



**MINUTES OF THE PEOPLE, FINANCE AND ORGANISATIONAL
DEVELOPMENT COMMITTEE HELD AT 9.30AM ON THURSDAY
15 SEPTEMBER 2022 IN THE BOARDROOM, NIAS HQ**

PRESENT: Mr J Dennison Committee Chair
Ms N Lappin Non-Executive Director

IN

ATTENDANCE: Mr M Bloomfield Chief Executive
Ms M Lemon Interim Director of Human
Resources
Mr P Nicholson Interim Director of Finance
Mr A Arandia Asst Director of Planning,
Performance & Corporate
Services
Mrs C Mooney Board Secretary
Ms L Gardner Asst Director HR
Ms V Cochrane Asst Director HR
Mr J Wilson Boardroom Apprentice
Ms S Young HR Associate (for agenda item 7
only)
Ms P Larkin Senior HR Advisor (for agenda item
7 only)

APOLOGIES: Mr T Haslett Non-Executive Director

1 Apologies & Opening Remarks

The Chair welcomed those present to the meeting and extended a particular welcome to Jamie Wilson who had joined the Trust as its Boardroom Apprentice.

2 Procedure

2.1 Declaration of Potential Conflicts of Interest

The Chair asked those present to declare any potential conflicts of interest now or as the meeting progressed.

2.2 Quorum

The Chair confirmed the Committee as quorate.

2.3 Confidentiality of Information

The Chair emphasised the confidentiality of information.

3 **Previous Minutes (PC15/09/22/01)**

The minutes of the previous meeting held on 30 June 2022 were approved on a proposal from the Chair and seconded by Ms Lappin.

4 **Matters Arising (PC15/09/22/02)**

Ms Lemon advised that the report setting out the proposed trajectories and improvement targets would be presented to the November meeting.

She referred to the schedule of reporting to the Committee and advised that she had identified a number of items which she proposed to bring as substantive agenda items to the next three Committee meetings. Ms Lemon commented that she anticipated there would be areas of work which would continue to fall within the remit of the Improvement Plan and balanced scorecard which would be brought to the Committee's attention.

The Chair welcomed this clarity and said that he and Mr Haslett would discuss the financial issues to be discussed at forthcoming meetings.

Ms Lemon pointed out that certain issues within the Improvement Plan had specific target dates identified and that, as these issues neared completion, they would be brought back to the Committee for consideration. She suggested that, in terms of the balanced scorecard, there was potential to introduce the issue in terms of a trajectory so, again, this would be presented to the Committee for consideration.

The Matters Arising were **NOTED** by the Committee.

5 **HR & OD Scorecard and Monitoring Dashboard (PC15/09/22/03)**

Ms Lemon advised that the HR & OD scorecard and monitoring dashboard remained work in progress and referred to a recent workshop which had been organised to consider the key performance indicators. She conveyed her appreciation to Mr Arandia and the Information Team who has assisted in this work.

Continuing, Ms Lemon explained that work continued to collate data against a number of performance indicators. She referred members to the HR & OD Scorecard and explained the various indicators in detail.

In relation to overtime and agency costs, Ms Cochrane explained that the figures attempted to demonstrate the percentage of costs which originated from non-established contractual hours, ie those hours over and above contractual hours. She advised that this included, for example, bank hours, additional hours for those staff who were part-time and overtime through the Covid-19 Rapid Response Payment Scheme (CRRPS). Ms Cochrane clarified that 12.5% of costs related to hours over and above contractual hours.

Ms Lappin believed that 12.5% appeared high and asked if any benchmarking had taken place with other ambulance services as it would be helpful for the Committee to know how this compared with other services.

Ms Lemon acknowledged the Committee's wish to drill down into the figures and said that the work being taken forward by HR would contribute to better understanding in this area. She advised that work was currently being undertaken around the use of bank staff and whether there were any apparent patterns in their use and added that HR staff were liaising with the Operation Directorate in this regard.

Ms Lemon acknowledged that, while working as bank staff did provide flexibility, it presented a risk for the Trust in that it was not able to rely on an individual committing to those hours.

Ms Cochrane clarified that a member of staff who worked full-time bank hours would not be able to avail of terms and conditions afforded to other staff.

Mr Bloomfield said it was clear from speaking to other ambulance services that they too had a heavy reliance on overtime. He acknowledged that, compared to other HSC organisations, the NIAS figure of 12.5% was high and he pointed out that this was one of the reasons why the Trust's final accounts had been qualified in that the issue of holiday pay back had been identified as a material issue for NIAS.

Continuing, Mr Bloomfield explained that other Trusts had incurred significant expenditure on the use of agency staff and said there was now a focus on reducing agency expenditure. He said that his preference would be for NIAS staff to work overtime at a rate set by the Trust.

Ms Lappin suggested that, while this information was helpful, it would be more beneficial to benchmark against other ambulance services to allow the Committee put the figure in context.

The Chair suggested that it would be important to know at which point staff absence became critical and might present challenges to service provision.

Ms Lemon said she considered this to be when the Trust was in REAP Level 4. However, she acknowledged that she was unsure at what point, beyond that critical threshold, the Trust might consider declaring a Major Incident.

Mr Bloomfield believed that, while data was helpful in this regard, there was an element of judgement in identifying the critical threshold. He referred to circumstances where the Trust had over 150 A&E staff absent due to Covid-19 and had to submit an Early Alert to the DoH advising of low staffing levels.

The Chair noted that both long and short-term absences were increasing and he sought clarification on whether the Trust had identified a point at which it could not go beyond.

Responding, Mr Bloomfield explained that the most appropriate absence figure was the one identified within the CRM business

case. He advised that this had been set at 8% and said that to go beyond this figure would result in significant challenges for the Trust.

Mr Nicholson advised that the total spend across the HSC on agency costs was £320 million and added that NIAS spent £4.7 million on agency staff. He clarified that medical/dental and nursing/midwifery were the two largest staffing groups for other HSC organisations, while the largest NIAS elements were mainly around support services and administrative and clerical.

Continuing, Mr Nicholson indicated that the DoH was looking to reduce expenditure on agency costs and was looking specifically at off/on contract. He clarified that some off contract agencies charged significantly above Agenda for Change rates. Mr Nicholson indicated that, while the Trust had a number of off-contract appointments, remuneration was at contracted rates. He acknowledged that there were opportunities across the HSC to deliver savings by moving away from high price off-contract agencies and said that the DoH would be focussing on this in the coming months. Mr Nicholson reminded the meeting that enhanced cleaning regimes which required additional staffing had been implemented during the pandemic and he advised that, as had been planned, the Trust now intended to reduce the level of cleaning which would result in a reduction in the number of posts required.

Responding to Ms Lappin's query as to the timescale for this, Ms Cochrane confirmed that a waiting list had now been established and this matter would be progressed over the coming weeks.

Mr Bloomfield commented that £2 million had been identified for IPC with a significant proportion of this having been identified for Vehicle Cleaning Operatives (VCOs). He pointed out that, as referred to previously by Mr Nicholson, the number of VCOs had doubled during the pandemic.

Ms Lappin queried the broad make-up of the overall £5 million spend on agency staff.

Mr Bloomfield clarified that an element of the £5 million would include the increased VCO staffing as well as administrative and clerical staff. Ms Cochrane added that the remainder would be single postholders in various Trust Directorates. She reminded the

meeting that the HR Directorate was undergoing review and therefore the Trust would not be in a position to make permanent appointments at this time. Ms Cochrane indicated that the Trust also had a number of specialist posts, for example within IT, which had been put in place as a consequence of the restructuring of corporate services.

Ms Lappin questioned the fact that there would be a reduction in agency spend but that this reduction would not necessarily result in savings. She commented that the Trust's expenditure of £5 million on agency staff appeared to be a significant proportion of the overall budget and welcomed the intention to reduce that expenditure.

Responding, Mr Nicholson clarified that there would be a reduction in expenditure however additional expenditure had been supported with additional income allocations.

Mr Nicholson clarified that there was an expectation that agency spend would reduce across the HSC and the NIAS proportion of this would be in the region of £350,000.

Ms Lappin suggested it would be helpful for the Committee to have some sense of the timeline for reducing the Trust's agency spend as well as a forecasted position for the year end.

Ms Cochrane gave a brief overview of the composition of the NIAS workforce which totalled 1,775 members of staff.

Ms Lemon commented that the Trust's priority would be to strategically redesign posts before making a number of permanent appointments.

Continuing, Ms Lemon provided members with an overview of the KPI relating to complaints.

Ms Gardner said the Committee would note that the figures within the Complaints KPI differed from what had been agreed. She explained that work had been carried out to identify a baseline to enable reporting. She sought the Committee's agreement to bring a revised proposal to the November meeting on what form this KPI would take together with some secondary KPIs.

Ms Lemon highlighted the importance of working with other stakeholders in this area as well as taking account of wider systems and processes within the Trust, for example professional standards. She said that work was also being undertaken with managers to explore what a 'just culture' would look like. Ms Lemon said that, while efforts would be taken to resolve complaints, where appropriate, informally, it would be important for the Trust to follow disciplinary processes where appropriate. She acknowledged that the numbers of complaints were higher than she would like to see and believed that this was reflective of the current culture within the Trust. Ms Lemon said that, while she would like to see the overall number of complaints reducing, she would also welcome sight of data which would reflect that numbers had reduced through alternative means, for example coaching.

The Chair welcomed this approach and said he would be happy to see further data on this.

Ms Gardner reported that there were no active cases of Whistleblowing for the period 1 April – 30 June and undertook to bring a more detailed paper on this to a future meeting. She reminded the meeting that Ms Lappin was the NED Champion on Whistleblowing/Speaking Out and said that she and Ms Lappin would be meeting to discuss this over the next week.

The Chair referred to the fact that there were no active cases and asked if this reflected a lack of trust or understanding of the processes involved.

Ms Gardner acknowledged there was a need to explore why staff did not use this mechanism to raise concerns. She referred to regional work being taken forward to relaunch the framework and policy in the New Year and said the Trust planned to raise awareness amongst staff with a view to encouraging them to speak up and provide assurances that all concerns would be investigated and action taken where appropriate and necessary.

Ms Lemon pointed out that using language such as 'speaking out' was preferable to 'whistleblowing' and said it would be important to make it easier for staff to express concern rather than enter into a formal robust whistleblowing process.

Ms Lappin expressed her preference for the terminology 'speaking out' and acknowledged that 'whistleblowing' had certain legal status in terms of protected disclosures. However, she said she would explore this further with Ms Gardner at their meeting.

Ms Lappin said she would be keen to understand the processes in place to ensure that any learning was identified. She acknowledged that there were also processes in place for the public to raise concerns and she suggested that these might be more valuable in terms of identifying behaviours which staff do not feel in a position to raise. Ms Lappin referred to recent guidance issued by the NI Public Service Ombudsman and said this focussed on ensuring learning and improving through complaints.

Ms Gardner advised that the new framework clearly explained whistleblowing/speaking out and clarified its position in relation to staff and other employment processes.

Ms Cochrane advised that normally the Trust would report leavers/turnover rate on a financial year basis but the KPI would now be reported on a rolling 12 month basis which would allow for the identification of any trends. She pointed out that the Trust would traditionally have a low turnover rate and advised that, from July 2021 to June 2022, this stood at 3.6%.

Ms Lappin welcomed a comment from Ms Lemon that the Trust was considering the introduction of exit interviews. She acknowledged that 3.6% represented 58 members of staff who had left the Trust and said it would be helpful if this figure was further broken down by staff grouping and whether the number of staff leaving was balanced by an intake of new staff.

Mr Bloomfield said it was his understanding that, from June 2024, the new BSc would produce 54 paramedics per year and said the Trust depended on the approval and funding of the CRM business case to employ these paramedics. He said he had recently welcomed the third intake of newly qualified paramedics who had chosen to work in NIAS.

Ms Lappin said it would be important to have a clear understanding of the Trust's recruitment challenges over the next five years and the potential for NIAS paramedics to be sought by other employers.

Ms Lemon acknowledged that further work was ongoing in relation to those KPIs yet to be reported on.

Ms Gardner advised that a review of partnership working was ongoing as well as work to establish a baseline of the working relationships with Trade Union and said that these would feed into the HR scorecard. She added that it was the intention that these would be resurveyed on an annual basis to ensure the Trust was embedding the partnership approach.

Ms Lemon said it would be important to consider how best to measure this aspect of the work and said identifying the baseline would assist in this regard. However, she pointed out that work was already being taken forward to create more of a partnership working environment and strategic partners were present at the initial developmental stages of initiatives for example.

Mr Arandia said the partnership working with Trade Unions was working well and he referred to the development of terms of reference for working with Trade Union colleagues.

Ms Lemon said she would be keen to involve Trade Unions in the work around attendance management and was of the view that involvement at an early stage helped build trust.

The Chair commended the strategic direction of the work which had been taken forward to date and thanked attendees for their input.

The update on the HR & OD Scorecard and monitoring dashboard was **NOTED** by the Committee.

6 HR Improvement Plan – progress update September 2022 **(PC15/09/22/04)**

Ms Lemon and colleagues provided a detailed update on the transformation of the Human Resources & Organisational Development (HR & OD) Directorate with a focus on the single Improvement Plan.

Responding to a question from Ms Lappin around job evaluation Panels, Ms Cochrane advised that, having panels scheduled in advance and working closely with the Resource Management

Centre (RMC) to release staff, had assisted greatly in addressing the backlog.

Ms Lemon advised that there was a regional mechanism for escalation in circumstances where issues around job evaluation had been identified and said that the Trust would avail of this, when necessary, in partnership with the region. She reminded the meeting that there had been a significant increase in the number of posts evaluated and that this had been disproportionate in terms of the size of the Trust.

Ms Lemon referred to the red RAG status of a number of elements within the various workstreams and explained that some of these were due to capacity and the fact that restructuring was required before a number of initiatives could progress. She advised that, as an interim measure, the Trust had secured capacity from Heads Together and the HSC Leadership Centre to maintain progress.

The Chair thanked Ms Lemon and colleagues for their update which was **NOTED** by the Committee.

7 Maximising Attendance Update and Plan (PC15/09/22/05)

The Chair welcomed Ms Shirley Young and Ms Pauline Larkin to the meeting and invited them to present the paper around maximising attendance.

Ms Young referred to the key linkages with the Trust's Health and Wellbeing Strategy and the desire for this work to be part of a wider and non-siloed approach to wellbeing as well as the introduction of a more anticipatory rather than a reactive approach.

She referred to the sickness absence of 11.34% in June 2022 (excluding Covid-19) and advised that, under Terms and Conditions, Covid-19 absence would be treated as sickness absence with effect from 1 October 2022. Ms Young advised that research indicated that, if a member of staff was absent from work for six months, the likelihood of return reduced to 50%. She said it was for this reason that it was important to have a plan in place for all appropriate cases. She indicated that work would also be taken forward to look at a case management approach and to provide support to managers who would be responsible for implementing the change.

Ms Young outlined the various levels of absence (Levels 1-3), ie Level 1 related to 'ordinary' absence and did not require case management; Level 2 related to those absences where HR would be expected to support managers and Level 3 related to the final review of individuals who were returning to work, being redeployed, seeking ill-health retirement or a review of their employment by NIAS. She explained that, while the focus was very much on level 2, her preference would be to strive to transfer cases to levels 1 or 3 as they progressed. However she pointed out that an issue for the Trust to focus on in case management was avoiding 'case drift'.

Continuing, Ms Young described the potential barriers to the work and outlined the plans to progress this work between now and June 2023.

Ms Larkin reiterated that focus should be on early interventions and she believed that having Levels 1-3 would assist HR Advisors in prioritising the cases working alongside managers. She said it would be important to have clarity around HR roles and responsibilities.

Ms Larkin explained that there was work planned at Division level with HR Advisors and managers to provide managers with reassurance and reinforcing the principles of the change, what that meant in practice and how HR Advisors would work with them to implement the change. She acknowledged that getting to the root cause of absence was important.

Continuing, Ms Larkin explained that the change would start at HR Advisor level and said that workshops had taken place with them to discuss what the change would look like. Workshops with managers were in the planning stage. She suggested that if absence levels continued to rise, it would be important to involve the Operations Directorate in any direct update to the PFOD Committee on this work.

Ms Young alluded to the Bradford Factor and explained that this was a formula used in human resource management as a means of prioritising employee absence. She noted that there was a need for manager buy-in to the way forward and said it would be important that, behind the overarching absence figure, there was some movement. Ms Young suggested that absence management

should also be used as a formal performance measurement tool for managers.

Ms Lemon alluded to the linkages to the Health and Wellbeing Strategy and said that workshops had been held with TUs to look at the Strategy. She indicated that there was a need to address the legacy and backlog while getting to a better position in terms of a proactive approach moving forward.

The Chair welcomed the direction of travel, in particular the focus on managers' performance and buy-in.

Ms Lappin suggested that, in recruiting managers, the Trust should target the recruitment exercise to ensure managers have the necessary range of skills to carry out the role. She also referred to the need for absolute clarity in terms of expectations of the role.

Referring to the points made by Ms Lappin, Mr Bloomfield suggested that the Operations structure review would help in this regard. He alluded to the number of staff in temporary posts while the Operations structure review was ongoing and said he was comfortable with this as it allowed time for the review to be progressed. Mr Bloomfield said he also agreed with the need for clarity around roles and responsibilities.

In response to a question from Ms Lappin as to the willingness of the HR Advisors to take forward this work, Ms Larkin confirmed that the Attendance Advisors were enthusiastic about the changes and were ready to implement it.

Ms Young commented that HR Attendance Advisors had left the workshop with a clear understanding of the new priorities, expectation of a case file and a formal review. She acknowledged that there would be shifts in HR and a move towards a 'best support' type model.

Ms Lemon said it was important to recognise the contributions of HR Attendance Advisors through the pandemic, including the huge role they had played to support vaccination programmes and managing Covid-19 absences. Ms Lemon said that, while there was clarity within the HR Directorate around the priorities to be taken forward, this also needed to be referenced in other areas. She said it was for this reason that meetings with Directorate leads

would be important. Ms Lemon advised that she and Ms Paterson had discussed the role of Station Officer and she questioned whether there was absolute clarity on their part in terms of the expectations placed on them and what their priorities might be.

Ms Lappin asked if the work being taken forward with Operations colleagues represented the start of this work and what would be required on a practical basis.

Ms Young explained that, when she and Ms Larkin next attended the Committee to report on progress, they would have had opportunities to attend Directorate and Divisional meetings to meet with managers on the ground to take them through the detail and ensure there was absolute clarity as to roles and responsibilities.

Ms Lappin alluded to the importance of Ms Young and Ms Larkin being included in discussions around this new approach and asked if this had been their experience to date. Responding, Ms Young said that they had been welcomed to date.

Ms Lemon advised that the Trust's Senior Management Team had supported the approach and acknowledged that Operational managers needed support in prioritising absenteeism as well as being clear in setting out the expectations from staff.

Mr Bloomfield explained that he met with Operational managers on a regular basis and said it was clear from these discussions that a number of administrative duties could be removed from their remit. However he acknowledged that managing staff was an integral part of a manager's role and should remain so.

Ms Lappin asked whether there was a danger that other priorities would replace those which had been removed. She suggested that, by adopting and implementing the new approach to maximising attendance, managers would hopefully come to the conclusion that it helped with their workload and would therefore support its continuation.

Ms Young referred to the intention to have performance measures for HR and suggested that the focus should be on achieving these.

At Mr Bloomfield's request, Ms Lemon alluded to legacy arrangements around sick pay which had been in place within the

Trust for some time. She explained that, for example, within terms and conditions, there was reference to the ability to use discretion to extend sick pay and added that traditionally mechanisms had been put in place to facilitate that. However, Ms Lemon said the Senior Management Team had recently approved the move to cease the extension of pay and revert to case management application of Agenda for Change terms and conditions and management of the approach.

The Committee noted the intention for a project plan with KPIs and dashboards at Directorate/Departmental/Divisional levels and discussed the need to show metrics which would identify the point at which absence would present challenges to service provision. The potential to use REAP data in this regard was also noted.

The Committee **APPROVED** the Maximising Attendance Update and Plan on a proposal from the Chair. This proposal was seconded by Ms Lappin.

The Chair thanked Ms Young and Ms Larkin for their attendance and they withdrew from the meeting.

8 **Finance – verbal update**

Mr Nicholson referred to the recent Finance, Procurement and Logistics (FPL) system outage which resulted in the financial systems for health and social care across Northern Ireland being unavailable. He explained that the issue had resulted in no access to the finance systems for ordering of stock, logistics, payment to suppliers and financial reporting.

Mr Nicholson explained that, in light of this inability to access the systems, reporting of the financial position at Month 4 (July) had not been possible. He indicated that, following the implementation of contingency plans, access to the systems had since been restored in mid August and normal financial reporting arrangements had resumed for Month 5 (August).

Referring to the financial position, Mr Nicholson reported that the Trust had a number of financial assumptions totalling approximately £13 million, with the most significant one relating to Covid-19 funding. He said that he had advised DoH colleagues that the Trust's expenditure relating to Covid-19 would remain at these

levels in terms of the use of overtime and the Trust's reliance on VAS/PAS services which remained significant.

Mr Nicholson advised that the other significant area of income assumption related to training. He said that members would be aware that Cohort 4 of the paramedic programme commenced last year with a financial tail into the current year and the Trust had submitted a bid in respect of pressures for associated backfill.

Mr Nicholson said that, following discussions with Dr Ruddell around the potential to deliver all of the training planned in the current year and also taking account of pressures within the Training Department, he had advised the DoH that the Trust would be unable to deliver all of the planned training within the existing staffing structure.

Continuing, Mr Nicholson advised that the Trust continued to face increased energy and fuel costs. He acknowledged that, while fuel costs had stabilised slightly, energy costs had increased significantly.

Mr Nicholson said that he had advised the Trust Board previously that there would be no further savings requirement. However, he advised that work was being progressed on a regional basis to explore expenditure around agency staff. He added that expenditure on VAS/PAS remained significant at approximately £0.8 million per month while overtime expenditure was approximately £0.5 million per month.

Mr Nicholson reported that the Trust's current approved Capital Revenue Limit (CRL) was £5.9 million and said the Trust was revisiting the deliverability of all the schemes within its capital programme. He pointed out that a significant proportion of the programme related to fleet and estate and also included specific IT projects.

Mr Nicholson expressed concern around the fleet element of the programme, particularly the availability of vehicles, and said this could potentially push expenditure towards the end of the current financial year.

Mr Bloomfield commented that there had been reference to a £400 million overspend in health and social care and said he was unsure

whether this figure could potentially increase. He referred to the Trust's savings plan and reminded the meeting that it would be necessary for the Trust to undertake a public consultation on those savings which were considered to have a high impact. Mr Bloomfield said that the current political stalemate had clearly impacted on the Assembly's ability to confirm a budget as well as not being possible to have in-year monitoring rounds to redistribute additional funding.

Mr Bloomfield pointed out that, for the first time he could recall, the HSC was preparing not to break-even and acknowledged that the system could not deliver the extent of savings required. He advised that the Minister had indicated his unwillingness to take any actions which would impact on patient care. Mr Bloomfield referred to the numerous requests from the DoH to exercise sound financial practice. He acknowledged that the potential areas for the Trust to deliver significant savings were overtime and VAS/PAS but acknowledged that any reductions in these areas would impact on patient care.

Ms Lappin expressed concern that she had not been included as Trust Chair in any discussions around DoH expectations of ALBs. She said that she had spoken to other Trust Chairs about their understanding of ALB responsibilities, particularly those of Trust Boards. Ms Lappin commented that Trust Chairs had a meeting scheduled with the Permanent Secretary to discuss efficiencies and said it would be important for Chairs to have a collective understanding in terms of potential risks and where these might fall.

Ms Lappin reiterated the Minister's view that any savings in expenditure should not impact on patient care and said that, if there was recognition of a deficit position at the year end, she wanted to ensure that the DoH would not press ALBs to make efficiency savings. She sought further clarification around the Trust's authority to continue to incur costs despite not having a confirmed budget.

Mr Nicholson alluded to the Trust's reliance and expenditure on VAS/PAS and said that he had made clear to DoH colleagues that NIAS would continue to incur costs at the current level. He explained that the suggestion had not been to cease expenditure, particularly as the Trust entered the winter period, but to recognise that VAS/PAS could be identified as a potential area for savings with the resultant implications this could have for service delivery.

The Chair thanked Mr Nicholson for his report which was **NOTED** by the Committee.

9 **Date of next meeting**

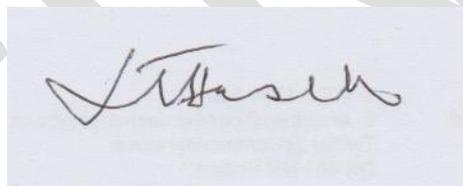
The next meeting of the People Committee will take place on Thursday 24 November 2022 at 9.30am in the Boardroom, NIAS HQ.

10 **Any Other Business**

Concluding the meeting, the Chair congratulated Ms Lemon on her recent appointment as the Trust's Director of Human Resources and Organisational Development.

THIS BEING ALL THE BUSINESS, THE CHAIR DECLARED THE MEETING CLOSED AT 12 NOON.

SIGNED:



(electronically signed)

DATE: 24 November 2022