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| <p style="text-align: center;">HIGHLAND HEALTH BOARD ENDOWMENT FUND</p> | <p>Assynt House Beechwood Park Inverness IV2 3BW Tel: 01463 717123 Fax: 01463 235189 Textphone users can contact us via Typetalk: Tel 0800 959598 www.nhshighland.scot.nhs.uk</p> |  |
| <p style="text-align: center;">DRAFT MINUTE of MEETING of the ENDOWMENT FUNDS COMMITTEE Microsoft Teams</p> | <p style="text-align: center;">26 October 2020, 10.00am</p> | |

Present

Mrs Deirdre Mackay, Chair of Trustees
Ms Jean Boardman, Trustee
Mr David Garden, Trustee
Mr Adam Palmer, Trustee
Dr Gaener Rodger, Trustee

In Attendance

Mr Iain Addison, Head of Area Accounting
Miss Leah Girdwood, Board Committee Administrator
Mr Donald Mackenzie, Assistant Financial Services Accountant
Mr Kenny Rodgers, District Manager (until 10.55am)

1 WELCOME/APOLOGIES

All present were welcomed to the meeting. Apologies were received from Janice Pickering.

2 DECLARATIONS OF INTEREST

Members were asked to consider whether they had an interest to declare in relation to any Item on the Agenda for this meeting. It was noted that all Trustees are also Board members of NHS Highland.

3 DRAFT MINUTE OF MEETING HELD ON 17 AUGUST 2020

The minute of the meeting held on 17 August 2020 was **Approved**.

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| <p>The Committee Approved the circulated draft minute of the meeting held on 17 August 2020.</p> |
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4 DRAFT MINUTE OF MEETING OF TRUSTEES HELD ON 28 JULY AND 29 SEPTEMBER 2020

The circulated draft minutes were **Noted**.

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| <p>The Committee Noted the circulated draft minute of the meeting of the Trustees held on 28 July and 29 September 2020.</p> |
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5 MATTERS ARISING NOT ON THE AGENDA

5.1 Risk Register

I Addison spoke to the previously circulated report. The risk register was managed on a monthly basis but had not been presented to the Committee since May 2020 where some risks were identified as being in a position to be removed from the register. 3 open risks remained on the register which was being monitored. I Addison highlighted the risks from the separation of Endowments and the NHS, which would involve identifying legal routes for the separation of the funds. The work to separate Endowments from the NHS had been expected to complete pre-Covid but this had been delayed. The change was being made due to a number of Boards using Endowments to fund projects which should have been funded from the exchequer.

During discussion, the following points were considered:

- Some of the issues relating to managers use of funds was down to capacity, but there were also issues with communication.
- A working group had been implemented nationally to establish the impact of the separation of Endowments donations from NHS Boards.
- Misspending risk had been removed from the risk register previously as it had been decided that the level of checks carried out were sufficient enough to mitigate the risk.
- Risks relating to the capacity to support the Endowment process could be added to the risk register.

D Garden was concerned with the level of the risks contained on the register, suggesting they should not be high. The level of risk contained on the register should be in line with the level of risk following mitigating actions. I Addison agreed to review this with the risk manager in February 2021 when the risks were to be reviewed.

G Rodger went on to suggest the layout of the risk register should be updated to ensure it was in line with the NHS Highland Board risk register for standardisation across all Committees.

5.2 Update on Impact of Adverse Publicity on Donations

I Addison advised the impact of publicity on donations was included on the risk register as it was recognised publicity would have an impact on donations, whether this was positive or negative. The risk was being monitored to see if there was much change in the levels of donations and a report on this could be presented to the next meeting of the Committee.

The Committee:

- **Noted** the risk register
- **Noted** the update on the impact of adverse publicity on donations
- **Agreed** a report on the impact of publicity on donations would be brought to a future meeting

6 UPDATES

6.1 Raigmore Car Park Development Update

An update on the progress of the project at Raigmore Car Park, which had been funded from Endowments, was sought as there had not been a full update received on the matter since before Covid-19. I Addison advised there had previously been delays in the barriers working and monitoring the car park, as well as delays with implementing the system to charge those who abused the use of the car park. I Addison advised no full update was received in time for

the meeting so no further information was available. D Garden suggested a relevant representative for the work should be invited to the next meeting to provide an update on the work, as well as producing a written report.

G Rodger advised she had recently visited Raigmore Hospital and had been surprised to see there were barriers outwith the main car park. She queried whether these additional barriers had been paid for by Endowments. She also highlighted a continued issue with the quality of the car park which had potholes. I Addison confirmed the ongoing maintenance costs were to be funded from exchequer budgets and this had been made clear when the application was first submitted. It was hoped that D Park could provide more information on this as part of the report for the next meeting.

The Committee Noted the lack of progress with the Car Park Development at Raigmore Hospital and **Agreed** to invite D Park / K Sutton / D Bedwell to the next meeting to provide an update.

7 THERESA BURRALL LEGACY FUND

It had been agreed at the last meeting of the Committee that K Rodgers should attend to provide an overview of the work on the Theresa Burrall legacy fund. K Rodgers confirmed St. Vincent’s hospital in Kingussie would close in 2021 and part of the redesign had been to work with communities to look at the specifics of the Theresa Burrall legacy which had been left to St Vincent’s hospital. The value of the fund had not changed much and it was becoming increasingly more difficult to spend the money. K Rodgers was working with communities to identify proposals for the future of the fund. The Chair recognised the difficulties which can sometimes be faced when working with communities, and thanked K Rodgers for his work.

During discussion, G Rodger noted the outcome from the last meeting had been to fund The Therapy Garden in principle and sought clarification on what the expected outcome for the discussion at this meeting was. I Addison confirmed the legal agreement from OSCR and the Central Legal Office (CLO) was required and Endowments would have to establish that members of the community would benefit from the change and that the community were happy with the proposals for the use of the funds. The most important aspect was ensuring the future of the fund would be as close to the original legacy as possible. Once the change required to the legacy had been approved by the Trustees, it would be sent to OSCR and the CLO for approval, only then would applications start to be received for the use of the funds.

G Rodger noted surprise that the community had not agreed to transfer the legacy funding to the new hospital in Aviemore which would service the communities in the area. K Rodgers advised this had presented a challenge when consulting with members of the community. There had been a misconception that the fund belonged to Kingussie rather than with St. Vincent’s hospital which would have serviced patients from beyond Kingussie. Consultations had eventually led to agreement that the funds should be used for health and social care services in the Badenoch and Strathspey area.

Members agreed that the next step should be to agree the principle for the legacy in the future, confirming what the funds should be used for and evidencing consultation with the community. D Mackenzie added there would not be much benefit in agreeing proposals for use of the funds yet; applications could be approved once the principle for the legacy was agreed. I Addison and K Rodgers agreed to produce a form of words which would reflect the changes to the legacy. This would be emailed to Committee members for approval before being sent to the CLO.

The Committee:

- **Noted** the update

- **Agreed** I Addison and K Rodgers would produce a form of words for the legacy for approval by email.

8 INVESTMENT FUNDS

8.1 Portfolio Valuation Report as at 30 September 2020

There had been previously circulated the portfolio valuation report as at 30 September 2020.

The Committee Noted the portfolio valuation report as at 30 September 2020.

9 APPLICATIONS

There had been no applications received since the last meeting.

10 FINANCIAL REPORTS

10.1 Items of Expenditure over £5,000 to 31 August 2020

G Rodger questioned whether the expenditure for the children's ward could have been funded from the Covid-19 fund. D Mackenzie confirmed the request had been from their own fund and was not raised as a Covid-19 issue.

The Committee **noted** the items of expenditure over £5,000 to 31 August 2020.

10.2 Donations over £5,000 to 31 August 2020

A Palmer highlighted the £25,000 donation for nursing staff, questioning whether there had been any considerations on how the funding could be spent. D Mackenzie confirmed the donor did not stipulate what the money should be spent on, only that it was to be for the benefit of staff.

D Garden highlighted the Covid donations which had been made directly to NHS Highland, suggesting there should be a Covid specific fund for Endowments to use, rather than these donations being added to general funds. D Mackenzie confirmed there was a separate Covid fund for local donations which was held separately from the funding received from NHS Charities Together.

The Committee **noted** the donations over £5,000 to 31 August 2020.

10.3 Fund Balances as at 31 August 2020

The Committee **noted** the fund balances as at 31 August 2020.

11 AOCB

A Palmer noted that there had been discussion at the meeting of the Trustees on 29 September relating to the funding from NHS Charities Together (NHSCT). Paul Hawkins had explained there had been a staff suggestion scheme used in NHS Fife which gathered a number of responses for how to spend funds in innovative ways. A Palmer thought a similar scheme would be beneficial in NHS Highland. The Chair suggested the model used in NHS Fife could be replicated in Highland. I Addison agreed to approach Endowments in NHS Fife

to understand more on their approach and take the work forward with A Palmer. J Boardman felt there needed to be more discussion relating to other staff groups impacted by Covid-19 as there had been more focus on clinical staff. D Mackenzie echoed these views, advising requests to managers for ideas for funding should consider all staff and all staff groups should be aware of what funding was available.

12 DATES OF FUTURE MEETINGS

Members **approved** the proposed meeting schedule for 2021 as follows:

1 March 2021
7 June 2021
6 September 2021
6 December 2021

It was noted that all meetings would take place on Mondays at 10.00am.

13 DATE OF NEXT MEETING

The next scheduled meeting of the Committee will be held on **1 March at 10.00am**, venue to be confirmed.

The meeting closed at 11.20am