

Corporate Governance Report – Additional Information

Contents

Information Governance	1
Information Security.....	1
Policy Management.....	1
Health & Safety.....	2
Complaints.....	6

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.
- Richard Harman, our Data and Insight Manager has supported the Hospice Heads in documenting their disaster recovery plans and the exercise is nearly at a close. He will begin looking at the Hospice’s data mapping system in 2025/26.

Information Security

- This item is covered in report by the Head of IT and Facilities.
- Coverage of most recent IG business is captured in the minutes of the IG&S Committee last held on 4th June 2025.

Policy Management

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

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

- A quantitative summary shows distribution and progress for organisational policy review against v1.87 of the Policy Manual Index.

Review Leads	No of policy documents	Out of Date (OOD)	%OOD
A Angarita	1	0	0%
A Jackson	2	0	0%
A Machin	5	1	20%
A Rudkin	32	2	6%
C Foster	1	1	100%
D Bromboszcz	1	0	0%
E Lunn	2	0	0%
F Quinon	18	0	0%
Dr G Tamura-Rose	10	0	0%
G Toubal	2	0	0%
J Ford	2	0	0%
J Groom	11	0	0%
K Hobson	2	0	0%
M Flint	5	0	0%
Dr N Collins / Dr G Tamura-Rose	16	6	38%
Dr N Collins	5	2	40%
N Page	25	3	12%
N Stevens	5	3	60%
N Stevens & B Trower	9	1	11%
P James	1	0	0%
P Morris	10	1	10%
B Trower	18	0	0%
B Trower / A Rudkin	1	0	0%
S Mosalam	3	0	0%
S-J Woods / K Billingham-Wilson	1	1	100%
CPCT Head	10	0	0%
TOTALS	198	21	11%
		11%	

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.
- Engaging an external Health & Safety/Risk Management professional to complete a Health & Safety Audit for the main site and primarily the renewal of the fire risk assessments across all premises should be arranged in 2026 subject to budget across all premises but as an imperative for the main Hospice building. I have requested a competitive quote for all works broken down across areas from [Pearson/Webb Health & Safety and Fire Safety Consultants](#) whose Directors we have previously worked with when they both worked for Hettle.
- 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 October 2025.
- The health and safety checklist re-audit in 2025 was reported in for the retail premises. Results are very encouraging and the team is to be commended. Report is included with papers and individual Shop compliance is set out below.

- A review of General Risk Assessments is underway across all departments and premises and HoDs are advised that they should show evidence of review within a default 2 year review/update.
- We are currently arranging a Risk Assessment training session available to our HoDs and risk assessors in January/February 2026.
- 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 2025/26.
- There are three main buildings works projects expected to be complete before the end of 2025 covering the staff changing area in the main Hospice, the refurbishment and re-design of Clean Supply in the main Hospice and the re-development of the Hospice mortuary into a multi-faith space. Works on the re-design of the Hospice of Clean Supply (Drug Storage) on the IPU are currently underway.

RISK MANAGEMENT

NON-CLINICAL RISK MANAGEMENT DATA

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

2025 Month	Staff		Visitor/ Customer		Volunteer		Contractor		Not App		2025 Total	2024 Total	2023 Total	2022 Total
	Acc	Inc	Ac	Inc	Ac	Inc	Acc	Inc	Ac	Inc				
Jan			1								1	15(10)	3(2)	6(4)
Feb		1		2(2)						1	4(2)	9(8)	7(4)	8(6)
Mar				1		1(1)					2(1)	2(1)	8(6)	12(10)
Apr		4(3)		3(3)	1(1)					1(1)	9(8)	7(5)	7(4)	2(2)
May	1	2(1)		1(1)		1				3(3)	8(5)	1(1)	11(9)	7(6)
Jun						1(1)				1(1)	2(2)	4(2)	7(3)	8(5)
Jul		3(3)				2(2)				1(1)	6(6)	5(4)	8(5)	5(4)
Aug	2(2)	1								1(1)	4(3)	1(1)	5(4)	7(5)
Sep		5(3)		1(1)		1(1)				3(2)	10(7)	3(2)	13(9)	8(7)
Oct												5(4)	5(1)	3(2)
Nov												1	6(3)	5(3)
Dec												4(3)	1(1)	8(4)
2025	3(2)	16(10)	1	8(7)	1(1)	6(5)	0	0	0	11(9)	46(34)			
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)	
2022	10(6)	19(10)	1(1)	24(23)	3(3)	3(3)	0	0	0	19(12)				79(58)
2021	11	9(2)	(1)	0	2(1)	2(1)	0	(1)	0	8(6)				

Notes : In 2025, there have been no non-clinical incident/ accidents that have required RIDDOR report. All incidents classified as either Minor/No Harm/Low Harm. One volunteer accident has had notification sent to our insurers for their information.

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

Accidents	Staff	Visitor	Vol	Contractor	Not App	2025	2024	2023	2022
Manual Handling							0	0	0
Impact/Bump	2(2)		1(1)			3(3)	0	0	3
Burn/Scald							1	0	1(1)
Allergic Reaction							0	0	0
Other							0	0	0
Cut	1					1	5(5)	5(4)	3(3)
Slip/Trip/Fall		1				1	5(3)	2(1)	7(6)
2025 Total	3(2)	1	1(1)			5(3)			
2024 Total	4(3)	0	7(5)	0	0		11(8)		
2023 Total	4(2)	1(1)	2(2)	0	0			7(5)	
2022 Total	10(6)	1(1)	3(3)	0	0				14(10)
2021 Total	11	0	3(2)	0	0				

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

Incidents (non-injurious)	Staff	Visitors / Customers	Vols	Contractor	N/A	2025	2024	2023	2022
Lost Property							0	0	6(6)
Legionella / Bacteria Reading							2	2	2
Driving / Car Park			(2)			2(2)	1	5(4)	1
Environment Issue / Damage					(6)	6(6)	3(3)	5(4)	3(3)
Equipment					(1)	1(1)	1(1)	2(1)	1(1)
Fire Alarm					(1)	1(1)	4(2)	3(2)	1
Fire	1					1	0	0	0
Health Problem	1		1			2	2	4(3)	2(2)
Lone Worker Device False Alarm							0	1	3(2)
Information Incident	(1)				2(1)	3(2)	0	5(1)	8(2)
Major Incident – Suspicious Package					1	1			
Retail Customer Service Incident			(1)			1(1)	0	0	2(2)
Other	2(1)		(2)			4(3)	2(1)	0	7(4)
Power Cut							2(1)	9	3(2)
Security / Theft / Burglary	(1)	6(6)			2(1)	9(8)	15(13)	19(14)	17(17)
Slip/Trip/Fall/Faint	2	1				3	4(2)	3(3)	4(2)
Impact/Bump	(1)		(1)			2(2)	2(2)	1	1(1)
Policy non-compliance							1(1)	0	0
Unplanned Shop Closure	1(1)					1(1)	1(1)	0	0
Verbal/ Physical Violence / Behaviour	2(2)	2(2)				4(4)	6(6)	15(14)	4(4)
2025 Total	12(7)	9(8)	7(6)		13(10)	41(3)			
2024 Total	11(6)	16(14)	5(5)	0	14(8)		46(33)		
2023 Total	12(5)	27(24)	10(1)	0	25(7)			74(46)	
2022 Total	19(1)	26(25)	2(2)	0	18(11)				65(48)
2021 Total	9(2)	0	2(1)	(1)	8(6)				

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

2025 Breakdown of Incidents by month

Type	Lost Property	Legionella / Bacteria	Power cut	Slip/Trip/Fall/Faint	Slip/Trip/Fall/Faint : 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	Fire	Fire Alarm	Security / Theft / Burglary	Driving / Car Park	Other	Equipment	2025	2024	2023	2022	
Jan				1																	1	12(7)	3(2)	5(3)	
Feb															1		3(2)				4(2)	5(4)	7(4)	5(4)	
Mar				1															(1)		2(1)	1(1)	8(5)	9(8)	
Apr								(2)	(1)		1					(1)	(3)				8(7)	6(5)	6(3)	1(1)	
Ma					1	(1)		(3)									1(1)		1		7(5)	1(1)	11(9)	6(6)	
Jun								(1)											(1)		2(2)	2(1)	7(3)	6(3)	
Jul								(1)			(1)	(1)	(1)					(1)	(1)		6(6)	5(4)	7(4)	3(2)	
Au				1													(1)				2(1)	1(1)	4(3)	6(5)	
Sep					1	(2)		(1)			2(1)						(1)	(1)		(1)	9(7)	3(2)	11(8)	8(7)	
Oct																							5(4)	4(1)	3(2)
Nov																						1	5(3)	5(3)	
Dec																						4(3)	1(1)	8(4)	
202				1	1	2	(4)	(8)	(2)		3(2)	1	(1)	(1)	3(2)	(1)	9(8)	(2)	4(3)	(1)	41(3)				
202	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)				
202	2	9	3(3)	4(1)	15(14)	5(4)	1	1	5(1)						3(2)	20(14)	4(3)			2(1)		74(46)			
2022	(6)	1	3(2)	4(2)	(2)	(4)	(3)	(1)	(3)	8(2)			(2)		1	(17)	1	7(4)	(1)					65(48)	
2021			(2)	1	(1)	(2)	(1)	2		3(1)							3(1)	2	3(2)						

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

Complaints

The annual review meeting for complaints held by the Executive last took place in June 2025.

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

The number of complaints logged in 2025 is 15; of which, 7 relate to retail or lottery.

2025 - Complaints	CPCT / H@H Care	CPCT / H@H Comms	CPCT Care & Comms	H@H Comms	Jubilee Comms	IPU Discharge	IPU Care	IPU Comms	IPU Care & Comms	OPD Comms	Counselling Comms	Bereavement Comms	Bereavement Comms	Reception Comms	Volunteer Services	Retail Comms	HR	Total	Merton	Sutton	Other	UPHELD in Whole or Part
January			1								1							2	1	1		1
February													1					1		1		1
March															1			1	1			1
April	1															1		2	1			1
May																1		1				1
June																		0				
July			1													4		5	1			3
August																1		1				
September	1								1									2	2			2
October																		0				
November																		0				
December																		0				
2025	2	0	2	0	0	0	0	0	1	0	1	0	1	0	1	7	0	15	6	2	0	10
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: July - September 2025

ID	FROM	DATE RECEIVED	DETAILS OF COMPLAINT	MAIN CLASS	ACTION TAKEN SUMMARY	UPHELD IN PART OR WHOLE
2025/08	Customer	05/07/2025	Customer requested to buy a picture which was unpriced and upon asking the Assistant Manager was advised it was £20. It was agreed to reserve it for 24 hours. She did not return until 48 hours later so the item was put back out on the shop floor as per Retail process. When she did return to the shop on 5.7 the picture had been re priced to more accurately reflect the value and back on the shop floor. The customer returned and was not happy and complained that she would not pay the revised price. The customer often visits Wimbledon Village and reserves items but never collects them and this is a regular occurrence. She is also very well known to the Manager who has had many challenging conversations with her.	Customer Service	Awaiting formal complaint?? The Saturday team rang Asst Manager who was on her day off who confirmed to the customer the price despite the customer pressing for a discount. The customer was due to collect the picture over the weekend, however did not turn up and then rang Supporter Care to complain on 7.7. Commercial Manager spoke to the customer on 8.7 and confirmed the price and invited her to return to the shop if she would still like to purchase and explained we don't offer discount and always need to maximum the price of all our donations. The customer was given the Commercial Directors email as she intimated she would escalate.	Not Upheld
2025/09	Customer	08/07/2025	Email of complaint received from an Indian lady who was with her 8 year old son about a man expressing racist opinions to a Cheam shop volunteer and the perception of complicity from the volunteer because she didn't stop him.	Racist language	SJH investigated and wrote to the complainant validating her complaint having spoken with the shop manager, viewed the CCTV and spoken with both the paid staff who were on duty that day. Apology extended for her experience and advice provided that her email highlighted gaps in training that will be addressed and the man banned from our shops.	Upheld

ID	FROM	DATE RECEIVED	DETAILS OF COMPLAINT	MAIN CLASS	ACTION TAKEN SUMMARY	UPHELD IN PART OR WHOLE
2025/10	Customer	10/07/2025	A regular customer sent an email about the behaviour of the shop manager when she had asked for a refund. This was not the first time she had experienced a problem with him. She was reluctant to complain as she thought he would know who she was as she is there at least 3 times a week. T	Customer Service	Part of an on-going performance issue with the Shop Manager who is under a number of non-work related stresses. Manager understood his unacceptable behaviour and apologised. Appointment made with his GP and discussion with HR. CD called the complainant and had a very understanding conversation. She said she had thought long and hard about complaining as she recognised that the individual was neuro divergent and she was used to his behaviours. But this time she felt uncomfortable enough not to want to go back to the shop a place she described as her safe space. CS explained the action she had taken and that on his return we would be working with him to ensure this kind of thing doesn't happen in the future. When he is ready to return we will ask him to come in and see us before going back to the shop and discussing in full what measures he will put in place to stop this from happening in the future, the standards we expect and that the consequence will be formal action if there are further breaches. The complainant shops with us elsewhere and will continue to do so. She was grateful to the CD for calling her and thanked me for listening and taking action.	Upheld
2025/12	Donor	20/07/2025	A donor visited our Raynes Park shop on Sunday 20th July to donate 1 carrier bag. Unfortunately the team member look through the bag in front of the donor describing they were checking to see we could accept all the donations. The donor felt angry and embarrassed. The Commercial Manager responded to the complaint on 21/7 and requested the Shop Manager/Lead Manager deliver additional training with the member of the team who is new.	Customer Service	Apology sent in writing by Commercial Manager. Practice reviewed and re-training implemented.	Upheld

ID	FROM	DATE RECEIVED	DETAILS OF COMPLAINT	MAIN CLASS	ACTION TAKEN SUMMARY	UPHELD IN PART OR WHOLE
2025/13	Customer	14/08/2025	Customer wrote to complain about alleged wrong-doing over a ring that she had seen in the Wimbledon Village Shop that she had tried to purchase. At the time the ring did not have a price label on it so the staff member advised that it would need to be valued by our jeweller contact. She was advised to call back once it had been valued and priced. The customer called the Shop and spoke with a member of the team who advised that the ring could not be found and that on that basis it had likely been sold. The staff member did not know at this point that the ring had been stored in the Shop safe awaiting opportunity to get it valued and priced. The customer suggested that the ring had been stolen by the staff member and that if she wasn't satisfied with the investigation into what happened to the ring that she had promised to her daughter she would go to the press and the police.	Retail communications	A number of email exchanges between CD and customer establishing the facts regarding the ring and that it had not been sold but was awaiting valuation. The customer used derogatory language in her emails and was persistent that if she did not get a satisfactory outcome then she would be contacting the press and the regulator. Email from Joint CEO about unacceptable language used toward our staff. Resolved with customer purchasing ring.	Not upheld

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