

NHS Greater Glasgow & Clyde	Paper No. 22/100
Paper Title	Standing Committee Chair's Board Report
Meeting:	Board Meeting
Date of Meeting:	Tuesday 20 December 2022
Purpose of Paper:	For Assurance
Classification:	Board Official
Name of Reporting Committee	Staff Governance Committee
Date of Reporting Committee	Tuesday 22 November 2022
Committee Chairperson	K Miles, Co-Chair (Chaired) A Cameron-Burns, Co-Chair

1. Purpose of Paper:

The purpose of this paper is to inform the NHS Greater Glasgow and Clyde (NHSGGC) Board on key items of discussion at the most recent meeting of the NHSGGC Staff Governance Committee (the Committee).

2. Recommendation:

The Board is asked to note the key items of discussion at the meeting of the Committee on Tuesday 22 November 2022 as set out below and seek further assurance as required.

3. Key Items of Discussion:

3.1 Staff Governance Annual Return 2021/22

- For approval.
- The Committee considered the Staff Governance Annual Return 2021/22 draft response to Scottish Government.
- The Committee approved the Staff Governance Annual Return 2021/22 response in full.

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3.2 Human Resources Corporate Risk Register

- For approval.
- The Committee considered the amendments to the Human Resources Corporate Risk Register including the additional risk of Industrial Action.
- The Committee approved the Human Resources Corporate Risk Register in full.

3.3 Assurance Presentation

- For assurance.
- The Committee received a presentation from the Acute Services Directorate.
- The Committee noted the assurance presentation and recognised the good examples provided against the Staff Governance Standard.

3.4 Medical Education

- For assurance.
- The Committee received an update on Medical Education, focussing on the four sites on General Medical Council Enhanced Monitoring.
- The Committee noted full assurance in this area.

3.5 Safe Staffing Legislation

- For assurance.
- The Committee received updates on the implementation of Safe Staffing Legislation.
- The Committee noted full assurance in this area.

3.6 Staff Governance Committee Site Visits

- For awareness.
- Members of the Staff Governance Committee visited Greenock Health and Care Centre on 15 November 2022 and the Central Decontamination Unit, in Cowlairs, on 21 November 2022.
- Those attending all spoke positively of the visits and staff they had the opportunity to speak to, noting that the visits were a rewarding experience for all involved.

4. Issues for referral to other Standing Committees or escalation to the NHS Board:

There were no issues for referral to other Standing Committees or escalation to the NHS Board.

5. Date of Next Meeting:

The next meeting of the Staff Governance Committee will take place on Tuesday 21 February 2023.

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NHSGGC SGC(M)22/03
Minutes: 31-46

NHS GREATER GLASGOW AND CLYDE

**Minutes of a Meeting of the
NHS Greater Glasgow and Clyde
Staff Governance Committee
held in the JB Russell House Boardroom and via Microsoft Teams, on
Tuesday 2 August 2022 at 9.30am**

PRESENT

Ms A Cameron-Burns
(Co-Chair in the Chair)

Ms K Miles (Co-Chair)
Ms A Khan
Cllr C McDiarmid
Cllr M McGinty
Dr P Ryan
Mr F Shennan
Mr C Vincent
Prof J Brown (Board Chair)
Mrs J Grant (Chief Executive)

IN ATTENDANCE

Mr M Allen	Senior Administrator
Dr J Armstrong	Medical Director (Para 40)
Ms T Carrey	Interim Workforce Planning & Analytics Manager (Para 44)
Ms F Carmichael	Staff Side Chair, Acute Services Staff Partnership Forum
Ms B Culshaw	Chief Officer, West Dunbartonshire Health and Social Care Partnership (HSCP)
Ms K Donald	Corporate Services Manager – Governance (Para 42)
Ms D Foy	Board Member (Observing)
Mr A Gibson	Chief Risk Officer (Para 44)
Dr A Harvey	Consultant Anaesthetist (Para 40)
Mrs D Hudson	Staff Experience Adviser / iMatter Operational Lead
Mrs M MacDonald	Head of Learning and Education
Mrs A MacPherson	Director of Human Resources and Organisational Development
Mr A McCready	Staff Side Chair, Non City HSCP Staff Partnership Forum
Mr S Munce	Head of Workforce Planning and Resources
Ms C Ospedale	Deputy Director of Communications (Para 38)
Ms N Owens	Depute Director of Human Resources
Ms C Sinclair	Chief Officer, East Dunbartonshire HSCP (Para 36)
Mr L Spence	Incoming Head of Staff Experience (Observing)
Mr T Steele	Director of Estates and Facilities (Para 36)
Ms E Quail	Area Partnership Forum (APF) Secretariat
Mr T Quinn	Head of Human Resources – East Dunbartonshire HSCP (Para 36)
Ms J Tomlinson	Associate Chief Nurse Corporate and Community (Para 41)
Prof A Wallace	Executive Director of Nursing (Para 41)
Mr S Wallace	Head of Human Resources – Estates and Facilities (Para 36)
Mr F Warnock	Head of Health and Safety

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31.	WELCOME AND APOLOGIES		ACTION BY
	<p>Ms Cameron-Burns welcomed all to the meeting, offering thanks to Mr Cowan for his commitment and support to the Staff Governance Committee. Mr Cowan stepped down as Co-Chair on 30 June 2022, and Councillor Mechan, who also leaves the Staff Governance Committee.</p> <p>Ms Cameron-Burns welcomed Ms Miles as the new Staff Governance Committee Co-Chair from 1 July 2022 and two new Councillor members, Councillor McDiarmid and Councillor McGinty.</p> <p>Ms Cameron-Burns extended a further welcome to Mr Spence, the incoming Head of Staff Experience from 29 August 2022 and new Board Member, Ms Foy, who joined the meeting as observers.</p> <p>Apologies were noted for Mrs McCarthy.</p>		
32.	DECLARATIONS OF INTEREST		
	<p>There were no formal declarations of interest intimated.</p>		
33.	<p>MINUTES</p> <p>The Minutes of the Committee meeting held on 24 May 2022 (SGC(M)22/02) were approved as a correct record. The motion to approve was intimated by Dr Ryan and seconded by Ms Carmichael.</p> <p><u>APPROVED</u></p>		
34.	MATTERS ARISING		
34.1	<u>Rolling Action List</u>		
	<p>Ms Cameron-Burns referred to the Rolling Action List (Paper 22/14) and advised that there were five items on the Rolling Action List, with all marked for closure.</p> <p>The Committee noted the updated Rolling Action List and agreed the items proposed for closure.</p> <p><u>NOTED</u></p>		
35.	<p>URGENT ITEMS OF BUSINESS</p> <p>There were no items raised.</p>		

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<p>36.</p>	<p>ASSURANCE PRESENTATIONS</p> <p><u>Estates and Facilities</u></p> <p>Mr Steele, Director of Estates and Facilities, supported by Mr Wallace Head of Human Resources – Estates and Facilities, gave a presentation on the Staff Governance activity within the Estates and Facilities Directorate, providing an overview of key workforce metrics, including sickness absence, Statutory and Mandatory training, KSF compliance and iMatter participation, outlining the actions being undertaken within the Directorate to ensure effective management towards compliance with targets.</p> <p>Mr Steele outlined how the activity streams met the five strands of the Staff Governance Standard and highlighted key achievements, including recognition and awards, Investors in People accreditation and a focus on succession planning.</p> <p>Mr Steele advised the Staff Governance Committee that there were a number of continuous improvement opportunities for the Directorate over the next 18 months and these included Workforce Development Action Plans, merging Investors in People actions with iMatter planning and a focused improvement on recording Personal Development Planning and Review conversations.</p> <p>Mr Steele showcased the Kickstart Programme as the Directorate’s case study, with Estates and Facilities agreeing to support and host significant placements within their services as part of the Programme, in partnership with INVEST Renfrewshire and Department of Work and Pensions (DWP). The successful Programme led to 60 Support Services Assistants roles identified in four Acute sites across the Board, with 20 individuals eventually appointed to posts across the Board.</p> <p>Ms Quail asked about retention plans within Estates and Facilities, with Mr Steele advising that staff members are being offered, further, higher and in-house education to support their development and growth, as well as being encouraged to participate in national peer group meetings.</p> <p>Dr Ryan asked whether the current pensions review issue will impact on Estates and Facilities staff, with Mrs MacPherson advising that it will impact on all staff, not specifically within Estates and Facilities. Workshops have taken place to raise awareness of the Retire and Return policy and highlight that the Scottish Public Pensions Agency (SPPA) website had been updated to clarify changes.</p> <p>Mrs MacPherson commended Mr Steele and the wider Estates and Facilities team for the highly effective team brief and newsletter, particularly in cascading messages during the height of the pandemic.</p>		
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<p>Following questions from Professor John Brown a detailed discussion on staff engagement with iMatter took place. It was recognised that there are challenges in some areas with engaging staff through the electronic system, but that it remains a key area of focus, with work ongoing relating to building trust, encouraging participation and demonstrating benefits through the delivery of action plans. It was noted that there needs to be balance between using iMatter as a tool to give employees a voice and as a continuous improvement tool. It was also noted that management engagement sessions have taken place to provide reassurance and support for action planning. It was noted that further actions to use SMS would be explored.</p> <p>Ms Carmichael highlighted that the Estates and Facilities Directorate continue to be an excellent example of partnership working.</p> <p>The co-chair thanked Mr Steele for his presentation.</p> <p><u>East Dunbartonshire Health and Social Care Partnership</u></p> <p>Ms Sinclair, Chief Officer, East Dunbartonshire Health and Social Care Partnership (HSCP), supported by Mr Quinn, Head of Human Resources – East Dunbartonshire HSCP, gave a presentation on the Staff Governance activity within the HSCP, which includes the Oral Health Directorate, providing an overview of key workforce metrics, including sickness absence, Statutory and Mandatory training, KSF compliance and iMatter participation, outlining the actions being undertaken within the HSCP to ensure effective management towards compliance with targets.</p> <p>Ms Sinclair outlined how the activity streams met the five strands of the Staff Governance Standard and highlighted a number of key achievements, including a collaborative pandemic response, communications work, wellbeing activity and business case development for accommodation in Bishopbriggs and Milngavie.</p> <p>Ms Sinclair advised the Staff Governance Committee that there were improvement opportunities for the HSCP over the next 12 months and these included appropriate numbers of trained “Peer” Wellbeing Workers within each Care Group, finalising and implementing the HSCP Workforce Plan and improving Personal Development Planning and Review conversations which support staff wellbeing and personal development.</p> <p>Ms Sinclair showcased the extension to the district nursing service hours as the HSCP’s case study. For the Oral Health Directorate, the case study used was the realignment of the Oral Health Improvement Team during the pandemic.</p>	<p>Mr Wallace</p>
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	<p>Cllr McDiarmid asked whether the extension to the district nursing service hours in Glasgow City and East Dunbartonshire is a new or existing model, with Ms Sinclair confirming that it is a recognised model.</p> <p>The co-chair thanked Ms Sinclair for her presentation.</p> <p><u>NOTED</u></p>		
<p>37.</p>	<p>INVESTORS IN PEOPLE</p> <p>Mr Mann provided an overview of report (Paper 22/15), updating the Staff Governance Committee on the progress being made in the implementation of the Investors in People (IiP) Standard across NHS Greater Glasgow and Clyde (NHSGGC) Acute and Corporate Services.</p> <p>The paper detailed the approach being taken to implement IiP by NHSGGC, highlighting the successful IiP accreditation of Inverclyde Royal Hospital and the Corporate Cluster, as well as outlining the next steps and accreditation aims for the other IiP 'Clusters' within NHSGGC. Mr Mann highlighted that across assessments, there is clear evidence of an application of NHSGGC Values.</p> <p>Ms Miles asked where in particular the West Cluster and Inverclyde Royal Hospital had fallen short of fully meeting the IiP framework, and if this been taken into consideration for future clusters. Mr Mann advised that Inverclyde Royal Hospital had met 22 of the 27 framework elements, and areas for improvement mainly centred on location, in terms of staff feeling isolated and the need for clearer onsite leadership and communications around the future of the site. He added that the West Cluster report had highlighted a variability of leadership skills, with both good practice and areas for improvement. Mrs MacPherson added that learning from both assessments had taken place, with the Organisational Development team identifying common themes, which can be used to positively influence action plans.</p> <p>Ms Khan stated that she is supportive of the Cluster approach and asked where the South Cluster is currently positioned with its interim report. Mr Mann advised that the Cluster had met 15 of the 27 framework elements, in a phase one report with the report again highlighting a variability of leadership skills, with both good practice and areas for improvement, but also recognising the system pressure on the service at the time. Further activity was underway to prepare the area for assessment in the current timetable.</p> <p>Ms Culshaw asked about IiP and iMatter alignment, with Mr Mann advising that they are complimentary and that the IiP assessment process is used as one method of measuring how effective iMatter is.</p> <p>Professor Brown indicated how impressive the achievements to date are and asked about when HSCP involvement will commence. Mrs</p>		

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	<p>MacPherson advised that this is to be considered further in discussion with the six HSCP Chief Officers, following rollout to the Acute and Corporate areas. It was agreed that Mr Mann will discuss this further with the Chief Officers at a formal meeting in due course.</p> <p><u>NOTED</u></p>	<p>Mr Mann</p>
<p>38.</p>	<p>INTERNAL COMMUNICATIONS AND EMPLOYEE ENGAGEMENT STRATEGY</p> <p>Mrs MacPherson and Ms Ospedale discussed a report (Paper 22/16) that sought the Staff Governance Committee's approval of the Internal Communications and Employee Engagement Strategy 2022-2025. The Strategy is based on a review of the current employee communication and engagement activities, along with the proposed development and reinvigoration of channels and mechanisms to inform and engage staff at all levels of the organisation.</p> <p>Ms Ospedale advised that the Strategy, in alignment with our Workforce Strategy, will be a key enabler to improve the experience of our staff at work, ensuring we maximise direct engagement with staff and listen to and address concerns in the workplace. The strategy also highlights 16 priorities, which will form the basis of a supporting action plan that will be developed following approval of the Strategy.</p> <p>During discussion, the following additions or updates to the Strategy were agreed:</p> <ul style="list-style-type: none"> • The inclusion of reference to Training and Development, with links to the Workforce Strategy; • The development and inclusion of an implementation plan that details timescales, communications, costs, resources, Equality Impact Assessment, risks and approach to monitoring and evaluation; • That the 16 priorities within the Strategy will be themed and more succinct in the action plan that is being developed, with some of these actions linked to existing activity, such as iMatter and liP. • A more detailed reflection of NHSGGC's Aims, Values, Corporate Objectives and Operational Priorities to be included. <p>It was agreed that the Internal Communications and Employee Engagement Strategy will be submitted to a Board meeting for approval. It was also agreed that the action plan will be developed for further discussion at the Corporate Management Team.</p> <p><u>RECOMMENDED TO PROGRESS TO BOARD FOR APPROVAL</u></p>	<p>Ms Ospedale / Mr Spence</p>

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<p>39.</p>	<p>WORKFORCE PLAN</p> <p>Mr Munce discussed a report (Paper 22/17), which provided the Staff Governance Committee with the final version of the NHSGGC Workforce Plan, noting that the Health Workforce Directorate of Scottish Government provided guidance, specifying the requirement to submit the Plan in draft by the end of July 2022 and to publish the Plan on our website by the end of October 2022.</p> <p>Mr Munce advised that the Plan has been compiled from the output of local workforce planning groups, chaired by each of the Heads of Human Resources and is aligned to local and national strategy and national guidance. In addition, it was noted that feedback has not yet been received from Scottish Government in relation to the initial submission. The draft Plan had been discussed and agreed through the Corporate Management Team.</p> <p>It was agreed that delegated authority will be given to the Chief Executive and Executive Lead, Mrs MacPherson, to agree on whether any changes requested by Scottish Government are material enough to require further Staff Governance Committee scrutiny, either virtually or by arranging an ad-hoc meeting.</p> <p><u>NOTED</u></p>	
<p>40.</p>	<p>MEDICAL APPRAISAL AND REVALIDATION</p> <p>Dr Armstrong introduced Dr Harvey, who discussed a report (Paper 22/18), which summarised the progress made in relation to appraisal and revalidation during the COVID period.</p> <p>Dr Harvey advised that there is a process in place to ensure that all appraisals carried out in 2022/23 meet the General Medical Council (GMC) core requirements, whilst continuing to focus on doctors' wellbeing. The Committee were also advised that succession planning is in place to ensure there are a sufficient number of trained appraisers to undertake appraisals within each Sector/Directorate as appraisers retire and/or demit from the role.</p> <p>Professor Brown stated that the impressive levels of appraisals carried out, reflects the commitment and professionalism of all involved, with Dr Harvey noting his thanks for the support of Medical Staffing administrative staff.</p> <p>Dr Armstrong providing a General Medical Council / Deanery update for the four areas subject to Enhanced monitoring:</p> <ul style="list-style-type: none">• Medicine at the Queen Elizabeth University Hospital – no serious concerns identified at March 2022 visit;	

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	<ul style="list-style-type: none"> • Obstetrics and Gynaecology at the Princess Royal Maternity Unit – no serious concerns identified at February 2022 visit, with recommendations reducing from 16 to four; • Medicine at Inverclyde Royal Hospital – no serious concerns identified at November 2021 visit. with recommendations reducing from 13 to seven; • Psychiatry at Inverclyde Royal Hospital – 13 recommendations being addressed via a robust action plan, including the appointment of a Consultant to lead on-site training, with next visit awaited. <p>Dr Armstrong advised that, with the exception of Psychiatry at Inverclyde Royal Hospital, she expected the other three areas will move off Enhanced Monitoring shortly.</p> <p>Dr Ryan asked whether the appraisal process had changed significantly following COVID, with Dr Harvey advising that appraisals now afforded enhanced opportunities for appraisees to receive additional support and mentorship, which is greatly appreciated from feedback received.</p> <p><u>NOTED</u></p>		
<p>41.</p>	<p>NURSING AND MIDWIFERY COUNCIL REFERRALS AND ASSURANCE</p> <p>Professor Wallace introduced Ms Tomlinson, who discussed a report (22/19) providing the Staff Governance Committee with an update of Nursing and Midwifery Council (NMC) referral activity across the Board, during the period 2021-2022 and providing assurance that all NHSGGC referrals are managed consistently.</p> <p>Ms Tomlinson advised that during the reporting period April 2021 to March 2022, NHSGGC managed 127 referrals. There are currently 82 open cases, accounting for less than 0.6% of the 18,000 registered nursing and midwifery workforce, with this figure below the national average of 1%.</p> <p>Ms Tomlinson explained that the reasons for referral fell broadly into three categories.</p> <p>Ms Cameron-Burns asked for clarity on issues of professionalism, with Ms Tomlinson providing poor documentation, failure to act in the case of deteriorating patients, and lacks of communication with families as examples. Ms Tomlinson also confirmed that in cases referred by members of the public, these were ‘after the fact’ and not cases that the Board were aware of.</p> <p><u>NOTED</u></p>		

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42.	<p>WHISTLEBLOWING ANNUAL REPORT AND MONITORING UPDATE</p> <p>Ms Donald discussed a report (Paper 22/20), providing the Staff Governance Committee with an overview of whistleblowing activity during 2021/22. The report provided assurance that whistleblowing investigations are taking place in line with the National Whistleblowing Standards (the Standards).</p> <p>Ms Donald advised that there had been an increase in performance since the Standards were introduced in April 2021 and that the average time to respond to cases has also reduced.</p> <p>Mr Vincent noted that the scope of the report gives far greater assurance to the Staff Committee than other Health Boards.</p> <p><u>NOTED</u></p>		
43.	<p>AREA PARTNERSHIP FORUM</p> <p>Ms Cameron-Burns discussed a report (Paper 22/21) to provide the Committee with an update on the work of the APF, highlighting a positive contribution to work on the Nurse and Midwifery Rota Policy, Blended Working Guidance, the Workplace Adjustment Passport and the Caseload Management Tool.</p> <p><u>NOTED</u></p>		
44.	<p>STAFF GOVERNANCE PERFORMANCE REPORT</p> <p>Ms Carrey discussed a report (Paper 22/22), to provide an update on workforce data and performance as at 30 June 2022, highlighting the following:</p> <ul style="list-style-type: none"> • The report has been expanded to include additional job families, as discussed at the May 2022 meeting; • Recruitment teams continue to liaise with individual service areas to focus on particular recruitment challenges; • A new intake of Newly Qualified Nurses and Midwives will join NHSGGC during September and October 2022; • Staff turnover currently sits at 12%; • Sickness absence is at 6.5%, which is above the local and national target, with the Human Resources Support and Advice Unit were providing focussed support to individuals and managers to reduce this; • COVID absence at 31 July 2022 is 516, in line with the projection; • Statutory and Mandatory Training compliance is 85%, with work ongoing to improve compliance figures, particularly Fire Safety; • Personal Development Planning and Review completion is 42%, with ongoing work underway to increase this; 		

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	<ul style="list-style-type: none"> • Missing equalities data across each of the specific four protected characteristics has decreased. <p>Cllr McDiarmid asked about the decision to classify COVID absence as regular sick absence from 1 September 2022. Mrs MacPherson advised that having COVID absence as a specific category was a temporary measure and that it had been agreed nationally with the Scottish Terms and Conditions Group (STAC), in agreement with the Trade Unions.</p> <p>Professor Brown asked whether the current establishment figures include a factor for absence, with Mrs MacPherson confirming they do and that any area in a position above 90% establishment are in an acceptable position, with support and specifically targeted campaigns for those areas below 90%.</p> <p><u>NOTED</u></p>		
<p>45.</p>	<p>REMUNERATION COMMITTEE</p> <p>Ms Cameron-Burns provided an update on the Remuneration Committee meetings held on 29 June and 25 July 2022, highlighting the following:</p> <ul style="list-style-type: none"> • The Performance Outcomes for the Executive and Senior Manager cohorts for 2021/2022 were discussed in detail, providing the Committee with assurance on the process and determination of the outcomes. The Board Chair confirmed he had also reviewed the Executive Directors and the Chief Executives remaining direct reports as Grandparent reviewer and was in agreement with the performance ratings; • On receipt of the national circulars, NHSGGC will process any payments accordingly; • The Committee also sought assurance about the induction programme for new Committee members, this was affirmed and an induction session with Mrs MacPherson is being organised; • The Chief Executive provided the members with an update of appointments and movement in the Executive cohort, including the new Director of Finance and Depute Director of Planning); • The reconvened meeting on 25 July 2022 covered the outcomes of the Chief Executive’s performance review by the Board Chair. The Remuneration Committee as the Grandparent reviewers, were provided with assurance and approved the outcome recommended by the Board Chair. <p>Ms Cameron-Burns advised that the next meeting will take place on 22 November 2022.</p> <p><u>NOTED</u></p>		

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44.	<p>HUMAN RESOURCES RISK REGISTER</p> <p>Mrs MacPherson discussed a report (Paper 22/23), highlighting that the risks were reviewed by the Human Resources Senior Management Team in April 2022, noting the amendments to the Risk Register:</p> <ul style="list-style-type: none"> • Risk descriptions updated for all risks to include: Risk Causes; Risk Description; Risk Impacts, consistent with all risks across the Corporate Risk Register • Target date for actions reviewed for all risks • Controls and mitigating actions reviewed throughout • Risk scores reviewed and remain static for this reporting period <p>The Committee noted that it had received sufficient assurance from the information provided that the risks are clearly described, risk scores appropriate, the alignment of corporate objectives is appropriate and that proposed mitigating actions are framed in SMART terms and it is clear how they will address the risks.</p> <p>Ms Khan asked about whether the residual score for the ‘failure to train and develop staff’ risk is too ambitious, with Mrs MacPherson confirming that mitigation measures, including the resurrection of training, meant that the residual score is reflective of this.</p> <p>The Committee approved the aligned corporate risks, scores and mitigating actions in place to reduce these risks, noting that the risks will be reviewed again in August 2022.</p> <p><u>APPROVED</u></p>		
45.	<p>CLOSING REMARKS AND KEY MESSAGES TO THE BOARD</p> <p>Ms Cameron-Burns thanked all presenters, contributors to discussions during the meeting and those involved preparing papers.</p> <p>Key messages to the Board will be included in the Co-Chairs’ report to the 23 August 2022 Board meeting and will be discussed and agreed out with the meeting.</p>		<p>Ms Cameron-Burns Ms Miles</p>
46.	<p>DATE & TIME OF NEXT MEETING</p> <p>The next meeting of the Staff Governance Committee will be held on Tuesday 22 November 2022 at 1.30pm.</p>		
The meeting ended at 12.35hrs.			