

Corporate Governance Report – Additional Information

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Information Governance

- Submission of our compliance against the NHS Digital ‘Data Security and Protection (DS&P) Toolkit’ was completed and published on 12th June 2025. Next submission is due before the 30 June 2026. There have been only very minor changes to the assessment criteria.
- Richard Harman, our Data and Insight Manager has supported the Hospice Heads in documenting their disaster recovery plans. He will begin looking at the Hospice’s data mapping system in 2026/27. He is currently leading the implementation of the VANTAGE software project that will replace and build upon the DATIX system.

Information Security

- This item is covered in report by the Director of IT and Estates.
- Coverage of most recent IG business is captured in the minutes of the IG&S Committee last held on 22nd January 2026. Next meeting is scheduled in May 2026.

Policy Management

	Jan-24	Jul-24	Jan-25	May-25	June -25	Oct-25	Jan 26	Apr 26
Up to date Policy	87%	90%	87%	86%	87%	89%	87%	83%

- There were 14 policies / standard operating procedures published/revised between 21/01/2025 and 28/04/2026
- There were 28 policies / standard operating procedures published/revised between 09/10/2025 and 20/01/2026
- There were 19 policies / standard operating procedures published/revised between 10/07/2025 and 08/10/2025
- There were 6 policies / standard operating procedures published/revised between 02/05/2025 and 09/07/2025
- There were 24 policies / standard operating procedures published/revised between 16/01/2025 and 01/05/2025
- There were 30 policies / standard operating procedures published/revised between 12/07/2024 and 15/01/2025

- A quantitative summary shows distribution and progress for organisational policy review against v1.90 of the Policy Manual Index.

Review Leads	No of policy documents	Out of Date (OOD)	%OOD
A Angarita	1	0	0%
A Machin	5	5	100%
A Rudkin	32	1	3%
C Foster	1	0	100%
E Lunn	2	0	0%
Dr G Tamura-Rose	7	0	0%
G Toubal	2	0	0%
H Dolling	22	0	0%
H Syddall	10	0	0%
J Ford	2	1	50%
J Groom	11	6	55%
K Hobson	2	0	0%
M Flint	5	0	0%
Dr N Collins / Dr G Tamura-Rose	15	6	40%
Dr N Collins	4	0	0%
N Page	25	9	36%
N Stevens	6	3	50%
N Theodorou	2	0	0%
N Vadgama	1	0	0%
P James	1	0	0%
P Morris	10	0	0%
R Carman	1	0	0%
R Carman / G Craig	1	1	100%
R Trower	19	1	5%
R Trower / A Rudkin	1	0	0%
R Trower / N Stevens	8	0	0%
S Mosalam	3	0	0%
TOTALS	199	33	17%
Past Expected Review Date	33	17%	

Health & Safety

- Fire risk assessments remain in place for all buildings and retail premises and were last renewed by our Facilities Manager and lead on fire safety in August 2024.
- Quotations were received from [Pearson/Webb Health & Safety and Fire Safety Consultants](#) and [Assured Partners \(Hettle\)](#) with whom we have a long-standing relationship to undertake fire risk re-assessments across all premises and a Health & Safety Audit for the main site. The quote from Assured is the more competitive and the work that will cover a fire risk assessment of all retail premises and main site buildings alongside a health and safety audit is planned for September 2026.
- Regular visits to the retail premises by the Facilities team remain in place and feedback on communications remains good.
- Updates are included within the minutes of our Health & Safety Committee. The last meeting was held in February 2026.
- The health and safety checklist re-audit in Retail will be undertaken again this year.

- A review of General Risk Assessments is to be completed before the end of June 2026 across all departments and premises and HoDs are advised that they should show evidence of review within a default 2 year review/update.
- Risk Assessment training is scheduled for 17th June 2026 on site.
- Further fire door replacement works are expected in the main Hospice this year.
- Completion of the H&S checklist audit on the main site was pended over the summer due to staffing issues in Facilities and prioritising of available resources. The Team is back to full establishment now and our Facilities Manager and team will be undertaking these assessments over the course of 2026.

RISK MANAGEMENT

NON-CLINICAL RISK MANAGEMENT DATA

Distribution of Accidents (Injurious) and Incidents (Non-injurious)

2026 Month	Staff		Visitor/ Customer		Volunteer		Contractor		Not App		2026 Total	2025 Total	2024 Total	2023 Total
	Acc	Inc	Acc	Inc	Acc	Inc	Acc	Inc	Acc	Inc				
Jan	(1)			2(2)		(1)				2(2)	6(6)	1	15(10)	3(2)
Feb				1		(1)					2(1)	4(2)	9(8)	7(4)
Mar				(2)						1	3(2)	2(1)	2(1)	8(6)
Apr												9(8)	7(5)	7(4)
May												8(5)	1(1)	11(9)
Jun												2(2)	4(2)	7(3)
Jul												6(6)	5(4)	8(5)
Aug												4(3)	1(1)	5(4)
Sep												10(7)	3(2)	13(9)
Oct												5(3)	5(4)	5(1)
Nov												5(3)	1	6(3)
Dec												4(2)	4(3)	1(1)
2026	(1)			5(4)		(2)				3(2)	11(9)			
2025	4(3)	13(7)	2	14(11)	2(1)	7(6)	0	0	0	18(14)		60(42)		
2024	4(3)	15(9)	0	16(15)	7(5)	5(4)	0	0	0	11(5)			57(41)	
2023	4(2)	11(5)	1(1)	27(24)	3(2)	9(9)	0	0	0	26(8)				81(51)

Notes : In 2026, there have been no non-clinical incident/ accidents that have required RIDDOR report. All incidents classified as either Minor/No Harm/Low Harm.

Breakdown of Accidents (injurious) & Incident (non-injurious)

Accidents	Staff	Visitor	Vol	Contractor	Not App	2026	2025	2024	2023
Manual Handling								0	0
Impact/Bump							4(4)	0	0
Burn/Scald								1	0
Allergic Reaction								0	0
Other								0	0
Cut							2	5(5)	5(4)
Slip/Trip/Fall	(1)					(1)	2	5(3)	2(1)
2026 Total	(1)					(1)			
2025 Total	4(3)	2	2(1)				8(4)		
2024 Total	4(3)	0	7(5)	0	0			11(8)	
2023 Total	4(2)	1(1)	2(2)	0	0				7(5)

[Figures in brackets show the Fundraising/Retail reported incidents]

Incidents (non-injurious)	Staff	Visitors / Customers	Vols	Contractor	N/A	2026	2025	2024	2023
Lost Property							0	0	0
Legionella / Bacteria Reading							0	2	2
Driving / Car Park			(1)			(1)	2(2)	1	5(4)
Environment Issue / Damage		(1)				(1)	9(9)	3(3)	5(4)
Equipment							1(1)	1(1)	2(1)
Fire Alarm					1	1	1(1)	4(2)	3(2)
Fire							1		
Health Problem							3	2	4(3)
Lone Worker Device False Alarm							0	0	1
Information Incident		(1)				(1)	3(2)	0	5(1)
Major Incident – Suspicious Package							1		
Retail Customer Service Incident							2(2)	0	0
Other							5(3)	2(1)	0
Power Cut							1	2(1)	9
Security / Theft / Fraud / Burglary		4(3)			(1)	5(4)	11(10)	15(13)	19(14)
Slip/Trip/Fall/Faint			(1)			(1)	3	4(2)	3(3)
Slip/Trip/Fall/Faint Nr Miss							1		
Impact/Bump							0	2(2)	1
Policy non-compliance							0	1(1)	0
Unplanned Shop Closure							2(2)	1(1)	0
Verbal/ Physical Violence / Behaviour							6(6)	6(6)	15(14)
2026 Total		6(5)	(2)		2(1)	10(8)			
2025 Total	13(7)	14(11)	8(7)		17(14)		52(38)		
2024 Total	11(6)	16(14)	5(5)	0	14(8)			46(33)	
2023 Total	12(5)	27(24)	10(10)	0	25(7)				74(46)

[Figures in brackets show the Fundraising/Retail reported incidents]

2026 Breakdown of Incidents by month

Type	Lost Property	Legionella / Bacteria Reading	Power cut	Slip/Trip/Fall/Faint	Slip/Trip/Fall/Faint : Equipment	Health Problem	Verbal/ Physical Violence / Behaviour	Man Hand	Enviro Issue / Damage	Impact Bump	Lone Worker Device False Alarm	Info Inc	Major Incident – Unplanned Shop Shut	Policy non-compliance	Retail Customer Service Incident	Fire	Fire Alarm	Security / Theft / Fraud / Burglary	Driving / Car Park	Other	Equipment	2026	2025	2024	2023
Jan				(1)					(1)									3(3)				5(5)	0	12(7)	3(2)
Feb																		1(1)	(1)			2(1)	4(2)	5(4)	7(4)
Mar												(1)				1		(1)				3(2)	2(1)	1(1)	8(5)
Apr																							7(6)	6(5)	6(3)
Ma																							7(5)	1(1)	11(9)
Jun																							2(2)	2(1)	7(3)
Jul																							6(6)	5(4)	7(4)
Au																							2(1)	1(1)	4(3)
Se																							10(7)	3(2)	11(8)
Oct																							4(3)	5(4)	4(1)
No																							4(3)	1	5(3)
De																							4(2)	4(3)	1(1)
2026				(1)					(1)									4(3)	(1)			10(8)			
2025			1	3	1	3	(6)		(9)			3(2)	1	(2)	(2)	1	(1)	11(10)	(2)	5(3)	(1)		52(38)		
2024		2	2(1)	4(2)		2	6(6)		3(3)	2(2)			1(1)	1(1)			4(2)	15(13)	1	2(1)	1(1)			46(33)	
2023		2	9	3(3)		4(3)	15(14)		5(5)	1	1	5(1)					3(2)	20(14)	4(3)		2(1)				74(46)

[Figures in brackets show the Fundraising/Retail reported incidents]

Complaints

The annual review meeting for complaints held by the Executive is scheduled for June 2025.

All clinical complaints are reviewed at the CQ&G Sub-committee.

The number of complaints logged in 2026 is 2; both of which relate to retail.

2026 - Complaints	CPCT / H@H Care	CPCT / H@H Comms	CPCT Care & Comms	H@H Comms	Wellbeing Comms	IPU Discharge	IPU Care	IPU Comms	IPU Care & Comms	OPD Comms	Counselling Comms	Bereavement Comms	Bereavement Comms	Reception Comms	Volunteer Services	Retail Comms	Supporter Care	HR	Total	Merton	Sutton	Other	UPHELD in Whole or Part
January																1			1				1
February																1			1				1
March																			0				
April																			0				
May																			0				
June																			0				
July																			0				
August																			0				
September																			0				
October																			0				
November																			0				
December																			0				
2026	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	2				
2025	2	0	3	0	1	0	0	0	1	0	1	0	1	0	1	13	1	0	24	6	3	0	17
2024		1													1	15			17	0	1	0	16
2023	1	4					1	4				1		1		10			22	3	9	0	20

Non-clinical Complaints: January – March 2026

ID	FROM	DATE RECEIVED	DETAILS OF COMPLAINT	MAIN CLASS	ACTION TAKEN SUMMARY	UPHELD IN PART OR WHOLE
2026/01	Customer	20/01/2026	A customer's donation of curtains were refused at Sutton DC.	SDC Customer Service	Written apology sent to donor and advise provided that staff have been reminded about what the prohibited list items are; that sellable curtains are not prohibited and what good customer service should look like for the future.	Upheld
2026/02	Customer	24/02/2026	A customer's donations were refused at Cheam. The Commercial Manager rang the shop and the Manager explained that he was on his own in the shop with so many donations he thought it was unsafe to accept any more donations.	Cheam Customer Service	Apology provided. The Commercial Manager reminded the shop manager we must never refuse donations, unless they are on the prohibited list and if he needs donations to be collected and taken to the Donation Centre, to contact his Lead Manager	Upheld

The author of this paper is Mr A Rudkin BA (Hons), Head of Quality & Governance/Information Security Officer/H&S, CAAD & IG&S Committee Chair/Data Protection Lead/ HoDS/CHoDs/D&TC/IP&C/CAAD/attendee at CQ&G + F&R.