



Board of Directors

SUMMARY REPORT

Meeting Date: 25th September 2024
Agenda Item: 25

Report Title:	Charity Governance - Relationship with Sheffield Hospitals Charity and our involvement in Charity Related Events		
Author(s):	James Drury, Director of Strategy		
Accountable Director:	James Drury, Director of Strategy		
Other meetings this paper has been presented to or previously agreed at:	Committee/Tier 2 Group/Tier 3 Group	Finance and Performance Committee	
	Date:	August 2024	
Key points/recommendations from those meetings	Recommendations accepted to continue developing the relationships and refining the processes to strengthen Trust engagement.		

Summary of key points in report					
Relationships between SHSC and Sheffield Hospitals Charity are developing. This is the result of concerted efforts by both organisations. To date practical benefits are limited. However, it is recommended that the current and proposed actions are pursued for the remainder of 2024 to continue the positive trajectory.					
Recommendation for the Board/Committee to consider:					
Consider for Action		Approval		Assurance	Information X
The Board is asked to note the update, ask clarifying questions, and share observations and advice					

Please identify which strategic priorities will be impacted by this report:					
	Effective Use of Resources	Yes	x	No	
	Deliver Outstanding Care	Yes	x	No	
	Great Place to Work	Yes	x	No	
	Ensuring our services are inclusive	Yes	x	No	
Is this report relevant to compliance with any key standards ? State specific standard					
Care Quality Commission Fundamental Standards	Yes		No		n/a
Data Security and Protection Toolkit	Yes		No		n/a

Any other specific standard?					n/a
Have these areas been considered ? YES/NO					If Yes, what are the implications or the impact? If no, please explain why
Service User and Carer Safety, Engagement and Experience	Yes	x	No		
Financial (revenue & capital)	Yes	x	No		
Organisational Development /Workforce	Yes	x	No		
Equality, Diversity & Inclusion	Yes	x	No		Please complete section 4.3 in the content of your report
Legal	Yes	x	No		
Environmental sustainability	Yes	x	No		

Charity Governance - Relationship with Sheffield Hospitals Charity and our involvement in Charity Related Events

Section 1: Analysis and supporting detail

Background

- 1.1 Sheffield Hospitals Charity [Sheffieldhospitalscharity.org.uk](https://sheffieldhospitalscharity.org.uk) | [Sheffield Hospital Charity](https://sheffieldhospitalscharity.org.uk) is a local charitable organisation which aims to support SHSC and Sheffield Teaching Hospitals. The Charity aims to *“help Sheffield’s hospitals, community teams and health and social care services to cover costs their NHS budgets can’t. We fund support for patients and staff, life-changing research and more, so that we can enhance care from birth to the end of life and everything in between. We aim to fund at least £2 million of high-impact projects across Sheffield’s NHS every single year.”*
- 1.2 The recently launched strategy of Sheffield Hospitals Charity (SHC) [sheffieldhospitalscharity.org.uk/storage/documents/SHC Strategy Document 24-27.pdf](https://sheffieldhospitalscharity.org.uk/storage/documents/SHC%20Strategy%20Document%2024-27.pdf) sets out four priority themes for their grant-giving work, which are aligned to the SHSC strategic direction:
 - 1.2.1 Supporting patient and people centred experiences.
 - 1.2.2 Supporting caring and cared for staff
 - 1.2.3 Reducing health inequalities in Sheffield
 - 1.2.4 Maximising technology, research and innovation
- 1.3 SHC manages a significant un-restricted fund generated through charitable fund raising activities and individual charitable giving. In addition, it manages on behalf of SHSC a number of small, restricted funds, which have limitations placed on their use e.g. for a specific ward. The annual charity governance report earlier in 2024 detailed

the values of the restricted funds (circa £70k total). By contrast the total funds managed by SHC are circa £14m.

- 1.4 SHC has a well-resourced and professional team that manages the work of the Charity. Understood to be circa 14 staff.

Relationships with SHC

- 1.5 Historically SHC has been largely focused on Sheffield Teaching Hospitals NHS FT, and the extent of the relationship with SHSC has been limited. Over the last six months both SHC and SHSC have sought to change that.
- 1.6 Efforts to strengthen relationships have included;
 - 1.6.1 One to one relationship building with SHC CEO and senior team members
 - 1.6.2 Contributions to SHC strategy refresh
 - 1.6.3 Attendance at SHC public facing events
 - 1.6.4 Convening thought leaders to help inform SHC grant giving activity in relation to dementia, learning disabilities, and tackling inequalities
 - 1.6.5 Internal SHSC promotion of SHC 'calls' for funding ideas, encouraging colleagues to apply for funds
- 1.7 As a result of these efforts, relationships have developed to some degree. However, so far there has been relatively little tangible progress with grant giving to SHSC.

Practical processes

- 1.8 One of the reasons that there has been relatively little change in grant giving to SHSC is confusion and mis-alignment of practical processes related to applying for funding.
- 1.9 Nevertheless as these issues are encountered, they offer an opportunity to clarify and align processes within SHSC, and between SHC and SHSC. There have also been changes in key personnel that have impacted on continuity.
- 1.10 As a result we remain hopeful that improvements can continue to be made and processes streamlined and effectively promoted. In a further six months.

Decision making

- 1.11 In addition to the practical processes of applying for funds from SHC, the decision making processes of the Charity remain an area where it is necessary to develop a deeper understanding in order to maximise the strategic benefits of the relationship.
- 1.12 The approach taken towards grants which support local VCS organisations, as opposed to NHS Trusts is an example of an area needing further development. Particularly in relation to the goal of tackling inequalities, it is often advantageous to resource community organisations rather than statutory bodies. We will continue to work with SHC to clarify this policy.
- 1.13 Similarly, the concept of 'funding things that the NHS cannot', and of 'additionality' often proves to be an area in which decision making is not yet predictable. We will continue to work with SHC to understand the views of others and to explain the view of SHSC.
- 1.14 The key aspect of decision-making requiring resolution is the approach to the existence of restricted funds. A common reason for rejection of bids to open thematic funds has been that a restricted fund exists that could have been used.

Examples of recent grant making

- 1.15 Provision of a safe green house at Forest Lodge to enable service users to participate in a wider range of gardening and food production activities.
- 1.16 Support for 'creative health' input to the decoration of a staff kitchen and rest area, to promote workforce wellbeing.
- 1.17 Funding of a Somali peer worker in a local community organisation, working into SHSC services, to build cultural competence in services, address inequalities in access and outcomes, and to promote good mental wellbeing in an under-served community.

Next Steps

- 1.18 In the remaining months of 2024, there are plans for joint SHC/SHSC presentations to SHSC staff to promote the opportunity to apply for funds. This will also support better understanding of the practical process of applying.
- 1.19 Additionally, colleagues in finance, procurement and strategy are developing SOPs to support effective operations of the grant giving process working across SHC and SHSC.
- 1.20 Participation in SHC decision making panels will also support a better understanding of the rationale for decisions. In turn that will help with the provision of good advice to colleagues seeking to apply.
- 1.21 Recruitment to the role of AD Comms and Corporate Governance will provide a little additional capacity to oversee these activities. Although it is noted that the additional capacity is not primarily directed towards this.
- 1.22 A strategy conversation with SHC is imminent, through which SHSC will be able to set out some strategic areas for funding in addition to the individual team level applications that are typically made. This is informed by the SHSC business planning process, and business cases received at BPG.

Summary

- 1.23 Progress has been made with the relationship between SHC and SHSC. This is acknowledged while also noting that practical benefits have been limited so far. The lack of clarity and unpredictability of the practical processes associated, has meant that a disproportionately large commitment of effort has been required to reach this current state. Nevertheless, the sense that further progress is imminent inspires a feeling of hope and confidence, that the time spent so far is a worthwhile investment for the future.
- 1.24 By the end of 2024 we will be in a more informed position to consider long term direction.