

## Education and Standards Committee

### Meeting Minutes

4<sup>th</sup> March 2020

PHECC Offices, Naas @ 10:00am

#### Present:

Shane Knox (Chair)  
Paul Lambert (Vice Chair)  
Gareth Elbell  
Peter McDaid  
Tom Brady  
Niamh O'Leary  
Frank Keane  
Chris O'Connor  
Róisín McGuire  
Ben Heron

#### Apologies:

Ray Lacey

#### In Attendance:

Brendan Cawley, PHECC PDO  
Jacqueline Egan, PHECC PDO  
Ricky Ellis, PHECC PDO  
Margaret Bracken, PHECC Committee Officer

#### Absent:

Adrian Murphy  
Tess O'Donovan

---

### 1. Chair's Business

The Chair welcomed everyone to the meeting. Apologies were noted. The Chair acknowledged and thanked the members of the EMT CPC subcommittee for their work over the last few months. The Chair welcomed Brendan Cawley, who recently joined PHECC as Programme Development Officer for Education and Standards. Mr Cawley introduced himself and provided a brief outline of his work experience. Introductions were made by the members around the table.

### 2. Draft Minutes from 6<sup>th</sup> November 2019

The draft minutes of the meeting held on 6<sup>th</sup> November 2019 were reviewed and an amendment was agreed. With reference to agenda item 3.2 EMT CPC simulation and patient contacts, it was agreed to add the following;

'It was agreed that a meeting is to be convened with three members of the Education and Standards Committee and three members of the Quality and Safety Committee to discuss simulation in relation to EMT CPC.'

**Resolution: That the Education and Standards Committee approve the minutes of the meeting held on 6<sup>th</sup> November 2019 subject to agreed amendment.**

**Proposed: Tom Brady**

**Seconded: Chris O'Connor**

**Carried without dissent**

## 2.1 Matters Arising

An update was sought on agenda item 8 Evaluation of AP education programme. The Chair relayed that Cloud Consulting presented a synopsis of their report to Council at their December meeting. The final report will be presented to Council at their March meeting and the Committee will be updated thereafter.

## 3. Quality Review Framework (QRF) – status

Brendan Cawley provided an update. Cycle 2 of the QRF commenced in Q4, 2019. 11 RIs/ATIs participated in the QRF process. In 2020 it is anticipated that PHECC will conduct 6-8 reviews per quarter.

A discussion ensued. Some members expressed concern regarding negative feedback they have received from RIs/ATIs who have been through the QRF process and have described the process as unpleasant. The feedback suggests that some of the QRF assessors were unprofessional. It was stated that QRF assessors are PHECC representatives and that the QRF is intended to be a collaborative process. Some of the members stated that they are satisfied with the QRF process and advised that this behaviour from individual assessors is unacceptable. A member noted that they attended an inspection of one RI and found no issues. The members were requested to submit the feedback they have received from RIs/ATIs to Mr Cawley who will carry out a review and identify the QRF panel members in question. Mr Cawley informed the members that he will be attending some QRF inspections, and together with this feedback, any issues that are identified will be resolved. A robust structure will be put in place going forward.

It was suggested that PHECC issue instructions to QRF panel members of rules and obligations for all individuals representing PHECC. It was stated that RIs/ATIs, as part of the Governance Validation Framework, are invited to provide feedback on the GVF process, and it was suggested that this could work for the QRF process also. Mr Cawley stated that PHECC will consider an engagement event for RIs/ATIs to enable them to provide feedback on the QRF process. The Chair advised that, in order to receive meaningful feedback, the feedback process should be facilitated by non-PHECC personnel. The members concurred. Mr Cawley will consider the comments of the Committee in this regard.

## 4. Recognised Institution / Approved Training Institution Report

Current RI/ATI status and course approvals were provided in the meeting papers.

### 4.1 RI Outcome Reports – Renewals and Practitioner Course Applications

Pending application outcome assessment reports was tabled for review by the Committee. RI/ATI portal applications updates was provided in the tabled document. There are 5 new applications, 21 renewals and 4 new courses in progress. Mr Cawley referred to the St. John Ambulance new responder course application for EFR Instructor. The members reviewed the report and the following resolution was passed.

**Resolution: That the Education and Standards Committee approve the St. John Ambulance Ireland new responder course application for EFR Instructor.**

**Proposed: Ben Heron**

**Seconded: Niamh O’Leary**

**Carried without dissent**

## 5. FAR

### 5.1 Association of First Aid Trainers in Ireland (AFATI) presentation

The Education and Standards Committee previously invited the Association of First Aid Trainers in Ireland (AFATI) to attend their Committee meeting to discuss their concerns regarding the First Aid Responder course. Two representatives from the AFATI joined the meeting and were introduced to the members by the Chair. They thanked the Committee for the invitation.

Both representatives addressed the Committee and provided an outline of their concerns.

- PHECC are the third organisation to manage the FAR industry.
- No list of FAR instructors provided by PHECC so AFATI can no longer verify FAR instructors or know how many there are.
- Representation requested on PHECC Council or PHECC Committees.
- The suitability of the FAR curriculum was discussed. The curriculum should take account of the small percentage of people who have the following challenges: i) little or no former education ii) hearing or other impairments and iii) do not have English as their first language. AFATI have developed a new syllabus for the FAR course, with feedback received from providers and instructors, and requested that this be submitted to the Committee for consideration.
- AFATI proposed a move away from written FAR assessments (20 MCQs) and deliver continuous practical assessments throughout the course.
- AFATI proposed an outdoor element be added to the FAR course. The proposal included FAR Instructors being upskilled to teach the administration of EpiPen, Salbutamol, Glucose Gel, and Midazolam in the childcare sector, farming and other outdoor sectors.
- AFATI proposed an add-on of tourniquets, haemostatic dressings etc for farm injuries to the FAR Instructor course.
- Consideration to providing a FAR paediatric course was sought.
- QQI level 5 FAR certificate and 5 day FAR instructor training programme be made available again.
- There is a FAR MCQ requiring that temperature be provided but a thermometer is not included in the equipment used by FAR responders. This implies that exam questions are being written by people who are unaware of what equipment is available to FAR responders.
- ACRs are suitable for Cardiac First Responders but not for the workplace scenario. The HSA cannot record that information. It was suggested that a single page FAR report form would be more feasible.

Chris O'Connor thanked the two representatives from AFATI for attending the meeting and voicing their concerns. He related that he has raised the same items on many occasions with the Education and Standards Committee. He stated that he agreed with everything they said; PHECC do not have the resources to manage the ATIs and should outsource the management of FAR. He advised AFATI to set up a robust process themselves and not bother with PHECC as they would be 'regulated to death' by PHECC.

Further discussion by Committee members continued around the points made by AFATI as outlined above. AFATI representatives were advised of the difference between upskilling instructors to administer medications and upskilling them to teach the administration of medications. The importance of legislation was emphasised, and reference was made by Committee members to CFR courses and Medications for Listed Organisations and the associated legislation SI 449 of 2015. The Chair indicated that whilst he agreed with many of the suggestions by AFATI, he noted that there is an issue with the administration of Midazolam at FAR level.

A member noted that there is no representation from the voluntary organisations on Council.

The Chair stated that based on information received by AFATI from key stakeholders it would be remiss of the Committee not to consider the proposals and information submitted by the AFATI. AFATI were requested to submit a full report with their proposals to the Committee for further review and consideration as to how to progress, for discussion at the April Committee meeting. The Committee thanked the two AFATI representatives who then left the meeting.

The views expressed by Mr O'Connor to the AFATI representatives were further discussed. The Committee members all shared the view that the comments made by Mr O'Connor to AFATI had undermined PHECC and are not reflective of the Committee's views, or the work that members of the Committee had contributed over their term.

It was suggested that a list of FAR instructors could be compiled from the information provided on the FAR Instructor certificates issued to instructors by RIs/ATIs.

The Committee agreed that there should be FAR representation on the Education and Standards Committee. The Chair stated that it is timely to review the FAR Education and Training Standard. He advised that PHECC took on the management of FAR without adequate resources. The Committee agreed that PHECC need to reconsider resources for the management of FAR.

Subsequent to discussion the following recommendations to Council were agreed.

**Resolution: That the Education and Standards Committee recommend that Council consider the inclusion of representation from the FAR industry on the future Education and Standards Committee.**

**Proposed: Tom Brady**

**Seconded: Ben Heron**

**Carried without dissent**

**Resolution: That the Education and Standards Committee recommend that Council consider adequate additional resources to deal specifically with the FAR function.**

**Proposed: Gareth Elbell**

**Seconded: Peter McDaid**

**Carried without dissent**

## **6. Examinations**

Jacqueline Egan, PHECC Programme Development Officer for Examinations, updated the Committee.

### **6.1 EMT CPC Simulation and patient contacts**

At the November meeting of the Education and Standards Committee discussion took place on EMT CPC simulation and Draft Return to Practice Framework which was developed by the Quality and Safety Committee. It was agreed to convene a small subgroup of both Committees for the purpose of reviewing EMT CPC simulation and the Draft Return to Practice Framework. Ms Egan informed the meeting that the subgroup met on 26<sup>th</sup> February. Chris O'Connor, Chair of the subgroup, provided an overview.

The Committee discussed the recommendations from the subgroup as included in the meeting papers.

**Recommendation 1:**

The members advised that a distinction needs to be drawn between a) candidates who are awarded the NQEMT and never join the PHECC register and b) registrants who for whatever reason do not re-register. It was stated that there is a perception among some candidates that when they are awarded the NQEMT they are automatically registered. The Committee agreed that PHECC notify all candidates at all practitioner levels who are awarded the NQEMT that they have six months from the date they were awarded the NQEMT to join the register. It was proposed that a reminder be sent out three months after receipt of the NQEMT. Ms Egan was asked to develop a draft process for this for discussion at the April Committee meeting.

The Committee agreed that > 5 years be amended to  $\geq$  5 years.

The Chair sought clarification on the components of return to pre-hospital practice course. Ricky Ellis, PHECC Programme Development Officer, who attended the subgroup meeting, stated that the attendees directed that there should be equality between all levels on the register. Ms Egan was asked to draft a framework specifying the various components as discussed at the subgroup meetings, seek approval of the Chair of the subgroup, and circulate to all members.

The Chair sought clarification on ii) Repeat full course with consideration to re-taking the NQEMT. It was stated that the NQEMT for each practitioner level is awarded once only. It was agreed to amend option ii) to; Repeat full course with no consideration to re-taking the NQEMT.

**Recommendation 2:**

Chris O'Connor stated, in accordance with their minutes, that the Quality and Safety Committee, at their April 2019 meeting, recommended to Council that EMT CPC simulation cannot be presented as evidence of patient contacts in two consecutive CPC cycles. He stated that the Quality and Safety Committee representatives acknowledged their lack of understanding of how simulation works and the group agreed that there is no reason why simulation cannot be used in every CPC cycle.

The members discussed ii) including additional evidence of communication/attitudinal behaviour skills in the CPC Standard. It was noted that demonstrating empathy on a mannequin, which is used for simulation, is not possible. Paul Lambert stated that communication is included in the EMT skills assessment sheets and scenarios.

The Chair advised that, following clarification sought from Council, the development of a standard for CPC is within the remit of the Education and Standards Committee as clearly laid out in the Committee Terms of Reference. It was advised that EMT CPC roadshows have commenced and EMTs have been told that simulation is available. A comment was made that practitioners are regulating the regulator.

Paul Lambert relayed that he has produced a document with his thoughts on CPC simulation which could form the basis of a guidance document. It was proposed that a guidance document be developed within the next few weeks and that simulation be introduced into CPC at all levels without delay. The Committee agreed. Clarification was sought whether practitioners could fail simulation. It was stated that a pass or redemption will be required for remediation.

**Recommendation 3:**

The Chair advised that there is no requirement to reconvene the CPC subcommittee at this time.

Subsequent to discussion the following recommendation to Council was agreed.

**Resolution: That the Education and Standards Committee recommend to Council for approval that a guidance document be developed immediately, and that CPC simulation is introduced at all levels without delay.**

**Proposed: Ben Heron**

**Seconded: Róisín McGuire**

**Carried without dissent**

## **6.2 Sharing candidate exam results data with RIs**

At the November 2019 meeting the Committee recommended to Council that NQEMT candidate results are shared with RIs. Council, at their November meeting, accepted the recommendation that the candidate's results are shared with the RI in a GDPR compliant manner. The Executive sought GDPR advice from PHECC legal advisors. The advice received is that NQEMT exam candidate eligibility numbers can be uploaded to a secure area on the PHECC website for access by named RI course director.

In parallel, PHECC is developing a specification for a new exam management system which will include automatic transfer of candidate results data to named RI following verification of the results by PHECC. Currently PHECC are pursuing the steps involved in making the results data available as a priority in the absence of an exam management system.

The NQEMT exam application forms are being revised to include candidate consent to share results data as a tick box option. Currently all exam applications for the March examinations have been processed so the expectation is that the new 2020 exam application forms will be active in advance of the May NQEMT exams.

Ms Egan relayed that a paramedic results sharing pilot will be carried out with paramedic exam results initially, and pending the success of this pilot, EMT exam results will be published thereafter. The Chair stated that the results data, which will be made available to RIs, will enable them to carry out audits on the number of students mapped against successful and unsuccessful results. Ms Egan advised that EMT RIs will be engaged with regarding the sharing of EMT candidate exam results.

## **6.3 AV recording of Paramedic Megacode/OSCE**

A second meeting of the AV subgroup took place on 29<sup>th</sup> January 2020. Ms Egan noted that this was a very robust meeting. Discussion took place around the fact that there is no evidence to support the implementation of AV in summative examinations or for examination appeals. However, the subgroup members stated that AV should not be used in NQEMT examinations assessment but should be used for the purpose of NQEMT OSCE candidate viewings, rechecks and appeals. The rationale was that videoing OSCEs would provide a defensible NQEMT paramedic OSCE.

The research commissioned by PHECC clearly demonstrates that there is no evidence to support the use of AV in summative assessment or in examination appeals, however the subgroup wished to progress with the development of a DRAFT AV Policy as a matter of urgency. An early DRAFT of 'Council Policy on the use of Audio-Visual Technology in NQEMT OSCEs at Paramedic level' has been developed and will be discussed at the next AV subgroup meeting which will take place shortly. Following completion of the AV Policy by the subgroup, it will be presented to the Education and Standards Committee at the April Committee meeting.

A discussion ensued. Frank Keane noted that he was unable to attend the subgroup meeting. He stated that he has previously identified issues with the appeals process, and the use of AV in this process is a huge step forward and will protect the good name of the regulator, the candidates and examiners. It was suggested that a communication piece for examiners would be beneficial. Chris O'Connor suggested that in tandem with running the AV pilot, research could be carried out to obtain more evidence of the benefits of using AV. Ms Egan stated that ethical approval for such research would have to be sought.

The Chair asked Ms Egan if there is a time period for running the AV pilot. Ms Egan advised that the following need to be developed; a) a technical specification; b) guidelines on management of subject access requests; c) security protocols on management of recorded material. The Chair advised that, with regard to GDPR, all files pertaining to candidate's OSCE results will be deleted following the deadline for making an appeal.

A discussion ensued regarding AV being introduced for courses that have already commenced. It was noted that if there are changes made to the OSCE process there is a 60 day period before the changes come into effect. It was suggested that a tick box option be added to the examination application form that OSCEs are being videoed and candidates will have the option to opt in. It was suggested that AV could be a pre-entry requirement for all courses. It was agreed by the Committee that examiners and patients who do not wish to be videoed should not apply to PHECC to be examiners and patients.

John Lally, PHECC ICT Officer, joined the meeting on request of the Chair. He was asked if there are any perceived issues with the introduction of the AV pilot. Mr Lally informed the meeting that a small AV trial was carried out at paramedic OSCEs in University Limerick using 360 degree cameras and it was found that the quality of the video was poor. It was questioned if two basic cameras would be better. Mr Lally advised that two basic cameras with a wide lens would be sufficient and would capture multiple angles. He suggested to trial AV at a mock OSCE so that any issues can be identified and addressed. Chris O'Connor stated that he has cameras that he has used for assessments and he offered the use of the cameras to PHECC for the pilot. The Chair also offered the use of NASC cameras for this purpose. The Chair stated that it is a risk for PHECC that no current access to recordings of OSCEs is available for candidates. He advised that this is on the risk register.

The Committee agreed that a pilot should take place with a requirement to have AV implemented for NQEMT OSCEs in November 2020. The members thanked John Lally and he left the meeting. Ms Egan was requested to circulate the Draft 'Council Policy on the use of Audio-Visual Technology in NQEMT OSCEs at Paramedic level' to the members prior to the April Committee meeting.

Subsequent to discussion the following recommendation to Council was agreed.

**Resolution: That the Education and Standards Committee wish to advise Council that a trial of AV recording of Paramedic OSCEs will be commenced for the purpose of dealing with candidate viewings, rechecks and appeals.**

**Proposed: Róisín McGuire      Seconded: Gareth Elbell**  
**Carried without dissent**

#### **6.4 Paramedic Megacode/OSCE – update**

Council approved at their meeting of 13<sup>th</sup> February 2020, that the Paramedic Exam Standard (Interim) is modified to include a critical element on the OSCE assessment skills sheets in the NQEMT Paramedic



Examination. The necessary revisions were carried out to the paramedic OSCE assessment sheets.

All paramedic level RIs have been informed that from 13<sup>th</sup> February forward, all Paramedic PHECC OSCEs will include a critical element on the assessment sheets. The next Paramedic OSCEs are scheduled for 19<sup>th</sup> March 2020. The Chair stated that this is a protective mechanism for patient safety.

## 7. CPC – update

### 7.1 Introduction of CPC for Paramedics and Advanced Paramedics

Brendan Cawley provided an update.

Council, at their April 2019 meeting, reviewed and discussed a CPC Implementation Plan submitted by the PHECC Director and a resolution was passed that the CPC Programme Implementation proposal document is referred to the Education and Standards Committee. At the October 2019 Council meeting the Chair of the Education and Standards Committee confirmed that he supported the recommendations made by the Committee in their report of March 2018 that implementation of CPC at P and AP level be conditional on provision of resources to support the project and should not commence until all resources are in place. A resolution was passed that Council resolve to implement CPC for P and AP level in accordance with the recommendations from the Education and Standards Committee. A business case was prepared in 2018 for four WTE's for CPC and was rejected by the DoH. A subsequent business case in 2019 for two WTE's for CPC was also rejected. Rejection is also expected for 2020. CPC for P and AP is currently on hold as there are not adequate resources to support the project.

In the CPC Implementation Plan, as contained in the meeting papers, it is proposed to make two more specified purpose part-time appointments to cover both the paramedic and advanced paramedic CPC programme, in addition to continuing the existing EMT appointment. Both these posts will report directly to the Deputy Director and Registrar, as is currently the case.

A discussion ensued. It was stated that the implementation of CPC for Paramedics and Advanced Paramedics is a key priority, needs to be properly resourced, and cannot be held back any longer. Concerns were raised that EMTs could opt out of the CPC process as, based on feedback received, they feel that they are being singled out for CPC. Reference was made to Council resolution from their December 2019 meeting in which Council support the development of a Critical Care Paramedic. It was commented that P and AP CPC needs to be implemented before the introduction of a Critical Care Paramedic.

The Education and Standards Committee welcome the introduction of CPC for P and AP. The Committee support the Director's CPC Programme Implementation plan, as included in the meeting papers, and advise that the Director is responsible for implementation and can delegate to whoever he wants.

Subsequent to discussion the following recommendation to Council was agreed.

**Resolution: That the Education and Standards Committee accept the alternative CPC Programme Implementation as the best current option available as per PHECC Director's proposal and that CPC for Paramedics and Advanced Paramedics be implemented forthwith.**

**Proposed: Ben Heron**

**Seconded: Gareth Elbell**

**Carried without dissent**



## **7.2 CPC requirements for EMTs**

Mr Cawley relayed that the second cycle of CPC Roadshows for EMT's have commenced. Issues with privileging and verification was highlighted by members. EMTs tick a box to say they are privileged with a licensed CPG provider, but no evidence is requested. EMTs can upload responder certificates to their CPC eportfolio as evidence of patients contacts and select a provider but they may not be privileged by that provider. It was advised that privileging is not PHECC's responsibility and is a matter for the licensed CPG providers. It was suggested that providers could issue a letter stating that practitioners are privileged by them and this letter can be uploaded as evidence.

EMT CPC Guide 2018 was included in the meeting papers. Reference was made to an error on page 13 under Reflective practice and/or case studies. It was agreed that 'compulsory requirement' be replaced with 'additional requirement'. Mr Cawley will make the amendment as agreed.

## **8. Teaching Faculty Framework (TFF)**

Brendan Cawley provided an update.

### **8.1 Working Group – update**

Members of the Teaching Faculty Framework Working Group last met on the 16th October 2019. The focus of the meeting was to agree the proposed level of Instructors – Responder, Educator and Facilitator, agree the criteria for subject matter expert selection by RIs/ATIs in the provision of courses. Significant work was progressed for establishing the learning outcomes for the Responder Instructor Standard. Educator and Facilitator Standards learning outcomes were to be addressed at the next meeting of the TFFWG scheduled for 27th November, this meeting did not go ahead. TFFWG are due to meet March 4th 2020 after Education and Standards Committee Meeting.

### **8.2 Applications for Educational Awards – update**

At the November 2019 meeting the current hold on applications for Educational Award holders was reviewed and it was noted that several RIs are awaiting the reopening of the applications by PHECC. It was determined that the application process should recommence immediately for those currently who have completed their coursework, using the current application forms. The process to establish a facilitator group to review current applications and supporting documentation has begun. An Expression of Interest was released by PHECC Executive on Friday 21<sup>st</sup> February. TFF still needs to be reviewed and application forms still need to be revised.

It was queried if the current application forms are still available on the website. Mr Cawley clarified that this is the case and applications using this form are being received into the PHECC office. The Chair queried when the education awards assessment panel applications will be reviewed. Mr Cawley advised that this is a priority and a suitable date for the assessors to review the applications will be decided as soon as possible. An update will be provided to the Committee at the April meeting.

## **9. Practitioner Education and Training Standards Review**

Jacqueline Egan provided an update.

Crowe was appointed by PHECC to conduct a review and revision of practitioner education and training standards and to develop a competency framework for emergency medical technician (EMT), paramedic (P) and advanced paramedic (AP) education.

Crowe have informed that the current Standards present an overly prescriptive framework for the design and delivery of programmes leading to NQEMT examination by RIs. They believe that the current standards are more of a national curriculum than as a set of standards or thresholds for learners becoming competent practitioners. That there is a significant focus on specified course structure and module content and reflects a focus and interest in documented programme content rather than the educational experience of learners or the competencies required by practitioners.

Ms Egan relayed that Crowe met with the Executive on 2<sup>nd</sup> March and have provided a draft first report. A full report and competency framework will be available to the Executive at the end of March.

Concern was noted that the report from Crowe may not meet the specifications as set out in the tender. The Committee requested that Ms Egan circulate the report to the members in advance of their April meeting. The Chair relayed that Crowe held an engagement event in October 2019 for Council and Committees and some queries were raised as to the purpose of the stakeholder event.

#### **10. Evaluation of AP Programme – Project update**

Brendan Cawley updated the Committee. The Evaluation of the UCD CEMS AP Programme conducted by Professor Andy Newton and his project team has recently been completed. At the December Council meeting Professor Newton delivered a presentation providing the findings of the evaluation of the programme along with main recommendations. The reports generated by the project are the Advanced Paramedic Programme Review, supported by the critical review and mapping of the programme curriculum against the PHECC AP Education and Training Standard and the critical review and mapping of the programme curriculum against the PHECC AP CPGs. It is anticipated that these reports will be considered by Council at their March meeting.

#### **11. Recognition of Professional Qualifications – Stats**

A summary of recent activities in the area of recognition of overseas qualifications was presented. There are four applications currently being assessed. In response to a query regarding two applicants who were upgraded, Mr Cawley clarified that the applicants were previously notified that they did not meet the standard and the deficits were identified. Since then the deficits have been met and both applicants were upgraded in status.

#### **12. AOB**

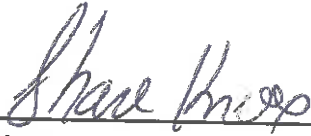
12.1) Brendan Cawley brought to the members attention that the PHECC Registrar has raised some issues and is seeking clarity from the Committee in relation to the return to practice subgroup meeting. Mr Cawley will refer these issues to the Chair in advance of the April meeting.

12.2) Reference was made to the Coronavirus and the implications the spread of the virus may have on PHECC business. It was advised that PHECC may need to consider alternative arrangements where there may be large gatherings, and for PHECC exams such as providing an online facility. It was stated that when the appropriate advice is received from the DoH, clear guidelines will need to be provided. The Chair advised that this is a matter for the Executive.

There being no other business the meeting concluded at 14:15pm approximately.

The Chair thanked all present for their attendance.

The next meeting of the Education and Standards Committee will be held on 15<sup>th</sup> April 2020 in the PHECC offices.

Signed:   
Chair

Date: 21<sup>st</sup> May 2020