

CONFIRMED MINUTES OF THE OPEN MEETING OF THE WELSH AMBULANCE SERVICES NHS TRUST BOARD, HELD on THURSDAY 26 JANUARY 2023 MEETING HELD IN CARDIFF AMBULANCE STATION, and VIA ZOOM

PRESENT:

Professor Kevin Davies	Non-Executive Director and Vice Chair of the Board
Jason Killens	Chief Executive
Lee Brooks	Executive Director of Operations
Bethan Evans	Non-Executive Director
Estelle Hitchon	Director of Partnerships and Engagement
Ceri Jackson	Non-Executive Director
Ian James	Trade Union Partner
Angie Lewis	Director of Workforce and Organisational Development
Dr Brendan Lloyd	Executive Director of Medical and Clinical Services
Rachel Marsh	Executive Director of Strategy, Planning and Performance
Trish Mills	Board Secretary
Leanne Smith	Interim Director of Digital Services
Joga Singh	Non-Executive Director
Andy Swinburn	Director of Paramedicine
Chris Turley	Executive Director of Finance and Corporate Resources
Damon Turner	Trade Union Partner
Martin Turner	Non-Executive Director
Liam Williams	Executive Director of Quality and Nursing

Attendees

Fflur Jones	Audit Wales
Steve Owen	Corporate Governance Officer (Via Zoom)
Alex Payne	Corporate Governance Manager
Jeff Prescott	Corporate Governance Officer (Via Zoom)

Apologies

Colin Dennis	Chair of the Board
Paul Hollard	Non-Executive Director
Hugh Parry	Trade Union Partner
Hannah Rowan	Non-Executive Director

001/23 WELCOME AND APOLOGIES FOR ABSENCE

Welcome and apologies

The Vice Chair welcomed all to the meeting and noted apologies had been received from Colin Dennis, Paul Hollard, Hugh Parry and Hannah Rowan.

Declarations of interest

The Board noted that all declarations of interest were formally recorded on the Trust's declarations of interest register.

RESOLVED: That the apologies as described above and declarations of interest on the register were formally recorded.

002/23 PROCEDURAL MATTERS

The Vice Chair reminded the Board that Committee highlight reports which featured later in the Agenda assured the Board of the sufficient scrutiny.

Minutes: The Minutes of the Board meetings held on 24 November 2022 were presented and confirmed as a correct record.

Action Log: The Board received the action log and noted the updated position.

RESOLVED: That

- (1) the Minutes of the meetings held on 24 November 2022 were confirmed as a correct record.**
- (2) the update on the action log was noted. The one action on the log, 133/22, Monthly Integrated Quality Performance Report (MIQPR) to contain details on cultural metrics, agreed this would remain open until the next meeting where an update would be provided.**

003/23 CHAIR'S REPORT AND UPDATE

1. In the absence of the Chair, the Vice Chair advised the Board that he (the Chair) had attended several meetings since the last meeting, which included Ministerial, Chairs and Chief Executive meetings. He added that he and the Chief Executive had met with the Minister of Health to provide an update on December's performance.
2. The Board were asked to formally acknowledge and congratulate Edward O'Brian on receiving the King's Ambulance medal, and also the former Executive Director of Nursing, Claire Bevan on receiving the OBE.
3. It was noted that the Board were briefed on and discussed in detail, the Integrated Medium Term Plan and financial sustainability as part of the Board Development session on 25 January 2023.
4. Furthermore the sterling effort and service of staff was acknowledged during this challenging time.

RESOLVED: That the update was noted.

004/23 CHIEF EXECUTIVE'S UPDATE

In presenting his report, Jason Killens drew the Board's attention to the following:

1. There have been several days of Industrial Action. During those strike days, the Trust's operational planning had enabled this action to take place in a safe manner. The exemptions from Industrial Action have developed well and those exemptions, together with the additional mitigations, have enabled to provide a safe service going forward. Whilst the individual rights of staff to take Industrial Action was recognised, the Trust continued to work with and support Trade Union colleagues. The professionalism of all staff during this challenging time was recognised.
2. The 2023/24 Fleet Business Justification Case costing £15.175m which contained further decarbonisation and Electric Vehicle initiatives, has been approved by the Board and submitted to Welsh Government.
3. The testing of the Electronic Patient care Record (ePCR) referral system has revealed some technical issues which were being addressed. Brendan Lloyd added that the Academy had recognised the issue with respiratory coding and have provided the Trust with a Data Analyst to assist.
4. At the Reminiscence Therapy Interactive Activities (RITA) User Group Conference and Awards 2022 ceremony, the Board were informed of the recent award presented to the Trust's Dementia Team who won the 'Most Innovative Use of RITA is an interactive touch screen tablet which mixes entertainment and therapy to assist patients in their memory recall. This was particularly useful for patients with dementia spending long periods of time in an ambulance waiting outside Emergency Departments.
5. The roll out for Community First Responders (CFRs) to provide pain relief, initially 500mg of oral paracetamol, was a step towards providing further analgesia at a later date. This will enable them to provide much better care for patients in the community.

Comments:

1. The Board welcomed the use of RITA, and were pleased to see the developments in the roll out of CFR's being able to provide stronger pain relief going forward.
2. A question arose regarding the connectivity of ePCR when in people's houses, and how that could be improved. Leanne Smith explained that ongoing work to improve national connectivity was underway.

RESOLVED: That the update was noted, received and commented upon.

005/23 QUESTIONS FROM MEMBERS OF THE PUBLIC

The Board were advised that at this time no questions had been received.

006/23 **PROGRESS ON ACTIONS TO MITIGATE AVOIDABLE PATIENT HARM**

Jason Killens drew out the following areas for the Board's attention:

1. There had been significantly high red activity during December 2022 with substantial hours lost due to hospital handover delays reaching in excess of 32,000 hours; this equated to 38% of the entire ambulance vehicle fleet.
2. Whilst there still remained significant delays at Emergency Departments (ED), the data for January suggests that hours lost will be in the region of 20,000 hours. It was also noted that activity for January had reduced significantly. Performance for January had improved both in the red and amber medians. The median response time for red calls had fallen from 11 minutes to just over 7 minutes, and amber had fallen from 5 hours to under an hour. He added that work was ongoing to further improve performance and the Trust should not be complacent.
3. Rachel Marsh made reference to the Action plan within the report assuring Members that work continued to address them.

Comments:

1. The Board were delighted pleased to note the improving performance trend for January noting that there was still significant challenge in the system.
2. Concern was expressed with the number of Immediate Release requests of ambulances outside ED's made to health boards being declined; particularly amber 1 where 156 were released and 541 were not. Lee Brooks explained that for January the number of requests had reduced. In terms of red however, there was still room for improvement.
3. Damon Turner added that from a TU perspective, despite the ongoing Industrial Action, the Trust was still providing a suitable service to the public and welcomed the support from Trust management. He expressed concern in terms of the reduction in demand of people calling the Trust and reiterated that the Trust, during IA days will still be providing life and limb cover.
4. The Board recognised that the Cardiff and Vale health board area continued to show a marked reduction in lost hours and queried if their measures could be adopted elsewhere across Wales. Jason Killens advised that the Chief Ambulance Services Commissioner has shared best practice, not only from Cardiff but from other organisations, with health boards. Furthermore the Minister for Health has expressed her concerns with handover delays to health boards.
5. In terms of compliance with Immediate Release Directions, the Board were assured by Jason Killens that the Trust adhered to the recently refreshed All Wales policy. He added that compliance data was shared and any concerns were escalated to the appropriate office holders.

RESOLVED: The Board noted the progress being made on the WAST

actions and the ongoing impact of hospital handover lost hours.

007/23 INDUSTRIAL ACTION

1. The Board were given a PowerPoint presentation by Angie Lewis and Lee Brooks which outlined the broader context in terms of how the Trust was dealing with the Industrial Action.
2. The Board were given specifics on the number of Union Members and also with details of upcoming strike action days. Angie Lewis explained how these strike days would affect the Trust and the actions being taken to mitigate. From the Trust's perspective, the approach was to enhance senior leadership visibility and to keep listening and learning to colleagues.
3. Lee Brooks gave a summary of the Business Continuity Planning and its structure which considered the strategic, tactical and operational aspects of the Trust. It also included discussions on derogation (this would identify the service and roles which were exempt from strike action) with each Union.
4. Members were given an outline of the planning before and during Industrial Action days. This included engagement with Health Boards to ensure prompt handovers at hospital sites, and continued dialogue with Trade Union partners.
5. In terms of the impact on performance on strike days that had already occurred, around 20% to 30% of resources were not available. Going forward, it was noted that on days where 3 Unions would be on strike, there could be around 50% of resource unavailable.
6. The Board were shown EMS data comparisons from December 2022 and January 2023. It was noted that activity on the strike day of 21 December was lower in terms of 999 activity, conveyance to hospital and the number of incidents attended January's data continued in the same vein as December, however on the strike day of 19 January this was more consistent with the normal average.
7. In respect of risks, the Board were reminded on the significant and meticulous planning which were in place to lessen the impact on staff and patients. These included but were not limited to, the capacity to respond to patients, financial impact on the Trust, and the financial impact on staff.

Comments:

1. The Board commended the Executive Team on its WAST live events prior to strike days which provided open and clear communication with colleagues.
2. It was questioned whether the Trust was aware of what impact the upcoming RCN strike would have on the Trust. Liam Williams explained that a meeting was scheduled tomorrow with Executive Directors of Nursing, and it was anticipated that the intelligence is that the upcoming

strikes would have a greater impact.

RESOLVED: The update was noted.

008/23 RISK MANAGEMENT AND CORPORATE RISK REGISTER (CRR)

1. Trish Mills presented the report and reminded the Board that the 17 principal risks as described within the Board Assurance framework (BAF) were reviewed in detail at the relevant Committees.
2. In terms of the highest scoring risks, risk 223 (*the Trust's inability to reach patients in the community causing patient harm and death*) and risk 224 (*Significant handover of care delays outside accident and emergency departments impacts on access to definitive care being delayed and affects the Trust's ability to provide a safe & effective service for patients*); both scoring 25; Members noted that detailed discussions had taken place at the recently held Board Committees.
3. With respect to the other high scoring risks, risk 160 (*high absence rates impacting on patient safety, staff wellbeing and the Trust's ability to provide a safe and effective service*) and risk 201 (*damage to the Trust's reputation following a loss of stakeholder confidence*) these were both currently rated at 20. These risks have been discussed in detail at respective Committee meetings.
4. The Board were asked to note the closure from the CRR of risk 245 (*Estates accommodation capacity limitations impacting on EMS Clinical Contact Centre's (CCC) ability to provide a safe and effective service*). This risk had reached its target score of 12 and had been approved by the Executive Management Team for closure.
5. Trish Mills made reference to the Audit Wales Structured Assessment in which it was recognised that the Trust was strengthening its systems of assurance with regular review at Committees; notwithstanding this, there was still further work to undertake with the BAF in order to consider the mitigating actions ensuring they had the intended impact.
6. The Board noted that the Risk Management Transformation Programme was included in the Integrated Medium Term Plan (2022/25). The immediate priority of the programme was to undertake a detailed review of each of the Trust's Corporate Risks, which has been completed.

Comments:

1. It was queried whether the higher scoring risks, particularly those of 25, should be presented to the Board as a formal report and discussed in more detail rather than deferring them to committees within the Trust. Trish Mills advised there was an opportunity for these risks to be discussed in more detail; noting that the purpose of the Executive Summary was to provide assurance to the Board. Trish added that it may be prudent to discuss at the Audit Committee meeting, the BAF and how it should be interpreted at Board meetings.

2. Clarity was sought on whether it was the Chief Executive's responsibility to recommend and assure the Board that the risks were being managed appropriately or whether it was a Committee responsibility; noting that in any event, Committees already reviewed and monitored risks. Jason Killens acknowledged this point and stated that he would reflect upon it and consider any impact on the reporting structure; he agreed to update the Board at its next meeting. Liam Williams added that the two highest scoring risks were under constant discussion, and informed decision making across the whole organisation. A detailed discussion ensued in which Members recognised that the risks, due to their significance, were consistently reviewed and monitored at Committee level.
3. Risk 557 (*Potential impact on services as a result of Industrial Action*). It was queried whether the risk had been captured sufficiently to highlight the risk to other priorities on the transformational agenda. Angie Lewis accepted that the summary risk description required more information.

RESOLVED: The Board:

- (1) Noted the closure of Risk 245 from the Corporate Risk Register;**
- (2) Reviewed the Board Assurance Framework; and**
- (3) Noted the update on the Risk Management Transformation Programme.**

009/23 MONTHLY INTEGRATED QUALITY AND PERFORMANCE REPORT

1. Rachel Marsh presented the report and drew the Board's attention to the following areas, noting that the information had already been shared at recent Board Committee meetings;
2. As part of the Trust's work to reduce the number of patients being taken to hospital, it was noted that the consult and close rates after 999 calls had currently achieved 14.6% in December 2022 against the benchmark of 10.2%.
3. In terms of sickness absence, the overall sickness rate was 8.77% in November. Whilst representing an improvement indicative data for December suggested that the figures would not be so positive, which was expected.
4. Data was being captured on equality and diversity to provide metrics, which at this stage was limited. Work was underway to capture more meaningful data which would be linked in to the culture indicators.

Comments:

The Board were interested to see how the new Joint Investigation Framework (previously Appendix B) system was working. Liam Williams explained that whilst positive progress was being made there was still room for improvement. This

included the need, at an All Wales level, in terms of Datix, to have a single module that allowed for serious incident investigation across Wales for information exchange.

RESOLVED: The Board considered the December 2022 Integrated Quality and Performance Report and actions undertaken, and determined that the report provided sufficient assurance of performance against the indicators. The Board noted that further information on cultural metrics would be provided in due course.

010/23 FINANCIAL PERFORMANCE MONTH 9

1. The Board received the report from Chris Turley who provided the financial position for month 9, 2022/23 drawing their attention to the following areas:
2. In terms of financial risks for the current financial year, the amount had reduced significantly from recent months; month 10 was showing further reductions.
3. The report outlined the position on the capital programme for 2022/23, with details of how the Trust intended to manage any variations to it going forward.
4. Significant plans were underway for the financial plan for 2023/24 which was iterative, and would be challenging. It would be brought to the Trust Board in March for approval alongside the IMTP.

RESOLVED: The Board

- (1) Noted and gained assurance in relation to the Month 9 revenue and capital financial position and performance of the Trust as at 31 December 2022 along with current risks and mitigation plans;**
- (2) Noted the delivery of the 2022/23 savings plan as at Month 9, and the context of this within the overall financial position of the Trust;**
- (3) Noted the updated discretionary capital plan for 2022/23 year end, and**
- (4) Noted the Months 8 and 9 Welsh Government monitoring return submission included within Appendices 1 – 4 (as required by WG).**

011/23 INTEGRATED MEDIUM TERM PLAN (IMTP) 2022-2025 QUARTER 3 PROGRESS REPORT

1. The Board received the report from Rachel Marsh who explained it was a new style of reporting and outlined the progress of this year's IMTP.
2. As a result of the ongoing system pressures, the Board recognised that the Trust had for the last quarter looked at a reduced set of priorities; inevitably this had resulted in some areas being off track.

RESOLVED: The Board noted the update against WAST's IMTP Accountability Conditions and the overall delivery of the IMTP as detailed in the report.

012/23 INTEGRATED MEDIUM TERM PLAN (IMTP) 2023-2026

1. Members received a PowerPoint presentation in which Rachel Marsh drew attention to the following areas in which the Trust was developing the plan.
2. The Health Minister had listed a set of priorities for the plan and these were: - Delayed transfer of care, primary care access, urgent and emergency care, planned care, cancer and mental health, and Child and Adolescent Mental Health Services.
3. Integrated Commissioning Action Plans (ICAP); these contained a range of performance targets which were currently being considered and worked through for both the Trust and Health Boards.
4. In terms of 111, following completion of the roll out, a commissioning framework was being developed collaboratively with a range of priorities put forward by Commissioners.
5. When considering and developing the plan the Trust has listened to staff and patients, through surveys, roadshows, and other methods of communication.
6. The Board were assured that the Trust constantly monitors and analyses key high level metrics relating to quality, staff and finance/value for money.
7. From a 111 perspective the plan will focus on meeting more patients' needs digitally, reduce call answering and clinical call back times, ensuring patients reach the correct service, and more patients' needs met without the need for referral onwards. To achieve this the Trust will, amongst other initiatives, improve recruitment and retention of call handlers and clinicians, implement new pathways for callers with urgent dental or palliative care needs, and implement direct access pathways for same day emergency care or urgent primary care centres.
8. In providing the right advice or care in the right place first time for 999 callers, this would include implementing schemes to reduce repose times, increase the proportion of people who are treated on scene, and increase the number of people who are taken to alternative services (as opposed to EDs). The enablers to achieve this include securing recurrent funding for the 100 staff, working with health boards to improve referral pathways, and enhancing the Clinical Support Desk function.
9. Another area the Trust was working on was to enable staff to be the best they can, and this would be achieved through several emerging priorities which would look at the culture, capacity and capability. These would range from a sustained focus on improving well-being, to a commitment for developing all professions.
10. There were several risks which could potentially affect the success of the plan, of which the Board were given details. These included a balanced financial plan and the ongoing disruption with Industrial Action.

11. Members noted that the plan was due for submission to Welsh Government on 31 March 2023.

Comments:

Following a query on the level of engagement with other health boards in relation to developing the plan. Rachel Marsh advised that the ICAPs were an opportunity at Health Board level to further collaborate. Rachel added there will be a section within the IMTP on partnerships.

RESOLVED: That the update was noted.

013/23 ENGAGEMENT FRAMEWORK DELIVERY PLAN 2023/24

1. Estelle Hitchon explained that the report outlined the proposed phases of engagement with stakeholders, staff and the public to seek agreement on a preferred option on the delivery plan. This work is not possible without the support of key stakeholders.
2. The Trust will be governed by the National Guidance for Public Engagement in Wales as part of the implementation of the delivery plan.
3. The Board were informed that the Consultation Institute would review the plan and submit any recommendations to the Trust. The Board should also not that the timeline as detailed in the plan was currently indicative and may be subject to change. It was anticipated that the work should be completed in two years' time whereby the plan will be submitted to the Board for approval.

Comments:

1. Members discussed which Committee of the Board should monitor and oversee the Engagement Framework Delivery Plan. It was agreed that it should be the People and Culture Committee.
2. The Board recognised that as the plan developed, the role of the Patient Experience Community Involvement Team in the delivery of the Engagement Framework must be considered.
3. Members also recognised that the capacity and resources to develop the preferred option of the plan would be challenging. Jason Killens added that the preferred option which would finally emerge would take into consideration the resources available, as was expected by the Commissioner.
4. The Board discussed the level of clinical involvement during the engagement and consultation process; noting that senior clinical leaders had already been engaged.

RESOLVED: The Board;

- (1) **Approved the principles and direction of travel outlined in the draft Engagement Framework Delivery Plan; and**

- (2) **Noted that further development of the plan, any further resources required, and achievable timelines would be remitted to the Executive Management Team for further consideration, and onwards to the People and Culture Committee to be updated on progress for next steps – on behalf of the Board.**

014/23 STRUCTURED ASSESSMENT

1. Fflur Jones explained that the report outlined the findings from the Auditor General's 2022 Structured Assessment work on the Trust.
2. The Structured Assessment was split into four distinct headings for reporting purposes; governance, strategic planning, finance, and resources.
3. During the fieldwork process, Fflur added that Audit Wales engaged with several members of the Trust Board and other senior leaders and thanked them for their input into the process.
4. It was generally felt that positive progress had been achieved, particularly around leadership and the Board's commitment to transparency. Additionally, despite the ongoing operational challenges the Board continued to focus on its strategic direction.
5. Further positives from the report included the approval of the IMTP 2022-2025 from Welsh Government, and the Trust's track record of achieving a balanced financial position.
6. There were some challenges and issues facing the Trust which had given rise to some recommendations that had already been responded to by the EMT.
7. Whilst the report was a positive one with many areas of progress, the Board should continue to seek opportunities to influence changes on the broader NHS system as evidenced by discussions today around systems pressures and avoidable harm. It was hoped that regular discussions in this area continued along with robust challenges in order to achieve the maximum impact.
8. Fflur made reference to the process involved in the delivery of the clinical strategy as articulated in paragraph 60 of the report. It was agreed this paragraph would be removed pending further discussion with the Director of Paramedicine to clarify the process.

Comments:

The Board recognised that the report had identified an area where it indicated there appeared to be less challenge and scrutiny at Board and Committee meetings by Non-Executive Directors when compared to the level of challenge provided by Independent Members in other Welsh NHS bodies. Trish Mills advised that the Trust would provide opportunities for this to be addressed, for example at a Board Development days. A discussion ensued in which the Board considered areas it could strengthen the level and scrutiny and challenge provided by Non-Executive Directors which were within its gift. The Board also emphasised the professional

relationship nuances that existed between Executive and NED colleagues of the WAST Board where deeper understanding of challenges and deeper questioning took place. This was outside of committee structures and was considered a very powerful strength of scrutiny by the NED members of the Board.

RESOLVED: The report was received.

015/23 TRUST BOARD – 2023/24 SCHEDULE OF MEETINGS

1. Trish Mills presented the report advising that since sharing the schedule with the Board last December, there had been several changes which were outlined in the Executive Summary report.
2. It was noted there would be five Board Development sessions during the year taking place on alternative months to the Trust Board meetings.
3. Dates beyond June 2023 for the Welsh Ambulance Services Partnership Team meetings will be included shortly once confirmed.
4. There were placeholders in May and June 2023 for Audit Committee and Trust Board meetings to receive the 2022/23 Annual Report and Accounts. The meeting dates will be confirmed once the reporting schedule has been published by the Welsh Government.

RESOLVED: The Board approved the schedule of dates for 2023/24 Board and Committee meetings and noted the adaptations to the cadence of meetings, in line with the detail in the report.

016/23 BOARD COMMITTEE HIGHLIGHT REPORTS

1. **Audit Committee (December 2022)**
Martin Turner presented the report as read adding that several areas within it had already been discussed.
2. **People and Culture Committee (November 2022)**
Angie Lewis, on behalf of Paul Holland, added to the report and alerted the Board to the work on revamping exit interviews and employee retention.
3. **Finance and Performance Committee (January 2023)**
Joga Singh, added to the report and alerted the Board to the ongoing Committee discussions with handover delays.
4. **Academic Partnership Committee (January 2023)**
Estelle Hitchon, on behalf of Hannah Rowan, added to the report and alerted the Board that the Committee would be reviewing its priorities in relation to University Trust Status in context, with the Trust's IMTP.

RESOLVED: The Board received the above Committee Highlight Reports and received assurance that each of the Committees had fulfilled their Terms of Reference, and that matters of concern had been escalated in line with the Alert, Advise, Assure framework of reporting.

017/23 GOVERNANCE REPORT

1. The Board noted that a Chair's Action had been approved on 29 December 2022 to affix the Common Seal to a lease agreement between the United UK Propco 1 Limited and the Trust.
2. The Board noted that the Trust Seal was applied to the following documents:
 - (a) Reference number: 0239 - Cardiff Make Ready Depot: - removal of fence and installation of new fence between Cardiff Ambulance Station and the adjoining land. Seal applied on 16 December 2022; and
 - (a) Reference number: 0240 - Lease renewal request for Units 32 and 33 at Gelli Industrial Estate. Seal applied on 4 January 2023.
3. The Board noted the following decisions made in private session:
 - (a) The Fleet Business Justification Case (BJC) for vehicle replacements in 2023/24 was submitted to Welsh Government for funding consideration was approved.
 - (b) Authority was provided to settle a clinical negligence claim which was within the delegated authority of the Trust Board.
 - (c) The Board approved the Trust's application for core participant status for Module 3 of the Covid-19 Public Inquiry after considering advice and discussing risks, including costs.

RESOLVED: The Board ratified the Chair's Action, noted the use of the Trust Seal as described and the decisions made in private since the last Board meeting.

018/23 MINUTES OF COMMITTEES

The minutes of the following open meetings were received:

1. Audit Committee – 15 September 2022.
2. People and Culture Committee – 5 September 2022
3. Charitable Funds Committee – 10 October 2022.
4. Finance and Performance Committee – 14 November 2022.
5. Academic Partnership Committee – 26 October 2022

Furthermore the following NHS Wales Joint Committee update reports were received

1. Emergency Ambulance Services Committee (EASC) meeting of 8 November and EASC Chair Summary of 6 December 2022.

RESOLVED: That the above minutes and update reports were received.

019/23 ANY OTHER BUSINESS

None

EXCLUSION OF THE PRESS AND MEMBERS OF THE PUBLIC – 26 JANUARY 2023

Members of the Press and Public were invited to leave the meeting because of the confidential nature of the business about to be transacted (pursuant to Section 1(2) of the Public Bodies (Admission to Meetings) Act 1960).

RESOLVED: The Board would meet in private on 26 January 2023.

Date of next Open meeting: 30 March 2023