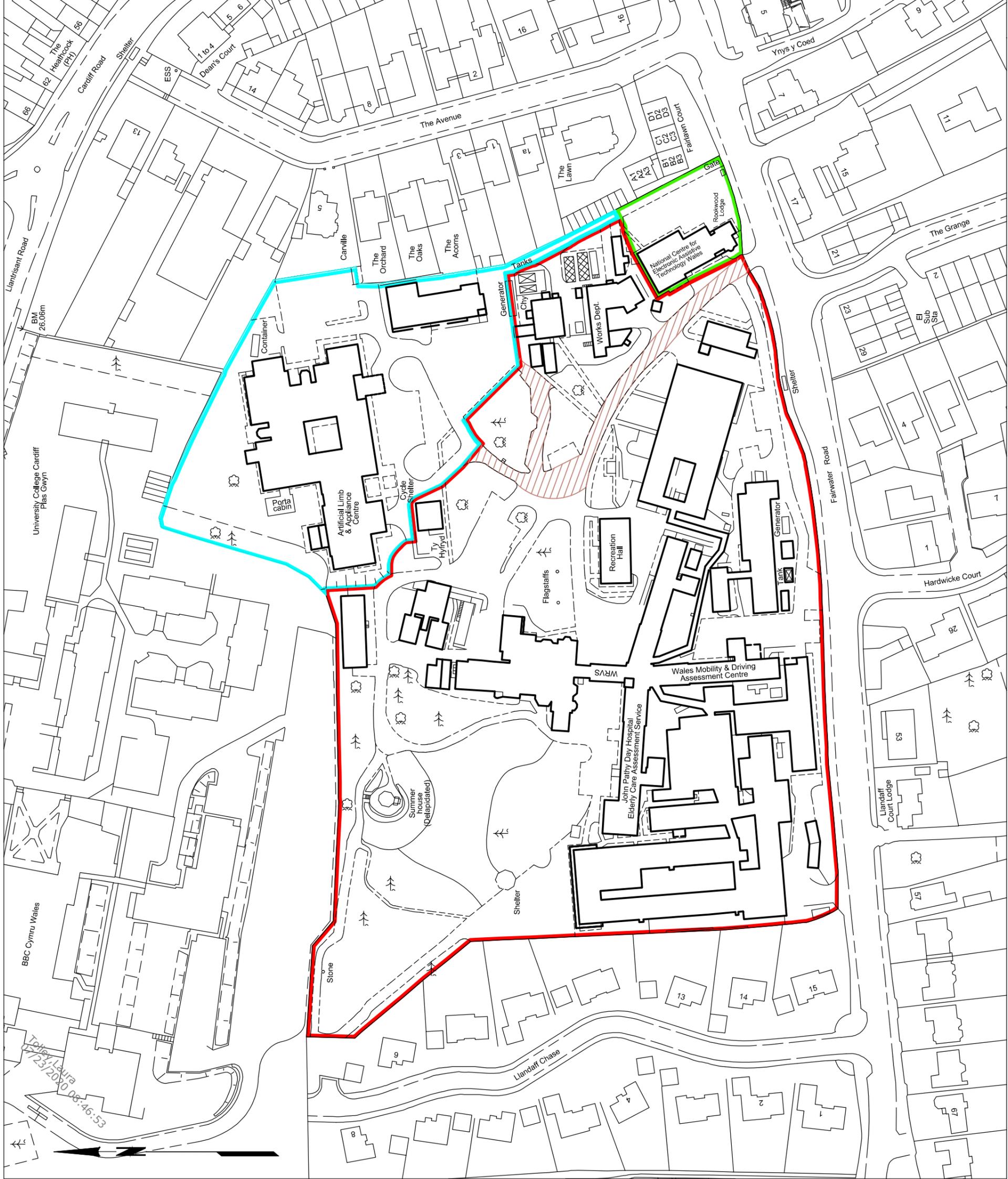
Date Issued

TJE 25/01/19

Date Created

January 2019

**C37\_01S /1**



File Ref: G:\AutoCAD LAPP\Red Line Plans\Cardiff & Vale UHB\Rookwood Hospital, Cardiff\_01S

# Report & Valuation

Rookwood Hospital, Fairwater Road, Llandaff, Cardiff, CF5 2YN

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## Appendix 3

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# UK Housing Market Update



## First Time Buyers overtake Home Movers as largest buyer type

House prices rose 0.3% in January, according to Nationwide. This put annual growth at 0.1%, the lowest figure for 6 years. In part this is because January 2018, the strongest month of last year, has dropped out of the annual growth number.

The RICS Survey reflects this slowing growth. The number of surveyors expecting price falls increased for the 6th consecutive month and near-term sales expectations were at their lowest level since the series started in 1999. Numbers of new enquiries and instructions continued to fall, although slightly fewer surveyors reported falls than in the previous month. Transaction numbers remained largely flat in November for most regions, except in Wales, which saw a modest increase, and London, which continued its gradual downward trend.

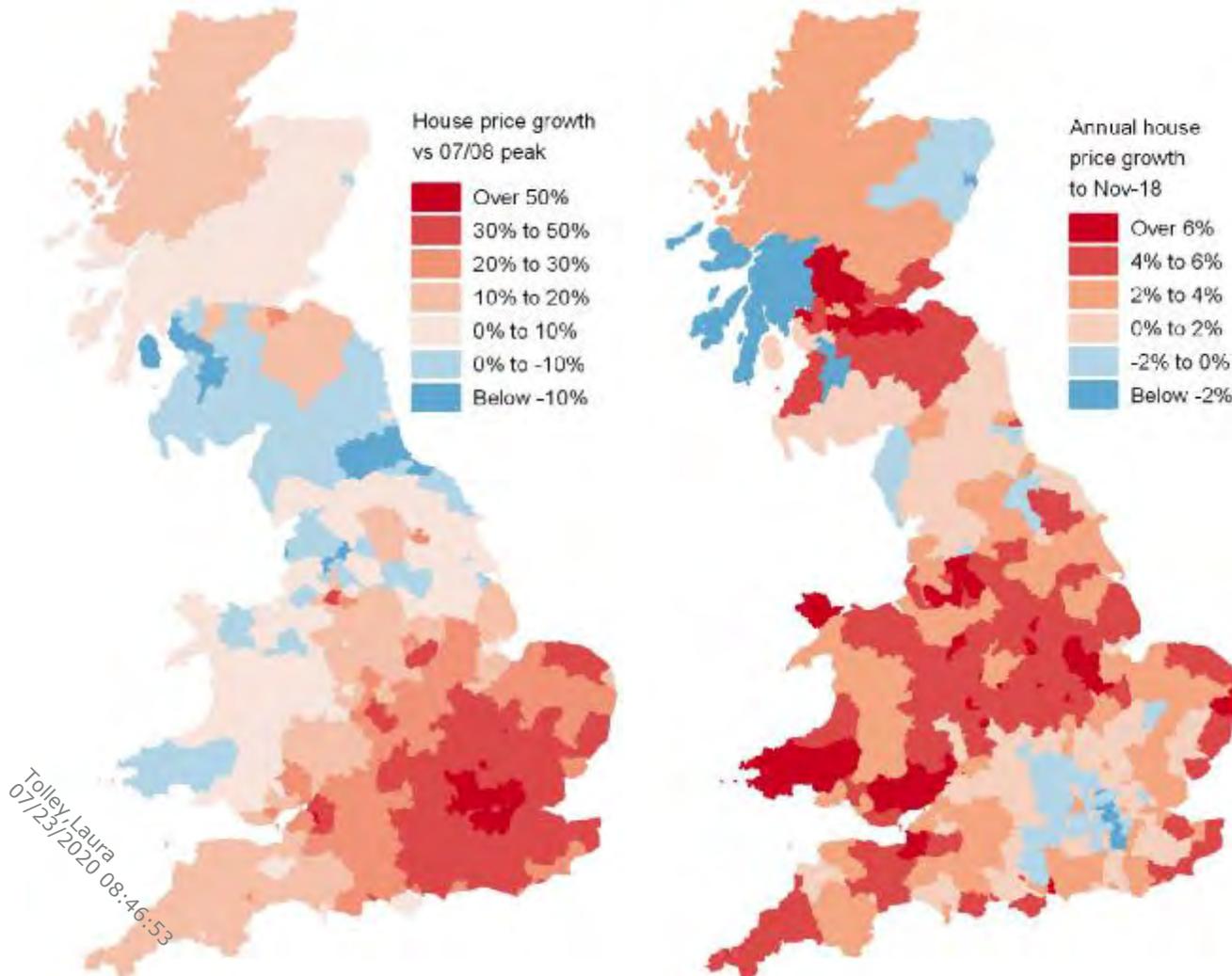
Transaction numbers have been boosted in recent years by rising numbers of First Time Buyers and they are now the largest buyer type, having overtaken Home Movers. The last time First Time Buyers were the largest buyer type was 1995. They have been strongly supported by government policy, notably Help to Buy, while Home Movers have struggled to climb the housing ladder. The high street banks remain keen to grow their lending to this group. Lloyds recently announced a new 100% mortgage for First Time Buyers, to be secured by a family member opening a savings account, a move that seeks to further capitalise on the 'Bank of Mum and Dad'. Competition for borrowers was also reflected in slight falls in the average interest rate on fixed term mortgages between October and November last year.

The southern Welsh districts of Blaenau Gwent and Torfaen saw the strongest price growth of approximately 11%, followed by Newport at 10%, in the year to November 2018, albeit from a low base in both cases. London continued to struggle, with the largest falls in high value Westminster (-10%), followed by Camden and Ealing, both down approximately 5%.

Rental growth continues to be the strongest in the East Midlands with annual growth at 2.5%, followed by the West Midlands at 1.9%. London rental growth continues to be the weakest, up 0.1% on the previous year.

Figure 1 – Average price versus 2007/8 peak, Nov-18

Figure 2 – Average price growth, year to Nov-18



Source: Savills using HM Land Registry and Registers of Scotland (6 month smoothed)\*

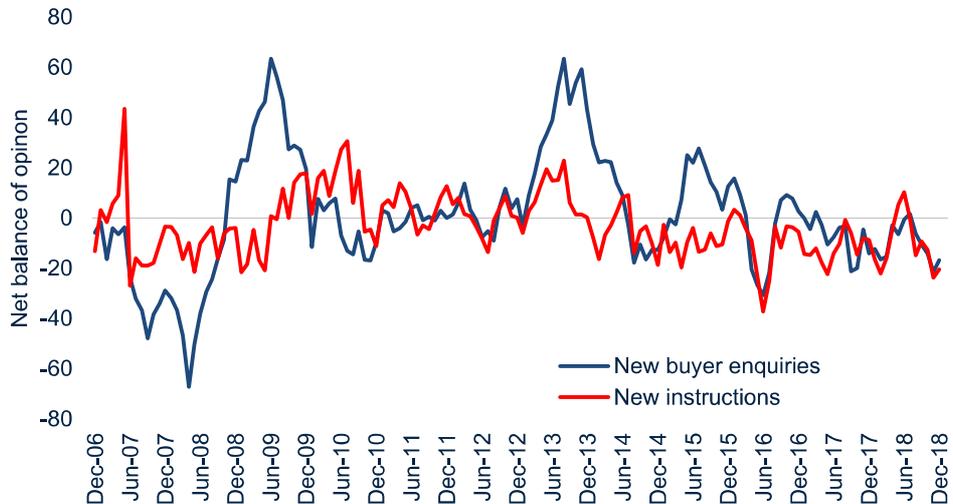


The number of surveyors reporting rising numbers of instructions and enquiries has been on a steep downward trend since June last year.

The most recent month, December, saw a slight uptick in sentiment, with reports of both new instruction and enquiries rising slightly.

Both measures are still negative, with the majority of surveyors reporting falls.

**Figure 3 – Survey sentiment remains subdued**



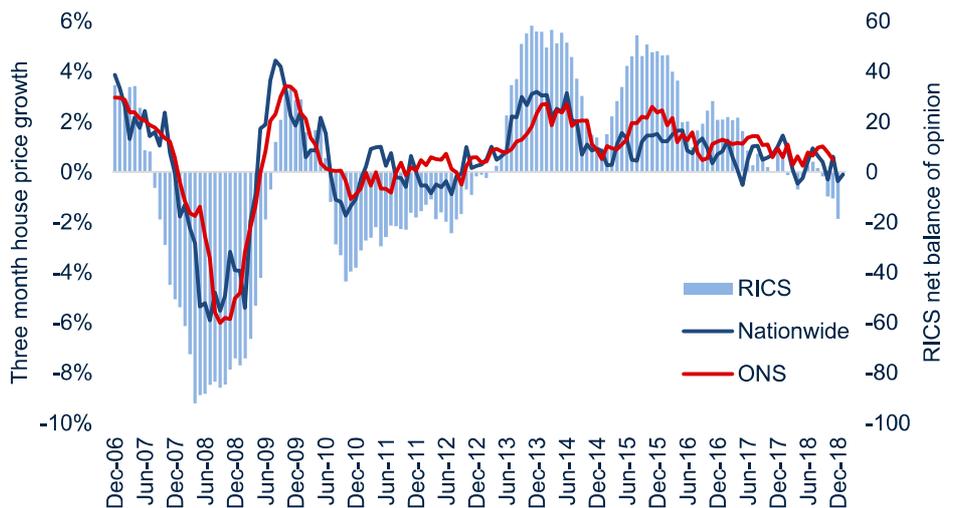
Source: RICS (seasonally adjusted)

The RICS Survey has, at times, been a good forward indicator of house price movements.

Surveyor perception of price growth currently sits firmly in negative territory at -19, the lowest it has been since 2012. Nationwide three-month price growth is flat, after the large fall in December.

The ONS index, two months behind Nationwide, is tracking downwards, which is likely to bring it more in line with the other measures.

**Figure 4 – Price growth continues to struggle**



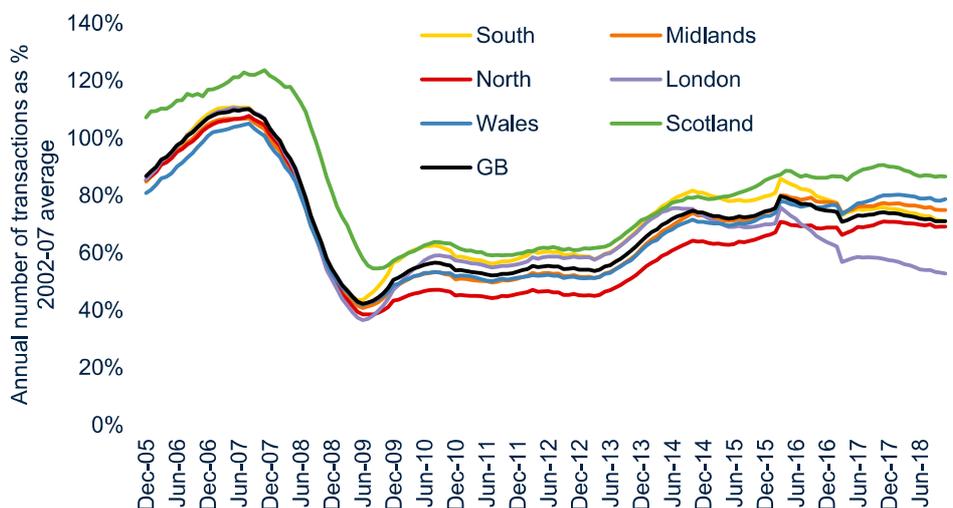
Source: RICS, Nationwide, ONS

Transactions at a national level and across most regions were flat in November, with the notable exceptions being Wales and London.

Wales saw transactions rise 0.7%. They were still down 1.6% on the previous year, but that was the smallest annual fall of any region.

London continues its downward trajectory, with the 12 months to November 2018 having an estimated 7.2% fewer transactions than in the preceding 12 month period.

**Figure 5 – Transactions flatten out**



Source: Savills using HM Land Registry (adjusted for count lag) and Registers of Scotland

## Recent house price growth

	Nationwide (to Dec-18 for regions, to Jan-19 for UK)			ONS (to Nov-18)			Savills (to Nov-18)		
	m/m	q/q	y/y	m/m	q/q	y/y	m/m	q/q	y/y
UK	0.3%	-0.1%	0.1%	0.1%	0.5%	2.9%	0.2%	0.9%	2.7%
London	n/a	0.1%	-2.2%	-0.3%	-0.3%	-0.6%	-0.3%	-0.3%	-1.8%
South East	n/a	-0.2%	-0.5%	0.4%	0.1%	1.1%	0.0%	0.4%	1.4%
East of England	n/a	0.0%	1.4%	1.0%	0.9%	2.6%	0.2%	0.7%	2.2%
South West	n/a	0.8%	1.5%	1.1%	1.5%	4.3%	0.4%	1.0%	3.4%
East Midlands	n/a	0.0%	2.9%	0.5%	0.6%	4.4%	0.5%	1.4%	4.7%
West Midlands	n/a	0.2%	1.6%	0.0%	1.2%	4.7%	0.5%	1.6%	5.1%
North East	n/a	0.6%	-1.7%	1.1%	2.6%	4.0%	-0.1%	0.3%	1.5%
Yorks & Humber	n/a	-0.3%	1.3%	-0.9%	-0.9%	2.0%	0.4%	1.2%	3.8%
North West	n/a	-0.2%	1.5%	-0.6%	0.7%	3.1%	0.4%	1.2%	4.1%
Wales	n/a	1.8%	1.8%	0.8%	1.0%	5.5%	0.7%	1.9%	5.6%
Scotland	n/a	-0.3%	1.7%	-0.8%	0.0%	3.0%	0.0%	1.4%	4.2%

Source: Savills using HM Land Registry and Registers of Scotland\*, Nationwide (seasonally adjusted), ONS (seasonally adjusted)

## Five year forecasts (first published November 2018)

	2019	2020	2021	2022	2023	5-year
UK	1.5%	4.0%	3.0%	2.5%	3.0%	14.8%
London	-2.0%	0.0%	2.5%	1.5%	2.5%	4.5%
South East	0.0%	2.0%	2.5%	2.0%	2.5%	9.3%
East of England	0.0%	2.0%	2.5%	2.0%	2.5%	9.3%
South West	0.5%	3.5%	2.5%	2.5%	3.0%	12.6%
East Midlands	3.0%	5.0%	3.5%	3.0%	3.5%	19.3%
West Midlands	3.0%	5.0%	3.5%	3.0%	3.5%	19.3%
North East	2.0%	5.0%	3.5%	2.5%	3.5%	17.6%
Yorks & Humber	2.5%	5.5%	4.0%	3.0%	4.0%	20.5%
North West	3.0%	6.0%	4.0%	3.0%	4.0%	21.6%
Wales	2.0%	5.5%	4.0%	3.0%	3.5%	19.3%
Scotland	2.5%	5.0%	3.5%	2.5%	3.5%	18.2%

Source: Savills

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\*Savills index is an unadjusted repeat sales index based on HM Land Registry and Registers of Scotland price paid data. Note that Savills national index (labelled UK) is for Great Britain, not including Northern Ireland.

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**UNCONFIRMED MINUTES OF A MEETING OF CARDIFF AND VALE UNIVERSITY HEALTH  
BOARD TRUSTEE MEETING HELD ON 25 JULY 2019  
NANT FAWR ROOM 1, 2 AND 3, GROUND FLOOR, WOODLAND HOUSE HEATH**

**Present:**

Maria Battle	MB	Chair
Charles Janczewski	CJ	Vice Chair
Len Richards	LR	Chief Executive Officer
John Antoniazzi	JA	Independent Member - Estates
Professor Gary Baxter	GB	Independent Member - University
Eileen Brandreth	EB	Independent Member - ICT
Robert Chadwick	RC	Executive Director of Finance
Steve Curry	SC	Chief Operating Officer
Martin Driscoll	MD	Executive Director of Workforce and OD
Susan Elsmore	SE	Independent Member – Local Authority
Akmal Hanuk	AH	Independent Member – Community
Abigail Harris	AH	Executive Director of Strategic Planning
Michael Imperato	MI	Independent Member - Legal
Dr Fiona Jenkins	FJ	Executive Director of Therapies and Health Sciences
Fiona Kinghorn	FK	Executive Director of Public Health
Sara Moseley	SM	Independent Member – Third Sector
John Union	JU	Independent Member – Finance
Dawn Ward	DW	Independent Member – Trade Unions
Ruth Walker	RW	Executive Nurse Director

**In attendance:**

Nicola Foreman	NF	Director of Corporate Governance
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**Secretariat:**

Glynis Mulford	GM	Corporate Governance Officer
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**19/07/001 APOLOGIES FOR ABSENCE**

Apologies for absence were NOTED.

**19/07/002 DECLARATIONS OF INTEREST**

The Chair invited Board Members to declare any interests in relation to the items on the meeting agenda. None were declared.

**19/07/003 MINUTES OF THE TRUSTEE MEETING HELD ON 27 JUNE 2019**

The Board reviewed the Minutes of the meeting held on 27 June 2019, and confirmed them to be a true and accurate record.

19/07/004	<p><b>The Board Resolved that:</b></p> <p>a) the minutes of the meeting be approved as a true and accurate record.</p> <p><b>APPOINTMENT OF A NEW INDEPENDENT ADVISOR FO RHTE CHARITY TRUSTEE</b></p> <p>The UHB Chair informed Members of the aim to appoint an independent advisor for the Charity in order to provide objectivity in the decision making. The named person, Susan Essex a former government minister would put her name forward and the Chair asked if the Board of Trustees would approve the appointment.</p> <p>Concerns were raised that although there would be no stipend, whether there was a process in place for the post to be advertised. The Director of Corporate Governance would make inquiries with the legal department to provide assurance to the Board of Trustees.</p> <p><b>The Board Resolved that:</b></p> <p>a) The appointment of an Independent Advisor to the Charity be AGREED subject to legal advice being sought on whether the post should be advertised.</p>	NF
19/07/005	<p><b>DISPOSAL OF ROOKWOOD HOSPITAL</b></p> <p>The Executive Director of Strategic Planning confirmed that legal advice had been acquired in relation to the disposal of Rookwood Hospital. It stated we had to be mindful of the purposes of the charity when disposing of the building and that further inquiries needed to be made with the Charity Commission to gain a better understanding of the options available.</p> <p><b>The Board of Trustees Resolved to:</b></p> <p>a) Make further inquiries with the Charity Commission regarding options available for the disposal of Rookwood Hospital</p> <p>b) Share the Legal Advice and provide an update once the position was established.</p>	NF NF
19/07/006	<p><b>ANY OTHER URGENT BUSINESS</b></p> <p>No other business items were raised.</p>	
19/07/007	<p><b>DATE OF THE NEXT MEETING OF THE BOARD:</b></p> <p>Thursday 26 September 2019, 1.00pm Woodland House, Heath, Cardiff CF14 4HH.</p>	

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**LEGAL ADVICE – PRIVILEGED**

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**CARDIFF AND VALE UNIVERSITY HEALTH BOARD**  
**Charity Law advice relating to the disposal of Rookwood Hospital, Llandaff**

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C:6048767v1

**Geldards**  
law firm

## CARDIFF AND VALE UNIVERSITY HEALTH BOARD

### Charity Law advice relating to the disposal of Rookwood Hospital, Llandaff

#### 1. Background

- 1.1 We have been instructed by Cardiff & Vale University Health Board (“CVUHB”) in its capacity as sole trustee of the charity known as Rookwood Hospital (registered with the Charity Commission as a linked charity of Cardiff and Vale University Local Health Board General Purpose Charity).
- 1.2 We understand that CVUHB wishes to dispose of Rookwood Hospital, Llandaff to Cardiff County Council (“the Council”) by way of a sale. The Council intends to develop the land for social housing purposes.
- 1.3 The Rookwood Hospital Charity (“the Charity”) is governed by a Deed of Gift dated 14 August 1924 as affected by a Charity Commission Scheme dated 24 October 1980 and Charity Commission Order dated 7 May 1997, copies of which are in our possession.
- 1.4 We have also been provided with the following:
  - (a) Cardiff Local Development Plan Examination – Hearing Session 9 (3 February 2015) re. Rookwood Hospital
  - (b) Report on Disposal of Rookwood Hospital for a meeting of CVUHB as corporate trustee of the general purpose charity dated 27 June 2019
  - (c) Disposal Strategy document (May 2019)
  - (d) Report and Valuation dated February 2019 prepared by Savills
- 1.5 According to the Charity Commission register, the objects of the Charity are as follows:

*“THE HOSPITAL BELONGING TO THE SAID CHARITY KNOWN AS ROOKWOOD HOSPITAL AND THE PROPERTY OCCUPIED THEREWITH SHALL BE APPROPRIATED AND USED AS A HOSPITAL OR HOME (IN WHICH MAY BE ESTABLISHED A CENTRE FOR THE PROVISION OF ARTIFICIAL LIMBS AND APPLIANCES, FOR THE PROVISION OF INVALID*

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*VEHICLES AND FOR THE MAKING OF GRANTS TOWARDS THE COST OF PROVISION OF INVALID AIDS) FOR SICK AND DISABLED PERSONS WITH A PREFERENCE FOR SICK AND DISABLED NAVAL AND MILITARY PENSIONERS AND IN PARTICULAR SUCH PENSIONERS WHO ARE PARAPLEGIC CASES”*

- 1.6 These objects are set out in the Charity Commission Scheme dated 24 October 1980 and replaced the original objects set out in the Deed of Gift dated 14 August 1924.
- 1.7 We understand from the Deed of Gift that the land is freehold and we have relied on this fact in providing this advice.
- 1.8 We have been instructed to advise on the following questions:
- (a) Is the proposed sale of Rookwood Hospital to the Council for the purposes of providing social housing in furtherance of the objects of the Charity?
  - (b) Whilst the sale to the Council will be at a value confirmed by Savills, should CVUHB seek to obtain a higher sale price by advertising the land on the open market, given the fact that the land is prime development land?
- 1.9 We note from the Disposal of Rookwood Hospital Report dated 27 June 2019 that only the main hospital site will be disposed of with the other two sites will continue to belong to CVUHB as sole trustee of the Charity.

## **2. Executive Summary**

### **2.1 Is the proposed sale of Rookwood Hospital to the Council for the purposes of providing social housing in furtherance of the objects of the Charity?**

- (a) The existing objects state that the land must be used as a “*hospital of home...for sick and disables persons...*”. It is proposed that the land will be sold to the Council for social housing. This is not consistent with the existing objects of the Charity and as such it cannot be the case that the disposal of the land is made in furtherance of the charitable objects.

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- 2.2 Whilst the sale to the Council will be at a value confirmed by Savills, should CVUHB seek to obtain a higher sale price by advertising the land on the open market, given the fact that the land is prime development land?
- 2.3 CVUHB must comply with sections 177 to 121 of the Charities Act 2011 (“ChA 2011”). In this regard, CVUHB must obtain written advice from a properly qualified surveyor and advertise the proposed sale on the open market, for such period and in such a manner as the surveyor advises.
- 2.4 CVUHB must follow the advice of the surveyor in relation to advertising the proposed sale, unless the surveyor advises that such action would not be in the best interests of the Charity.
- 2.5 If CVUHB decides not to advertise the sale (either at all or not in accordance with the surveyor’s advice), then it must apply to the Charity Commission’s for an Order authorising the sale at an undervalue. Such an application must be made under section 105 ChA 2011 (power to authorise dealings with charity property).
- 2.6 The Charity Commission would likely expect that CVUHB has taken steps to ensure that the Council will not make a profit on the transaction. In this regard, a clause along the lines of that, if the Council used the land for any purpose other than social housing or if the Council sells to another developer then it will pay full development value to the Charity.
- 2.7 *Designated land and permanent endowment issues*
- (a) The land is designated land (i.e. land that must be used for a particular purpose, in this case as a “hospital or home...for sick and disabled persons...”). As such, under section 121 of ChA 2011 (additional restrictions where land held for stipulated purposes) public notice of the proposed sale must be given (section 121(2)).
- (i) The exception to giving public notice under section 121(2) is where the proceeds of sale will be used to purchase replacement property for the Charity. Spending the proceeds on developing other existing hospital sites is not the same as purchasing replacement property in this context.

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- (b) Alternatively, CVUHB can apply to the Charity Commission for a direction that section 121(2) will not apply to the proposed sale. In making the direction, the Commission must be satisfied that this is in the best interests of the Charity, so a strong case must be made.
- (c) The land is also permanent endowment, being an asset that is intended to be held in perpetuity/forever. Where the land is sold the existing objects of the Charity will attach to the proceeds of sale as opposed to the land. This applies in respect of freehold land only.
- (d) The question then arises as to how the proceeds of sale can be spent (which must be in furtherance of the existing objects). Purchasing land is an acceptable expenditure of permanent endowment but paying for buildings (which are considered to be wasting assets) would not be. In this regard, CVUHB would need to obtain the Charity Commission's consent by way of an Order to expend permanent endowment on buildings, most likely with a requirement for "recoupment".

## 2.8 *Dealing with the proceeds of sale / Cy pres considerations*

- (a) If CVUHB consider that the existing charitable objects are too restrictive and that these objects (which will attach to the proceeds of sale and continue to apply to the two sites that will remain with the Charity) should be widened/modernised, then an application must be made to the Charity Commission for a cy pres scheme pursuant to section 61 ChA 2011.
- (b) Section 62 ChA 2011 sets out the occasions in which a cy pres situation may arise. In terms of the timing for obtaining such a cy pres scheme, this can be made before or after the disposal of the land. However, please be aware that if the scheme is obtained after the disposal, the proceeds of sale must not be spent on the new wider objects until the scheme has been properly obtained.

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**3. Is the proposed sale of Rookwood Hospital to the Council for the purposes of providing social housing in furtherance of the objects of the Charity?**

3.1 The existing objects state that the land must be used as a “*hospital of home...for sick and disables persons...*”. It is proposed that the land will be sold to the Council for social housing. This is not consistent with the existing objects of the Charity and as such it cannot be the case that the disposal of the land is made in furtherance of the charitable objects.

**4. Whilst the sale to the Council will be at a value confirmed by Savills, should CVUHB seek to obtain a higher sale price by advertising the land on the open market, given the fact that the land is prime development land?**

Charities Act 2011 requirements

4.1 CVUHB must comply with sections 177 to 121 of the Charities Act 2011 (“ChA 2011”). In this regard, CVUHB must obtain written advice from a properly qualified surveyor and advertise the proposed sale on the open market, for such period and in such a manner as the surveyor advises.

4.2 CVUHB must follow the advice of the surveyor in relation to advertising the proposed sale, unless the surveyor advises that such action would not be in the best interests of the Charity.

4.3 If CVUHB decides not to advertise the sale (either at all or not in accordance with the surveyor’s advice), then it must apply to the Charity Commission’s for an Order authorising the sale at an undervalue. Such an application must be made under section 105 ChA 2011 (power to authorise dealings with charity property).

4.4 The Charity Commission would likely expect that CVUHB has taken steps to ensure that the Council will not make a profit on the transaction. In this regard, a clause along the lines of that, if the Council used the land for any purpose other than social housing or if the Council sells to another developer then it will pay full development value to the Charity.

Savills valuation – February 2019

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- 4.5 We note that CVUHB has obtained a written valuation from Savills dated February 2019. The valuation provides a “Market Value” of £10,200,000 for the three sites that make up Rookwood Hospital, and £6,000,000 for the main hospital (being the part of the land to be sold). “Market Value” is defined in the report on page 8 (appendix 1). Although the definition refers to “proper marketing”, it does not explicitly state what this would entail. However, we consider that the surveyor assumes that the value it has given is what could be obtained if the land is advertised on the open market.
- 4.6 In order to ensure that the report complies with section 119 ChA 2011, we would recommend that CVUHB instructs its surveyors to advise as to the manner and length of time of advertising the proposed sale. If the surveyor considers that advertising the proposed sale is not in the best interests of the Charity, this should be explained in the report.
- 4.7 To conclude, CVUHB (as sole trustee) is required to advertise the proposed sale in accordance with the surveyor’s advice (section 119(1)(b) ChA 2011).

## **5. Designated Land issues**

- 5.1 The land is designated land (i.e. land that must be used for a particular purpose, in this case as a “hospital or home...for sick and disabled persons...”). As such, under section 121 of ChA 2011 (additional restrictions where land held for stipulated purposes) public notice of the proposed sale must be given.
- 5.2 Before any agreement for sale is entered into, under section 121(2) CVUHB is required to:
- (a) give public notice of the proposed sale, inviting representations to be made within a specific time frame set out in the notice (which must be a minimum of one month from the date of the notice); and
  - (b) take into consideration any representations made during that time frame.
- 5.3 The exception to giving public notice under section 121(2) is where the proceeds of sale will be used to purchase replacement property for the Charity. Spending the proceeds on developing other existing hospital sites (i.e. University Hospital Llandough) is not the same as purchasing replacement property in this context.

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- 5.4 Alternatively, if CVUHB (as sole trustee) does not consider it would be in the best interests of the Charity to give public notice, it can apply to the Charity Commission for a direction that section 121(2) will not apply to the proposed sale. In making the direction, the Commission must be satisfied that this is in the best interests of the Charity, so a strong case must be made.

## **6. Permanent endowment issues**

- 6.1 The land is permanent endowment, being an asset that is intended to be held in perpetuity/forever. This does not automatically prevent a disposal of the land and where the land is sold the existing objects of the Charity will attach to the proceeds of sale as opposed to the land. This applies in respect of freehold land only.
- 6.2 The question then arises as to how the proceeds of sale can be spent (which must be in furtherance of the existing objects). Purchasing land is an acceptable expenditure of permanent endowment but paying for buildings would not be. This is because buildings are considered wasting assets for permanent endowment purposes. This would be the case where CVUHB intends to spend the permanently endowed proceeds of sale on the new building at the University Hospital Llandough (“UHL”) site. In this regard, CVUHB would need to obtain the Charity Commission’s consent by way of an Order to expend permanent endowment on the new build at UHL, most likely with a requirement for “recoupment”.

## **7. Dealing with the proceeds of sale / Cy pres considerations**

- 7.1 If CVUHB consider that the existing charitable objects are too restrictive and that these objects (which will attach to the proceeds of sale and continue to apply to the two sites that will remain with the Charity) should be widened/modernised, then an application must be made to the Charity Commission for a cy pres scheme pursuant to section 61 ChA 2011.
- 7.2 Section 62 ChA 2011 sets out the occasions in which a cy pres situation may arise. We note that the Disposal Report dated 27 June 2019 refers to Rookwood Hospital being no longer suitable for use as a modern healthcare facility and that the care and services currently provided at Rookwood Hospital will be provided at UHL from 2020/2021. On this basis, the application for a cy pres scheme should set out that the original purposes cannot be carried out

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according to the directions given in the original gift and/or the original purposes have be a suitable method of using the property (i.e. the land). Other reasons may also apply.

- 7.3 We note from an email dated 25 November 2015 from the Charity Commission to Ian Davies of Eversheds that at that time the Commission was of the view that a cy pres case had been made on the basis that Rookwood Hospital will no longer be required once the new facility at UHL has been build. The email also refers to the “new purposes” being acceptable in principle. It would be useful to have sight of the initial correspondence with the Commission on this matter and the proposed new objects, if CVUHB proceeds to apply for a cy pres scheme.
- 7.4 Setting out the process for obtaining a cy pres scheme is outside the scope of this note. However, in our experience, this is not a quick process and can take anything from 6-12 months to obtain, depending on any direction by the Commission to give public notice of the proposed scheme and new purposes.
- 7.5 In terms of the timing for obtaining such a cy pres scheme, this can be made before or after the disposal of the land. However, please be aware that if the scheme is obtained after the disposal, the proceeds of sale must not be spent on the new wider objects until the scheme has been properly obtained.

## **8. Next steps**

8.1 In this section we have summarised the steps that should follow in light of our advice.

### **8.2 Sale of land**

- (a) Seek clarification from the surveyor as to the manner in which any marketing of the proposed sale should be conducted, unless the surveyor considers this would not be in the best interests of the Charity.
- (b) Where the CVUHB (as sole trustee) does not wish to follow the surveyor’s advice as to marketing the sale, it cannot proceed with the disposal without a Charity Commission Order authorising the sale at an undervalue. Such an application must be made under section 105 ChA 2011.

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### 8.3 Designated land issues

- (a) As the land is designated land, public notice of the proposed sale must be given under section 121 of ChA 2011. The exact requirements are set out in section 121(2).
- (b) The exception to this requirement is where the proceeds of sale will be used to purchase replacement property for the Charity. Spending the proceeds on developing other existing hospital sites is not the same as purchasing replacement property in this context.
- (c) Alternatively, the charity can apply to the Charity Commission for a direction that section 121(2) will not apply to the proposed sale. In making the direction, the Commission must be satisfied that this is in the best interests of the Charity.

### 8.4 Permanent endowment issues

- (a) The land is permanent endowment and where the land is sold the existing objects of the Charity will attach to the proceeds of sale as opposed to the land.
- (b) Consideration must be given to how the proceeds of sale can be spent (which must be in furtherance of the existing objects). Purchasing land is an acceptable expenditure of permanent endowment but paying for buildings would not be. If CVUHB wants to spend the proceeds of sale on buildings it would need to obtain a Charity Commission Order to expend permanent endowment on buildings, most likely with a requirement for “recoupment”.

### 8.5 Dealing with the proceeds of sale / Cy pres considerations

- (a) CVUHB may need to obtain a cy pres scheme pursuant to section 6 ChA 2011 if a cy pres occasion arises under section 62.

## 9. **Conclusion**

- 9.1 Should you require further advice or clarification in relation to this Legal Advice, please do not hesitate to contact Bethan Walsh ([bethan.walsh@geldards.com](mailto:bethan.walsh@geldards.com) / 029 2039 1832).

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