

# PEOPLE, ORGANISATIONAL DEVELOPMENT AND CULTURE COMMITTEE

ANNUAL REVIEW REPORT

2024/2025

## **1. Introduction and Chair's summary**

In line with Standing Orders, the People, Organisational Development and Culture Committee must submit an Annual Report to the Board through the Chair within 6 weeks of the end of the reporting year setting out its activities during the year and including the review of its performance and that of any Sub-Committees it has established, setting out how the Committee has met its Terms of Reference during the financial year.

The Board uses this annual report to inform:

- The ongoing development of its governance arrangements, including its structures and processes:
- Its Board Development Programme, as part of an overall Organisation Development framework: and

## **Chairs Reflections**

As this is my final year chairing the PODCC committee, I would like to express my appreciation for the commitment and contributions of all members, staff and partners who have supported the work of the committee throughout the year.

This year we have continued to oversee and monitor the organisation's progress in delivering its planned objectives. I am particularly pleased with the strides we have made in addressing nursing workforce shortfalls. There remains more to be done with the medical workforce, but the direction of travel is positive.

The annual report details the activities and measures undertaken to give confidence to the Board of the appropriateness of actions taken. We recognise that much more needs to be done in terms of aligning and supporting the work of this committee with other committees.

The Committee focusses on five key aspects: Governance, People, Culture, Performance & planning. These key aspects bring to life the complexity of managing its people who are at the heart of delivering vital services to the community it serves. We have received individual first-hand experiences and reports by staff of how the organisation is supporting them in their employment journey.

One of the most encouraging developments has been the organisation's commitment to supporting and valuing its people. We are actively promoting staff well-being, recognising the importance of retention strategies and building a culture that values resilience and care.

The establishment of Strategic People Planning and Education Group in 2023 marked a welcome step toward aligning education, development and workforce planning. More however needs to be done to create a truly comprehensive and joined-up approach to education and training that addresses organisational current and future needs.

The Committee has matured in its role with an improved focus on impact and outcomes. We remain committed to continuous improvement and recognise that this

is a work in progress. I leave this role with confidence in the foundations we have built and the direction we are heading.

*Chantal Patel*

*PODCC Chair (up to 31 March 2025)*

## 2. Terms of Reference and Workplan

The Terms of Reference (TOR) for the People, Organisational Development and Culture Committee is reviewed on an annual basis or following any significant changes. The TORs were last reviewed on 15 April 2024.

[Link to People, Organisational Development and Culture Committee Terms of Reference](#)

The People, Organisational Development and Culture Committee has a work plan to enable forward planning for the forthcoming year. The workplan is produced to incorporate the duties outlined in the Committee's Terms of Reference and any suggested areas of focus identified during the self-assessment process.

The People, Organisational Development and Culture Committee workplan covers a range of activities including statutory reporting duties, regular items of business and priority planned pieces of work which support Board and Committee's objectives. The work plan is regularly updated throughout the year to ensure it remains responsive to emerging issues and risks.

[Link to PODCC Work Plan 2024-25 People, Organisational Development and Culture Committee Work Plan 2024-25](#)

## 3. Sub-Committee/s

The **Strategic People Planning and Education Group** reported into the People, Organisational Development and Culture Committee with its own TOR and workplan for the year. The Sub-Committee's TOR were last reviewed on 15 April 2024. In line with their Terms of Reference, the Sub-Committee provided a report after each meeting, as well as produce an annual report which was presented to the Committee on 18 February 2025 reporting on activity throughout the year.

The **Anti Racist Wales Implementation Group** (previously called the Black Asian Minority Ethnic Advisory Group) reported into the People, Organisational Development and Culture Committee with its own TOR and workplan for the year. The Sub-Committee's TOR were last reviewed on 20 August 2024. It has now been agreed to disband the Anti Racist Wales Implementation Group.

The **Research and Innovation Sub Committee** (R&ISC) reported into the People, Organisational Development and Culture Committee with its own TOR and workplan during 2024-25. The Sub-Committee's TOR were last reviewed on 15 April 2024. In line with their TOR, the Sub-Committee provided a report after each meeting, as well as produce an annual report which was presented to the Committee on 18 February 2025 reporting on activity throughout the year. From 1 April 2025, this Sub-Committee will now move to the remit of the Digital, Data and Information Committee.

#### 4. Table of attendance

Membership	15/04/24	13/06/24	20/08/24	29/10/24	16/12/24	18/02/25
Associate Professor Chantal Patel	✓	x	✓	✓	✓	✓
Anna Lewis	✓	✓	✓	✓	✓	✓
Ann Murphy	✓	✓	✓	✓	✓	✓
Delyth Raynsford	✓	✓	✓	✓	✓	✓
Rhodri Evans	✓	✓	✓	✓	x	✓
Iwan Thomas	x	x	x	x	x	✓
In Attendance						
Lisa Gostling	✓	✓	✓	✓	✓	✓
Prof John Gammon	✓	✓	✓	x	✓	x
Sharon Daniel	✓	✓	✓	✓	✓	✓
Mark Henwood	✓	✓	✓	✓	✓	✓
Dr Ardiana Gjini	✓	✓	✓	✓	✓	✓
James Severs	✓	x	✓	x	✓	✓
Alwena Hughes- Moakes	✓	✓	✓	x	✓	✓
Joanne Wilson	✓	✓	✓	✓	✓	✓
Meeting quorate?	Yes	Yes	Yes	Yes	Yes	Yes

A quorum consists of no less than three of the membership and must include as a minimum the Chair or Vice Chair of the Committee, together with a third (3) of the In Attendance members.

#### 5. Committee Activities – alert, advise and assure

The Committee is required to report to the Board after each Committee meeting by presenting a report highlighting the key discussion items at the Committee.

**Alert** – *The following matters were areas where the Committee was unable to take an assurance or had a lack of confidence that the action in place was sufficient to address the issue satisfactorily and/or it was within the scope of the operational team to resolve, and were alerting the Board as engagement action or intervention was required.*

**Strategic Equality Plan (SEP) Annual Report** – In August, the Committee asked the Board to identify which areas of inequality it wished to include in its list of priorities, as there were a number of issues within the Health Board (such as the gender pay gap) as outlined in the SEP Annual Report, which required addressing. The Board noted the Alert on 26 September 2024 and agreed this required further detailed discussion.

In December, the Committee took assurance from the SEP Annual Report (which was published in April 2024). The risks associated with the equality, diversity, and inclusion data concerns (highlighted at Board on 26 September 2024) were included

on the risk register to amplify Committee and Board level discussions, monitoring of actions and accountability.

**Advise** – *The following matters were areas of concern where assurance had been taken on actions in place but required close monitoring.*

**Community Nursing Annual Report** – In June, the Committee advised the Board that assurance could not be taken from the Community Nursing Annual Report that there was long-term strategic resilience within the current position. Operational measures were broad ranging to mitigate risks, a fundamental challenge around workforce sustainability remained. It was noted following recent Welsh Government (WG) guidance, the Health Board had to ensure the appropriate level of administrative support to clinical teams whilst also recognising the current financial position. The Board noted this advisory.

**Corporate Risk Report** - The Committee received the Corporate Risk Report at its meetings in April 2024 and August 2024.

- **Risk 1821: Risk to the welfare of Health Board staff due to current demands** – In August, although the Committee took assurance on the identified controls and planned actions set out in the report, the Board was advised that it was with the caveat that further work would take place to identify the current position with staff well-being (in particular the increase in stress related absences) and outline actions required to improve this. The Board noted this advisory. In October, Risk 1821 increased its score from 9 to 12 as it had noted that sickness absence rates were increasing. Careful consideration was being taken at different organisational levels to mitigate through organisational planning approaches to manage workload at management level, and then the consequences upon staff wellbeing. A further update report is scheduled to be presented at the PODCC Committee meeting in May 2025.

**Medical staff mandatory training** – In December, the Committee advised the Board that a lack of centralised data intelligence was highlighted during a medical staff mandatory training update and assurance was sought that effective monitoring processes were in place to provide a holistic view of performance management and compliance rates across the Health Board. Due to specific concerns raised regarding resuscitation/basic life support training compliance rates of paediatric medical staff within the report, the Chair requested an update, which was presented at the February 2025 meeting. The Board noted this advisory. The Head of Education would examine how all training records can be centralised onto the Electronic Staff Record (ESR) system, to facilitate accurate reporting.

In February the Committee were updated and noted that work was being undertaken to resolve mandatory training concerns and establish a single point for record keeping, to improve compliance across the Medical and Dental Workforce in 2025. Assurance was provided that paediatric staff highlighted during discussions at the previous meeting were either compliant and in date or had arrangements in place to achieve compliance.

**Assure** – *The following matters were areas where there was confidence that robust actions are in place and are sufficient to address the issues to operate effectively.*

**Operational Risk Report** - The Committee received the Operational Risk Report at its meetings in October 2024 and February 2025.

**Workforce Efficiency / Planning** – In April, the Committee received assurance that all relevant work was being taken forward to meet the Workforce Efficiency (Agency costings) following the introduction of the Standard Control Framework for all health boards by the WG. This required that the Health Board developed reduction plans for agency staff across all staff groups and produce action plans to address this. The Committee discussed the challenges and where work was going well.

In April, the Committee also took assurance on the approach being taken to create a comprehensive and coherent workforce plan outlined in the Workforce Planning Report. The report identified the top 53 risks across the board and aligned all of the interventions along each of the pillars. The plan was currently looking at the next 12 months, but with a long-term scope of 3 years, 6 years, and 12 years.

In August, the control measures undertaken to reduce variable pay for all staff groups, as outlined in the Workforce Efficiency Update Report, were noted, recognising the challenges ahead.

In February, the Committee were informed that the People Plan will be developed for 2025/26 with a future focus to align resources to agreed priorities via the Annual Planning Cycle. People Stabilisation programmes are in place for Nursing and Medical professional groups and linked to associated professionals (Acute Coronary Syndrome (ACS) staff group and Medical Associate Professions (MAPs)); People Plans were in development for other clinical professions Allied Health Professions, Healthcare Science Additional Professional and Technical (which includes Pharmacy); People Plans are in development for Estates and Ancillary and Administrative and Clerical.

**Cultural Progression** – In April, the Committee took assurance that all matters in relation to Cultural Progression were being progressed. The Organisational Development Relationship Managers (ODRM) team reviewed its structure, and the way the team worked both internally and externally. An important task for the team was to identify the culture across the health board and take that learning forward in a meaningful way. During discussions, it was noted that good news stories are collected through the retention strand of the ODRM team who take stories from challenging teams and spotlight where things are going well.

**Performance Assurance and Workforce Metrics** - Assurance was taken on the Performance Assurance and Workforce Metrics throughout the year. The Committee recognised that Statistical Process Control (SPC) charts had greatly improved the intelligence submitted to Committee enabling it to see trends and providing the Committee with clear sight on what is happening across the organisation. The Committee were interested to hear that the Workforce team were looking into diverse cultural norms which could affect sickness absences, including looking at the reasons for absences.

During the Performance Assurance and Workforce Metrics reports, the Committee:

- Agreed that it would be helpful to examine the impact that the increase in dementia training undertaken by Health Board staff is having on patient and family experience.
- Noted the national challenges with staff sickness absence due to stress, depression and anxiety were discussed and the extent of actions underway to support staff wellbeing.
- Requested an update at the December 2024 meeting on the actions underway to improve the medical workforce mandatory training compliance and performance management.

**Contractual and Legislative Changes** – In April, the Committee received assurance from the report on the Contractual and Legislative Changes: Immigration and Sponsorship UK Policy Changes, that there was a negligible impact from the immigration changes announced by the Government in December 2023.

**Monitoring of Welsh Health Circulars (WHCs)** - Assurance was taken throughout the year on the WHCs report, and that the responses to the WHC were submitted by the deadlines set by WG or were on track to be completed ahead of the deadlines.

Updates were received throughout the year regarding WHC 017-24 Implementation of the Non-pay Elements of the 2022-24 Collective Agreement, which was issued in March 2024 and implemented in full by 31 January 2025. An action plan was submitted in July 2024 with the support of the Staff Partnership Forum. The Health Board has delivered on every aspect of the WHC. Whilst there is no ongoing requirement to report to WG, a continued focus on this area is needed.

WHC 031-24 Agency Workforce Reduction Programme and Control Framework 2024-25 was issued in June 2024 and was implemented in full within the timeframe (March 2025). In February it was noted that a plan has been drawn up to mitigate the issues raised by PODCC, which are a part of the wider plans to centralise training data by the Workforce and Organisational Development Team.

**The Armed Forces Annual Report 2023/24** – In June, an annual report for 2023-24 was presented to the Committee detailing the work undertaken by the Health Board to implement the Armed Forces Covenant and Armed Forces Covenant Duty, detailing a broad range of activities to improve outcomes for veterans and members of the Armed Forces community. The issue of low uptake of public health screening services with veterans was raised. This was added to the workplan for discussion at a QSEC meeting.

**Annual Carers Report** – In June the Committee received assurance that all relevant work was being undertaken to support unpaid carers, including staff who work for the Health Board, and have unpaid caring responsibilities in their home lives. Assurance was also received on the work being undertaken to demonstrate that the Health Board is proactively addressing the priorities of the regional Carers Strategy.

**Community Nursing Annual Report** – In June, the Committee was only able to take assurance from work at an operational level from the Community Nursing Annual Report (see the ‘advise’ matter above).

**Speak Up Agenda** – In June, assurance was taken on the work of the Speak Up Agenda to create open and anonymous mechanisms for staff to speak up around any clinical or non-clinical concerns or ideas.

**Staff Partnership Forum** – In June the Committee received assurance from the Staff Partnership Forum Update which focussed on the joint work of the implementation of the non-pay elements of the collective agreement for 2022-24 for Agenda for Change (AfC) staff. The non-pay programme was also incorporated into a Welsh Health Circular (WHC) (2024)017, dated 28 March 2024.

**Employee Relations** – In June the Committee received assurance that all matters were being progressed regarding internal Employee Relations cases for the period January to December 2023, employment tribunal activity and employment policy review work for financial year April 2023 to March 2024. A more detailed report was discussed at in-Committee due to the sensitive information contained.

**Welsh Language Annual Report** – In June the Committee received assurance that all relevant work was being undertaken around the Health Board’s own discovery process action plan, the WG strategic framework ‘More than just words’, and the Health Board’s compliance with the Welsh language standards, which were incorporated into a single Welsh Language Annual Report 2023/24.

**Planning Objectives aligned to PODCC** – In April, the Committee took assurance from the Delivery against Planning Objectives Closure Report 2023-24, and update reports provided throughout 2024-25. The Committee received assurance that Delivery against Planning Objectives aligned to PODCC was progressing. The Committee were presented with deep dive presentations for each of the planning objectives aligned to PODCC. The following points were noted:

- In June, the Committee were advised that the Health Board has the lowest nurse staff turnover rate in Wales.
- In October, the Committee were assured that all Planning Objectives were on track, apart from the development of the Workforce Plan. A draft was in place and ongoing revisions were being made in light of Targeted Intervention escalation discussions with WG. The Workforce Plan will be presented as part of the Integrated Medium-Term Plan (IMTP) process for 2025/26.

**Targeted Intervention (TI)** – In August, the Committee discussed the governance approach and the areas of work aligned to it under TI.

In October, the Committee continued to oversee the key initiatives for improving workforce sustainability, leadership development, and organisational culture as part of the TI de-escalation process. Monitoring progress of the strategic initiatives and programmes linked to TI was scheduled on the Committee’s work programme.

In December, The Committee noted progress was made to recruit into key executive position roles, finalising leadership programmes, and implementing workforce plans as reported via the TI Progress Report. In relation to the TI Progress Report.

In February, the Committee noted significant progress against the criteria allocated to the Committee, with the caveat that there would be discussion and consideration of how information was presented in future reports.

**Employment Law** – In August, the Committee received assurance that the Health Board was aware of potential changes to Employment Law following the change of Government and is forward looking regarding any impacts and opportunities that may arise.

In December, the Committee noted a number of changes to Employment Law, including an increase in statutory sick pay, maternity and paternity pay and recent changes to pension tier rates.

**Staff Survey Results** – In August, the 2023 Staff Survey Results were discussed, with assurance provided that lessons are being learnt, and further work being undertaken to increase compliance for the 2024 staff survey, which was launched on 1 October 2024. The Staff Survey action plan was accepted, with the caveat that it would be amended to a two-part plan, setting out actions for the Workforce teams and departmental managers.

In December, the Committee noted that 21% of staff completed the Staff Survey, which was a significant improvement over the previous year's response rate of 12%. The survey results provided valuable insights to inform future staff engagement strategies and support improvements in workforce feedback methods.

In February, Staff Survey Results were verbally presented focusing on trends, improvements and areas for focus. Whilst noting that the Health Board needs to demonstrate the actions taken in response to feedback, the Committee was assured that appropriate measures are in place to address the findings of the survey. It was agreed this would be a substantive item at the next meeting.

**LGBTQ+ Local Action Plan** – In August assurance was taken that progress continues against the Health Board's LGBTQ+ Local Action Plan. The Committee agreed with the decision to not continue with membership of the Stonewall Diversity Champion Programme in 2024/25.

**Workforce Education and Development Plan** – In August, the Committee was assured by work taking place on the delivery of a Workforce Education and Development Plan, which supports the pipeline for staff progression.

**Tritech Institute** - In August, performance against the Tritech Institute Key Performance Indicators (KPIs) was reviewed, with progress made noted.

**Health Education and Improvement Wales (HEIW) Targeted Visits** - In August, an update was provided following three HEIW targeted visits to Health Board hospitals, and work undertaken to address recommendations by the HEIW. The

Committee was assured by this work, and that plans are in place to self-identify issues.

**Reduction of agency and bank nurses** - In response to a request from the Committee on 15 April 2024, Members received a report in October on the impact that the reduction of agency and bank nurses is having on clinical outcomes for patients. The comparison data suggested an overall reduction in reported incidents; however, it was recognised that the data was only available for five months and the pressures linked to the winter period may influence the position. An update report which examined the triangulation between incidents and reduction of agency and bank staff was submitted to the QSEC in February 2025, where it was highlighted that although the overall number of vacancies has reduced, there had been a significant increase in experienced workforce recruitment, who are being supported by the Corporate Nursing Team, Senior Leads and Learning and Development team. QSEC took assurance from this report.

**Staff retention work programmes** – In December, progress relating to the staff retention work programmes, including the actions arising from the Retention Discovery Work, was shared. The work programmes were on track, and staff turnover figures monitored as part of the Escalation Framework. The Committee received assurance that appropriate progression towards the ambitious target figures was being made.

**Analysis of Increased Workplace Stress at Hywel Dda University Health Board** – In February, the Committee welcomed the report and held a detailed discussion as a first step to better understand Section 10 absences, which are sickness absences attributed to anxiety/depression/stress. Also, to understand better the reasons for absence, potential areas for further analysis and some initial next steps and areas of focus. It was agreed that a further report highlighting progress would be scheduled for November 2025.

**Welsh Language Standards** - In February, the Committee noted the Welsh Language Standards actions being taken in response to the requirements of Welsh Language Standard 110 – Enabling Clinical Consultations through the Medium of Welsh provided assurance. Consideration was being given to the use of Artificial Intelligence (AI), subject to caveats around the need for an AI policy, for assisting in parity of service provision. The Committee took assurance from the report as a reflection of the activity currently planned in order to enhance and embed the Welsh language and culture at Hywel Dda, whilst enhancing patient experience.

**Medical Workforce Mandatory Training Compliance** – Following December's advisory to the Board, the committee received an update in February outlining that work was being undertaken to resolve mandatory training concerns and establish a single point for record keeping, to improve compliance across the Medical and Dental Workforce in 2025. Assurance was provided that paediatric staff highlighted during discussions at the previous meeting are either compliant and in date or have arrangements in place to achieve compliance.

**Staff Stories** - The Committee received staff stories at each of its meetings during 2024/25 with a focus on the following Services/ Programmes of work:

- The Value of Cultural Progression (April 2024)
- Armed Forces Staff Network (June 2024)
- Promoting Our Own (August 2024)
- Simulation Training (October 2024)
- Apprenticeship Programme (December 2024)
- Recovery Nature Programme (February 2025)

**Research and Innovation Sub-Committee (R&ISC)** - The Committee took assurance from the R&ISC Update Reports which outlined the research and innovation activity and the management of its functions. Assurance was also taken from the R&I University Partnership Updates. The Committee approved the R&ISC Terms of Reference and the R&ISC Annual Report which outlines the research and innovation activity during 2023/24 and the management of its functions.

In considering the R&ISC Update Report, noted positive progress around the issue of regional oncology trials and anticipated consequences in terms of equity of access to trials. Also, actions to increase the levels of commercial research undertaken within the Health Board, which can offer patients earlier access to life-extending and life-changing treatments. The Committee recognised the importance of promoting research and innovation.

The Committee were assured that significant progress has been made to the R&I Strategy 2025-2030 since the previous strategy. Examples of progress included increases in the number of clinical research facilities and the number of staff with dedicated clinical leadership time for research. The Health Board has established research programmes in both clinical and non-clinical areas, however, a continued focus is required, with key areas being access and impact; culture and environment (including promoting research); and partnerships. The Committee recommended the Strategy to the Board for approval in March 2025.

**Strategic People Planning and Education Group (SPPEG)** - The Committee took assurance from the SPPEG reports on its activities and decisions, and the approval of its Terms of Reference. The Committee approved the HEIW Glangwili Hospital Trauma and Orthopaedics Visit Report to be monitored by QSEC. The Interprofessional Education Plan highlighted the impact on quality of education, future workforce experiences and development of educators, and that the action plan would be monitored via the SPPEG.

**Black, Asian and Minority Ethnic (BAME) Advisory Group/ Anti Racist Wales Implementation Group** - Assurance was taken from the BAME Advisory Group Annual Report and the intention to review its Terms of Reference and its membership to other groups in the Health Board. This group was disestablished in 2024/25 and a new group, the Anti Racist Wales Implementation Group was established, which provided the Health Board's progress on the Anti-Racist Wales Action Plan, as well as the local action plan for the period April 2024 – September 2024.

## Items approved by the Committee during the year.

### Policies:

- Policies for publication:
  - 511: Carers Policy
  - 085: Leave and Pay for New and Existing Parents.
  - 153: Equality Impact Assessment Policy and Procedure
  - 464: Industrial Injury Claim Procedure
  - 1085: Leave and Pay for New and Existing Parents Policy
  - 995: All Wales Respect and Resolution Policy
  - 1262: All-Wales Pensions Flexibilities Policy
  - 1270: NHS Wales Pregnancy Loss Support Policy
- Deferral of the review of the Medication Errors Policy until 31 March 2025.
- Extensions to the following policies:
  - 112: Early Careers: Preceptorship and Beyond Policy
  - 121: Relocation Expenses until 30 June 2025
  - 133: Equality, Diversity & Inclusion Policy until 31 May 2025
  - 558: Medication Errors until 31 May 2025
- Removal of the following policies:
  - 389: Expenses Policy
  - 124: Retirement Policy
- Adoption of the All-Wales Job Evaluation Policy and Procedure.
- To remove policy review dates for All Wales policies, noting their extant position (subject to discussion with the Director of Corporate Governance).
- To adopt the All-Wales Specialist and Associate Specialist (SAS) Charter and receive a copy of the annual report for the Medical and Dental Business Group (MDBG) for information and/or assurance in October 2025.

### Advisory Appointments Committee (AAC)

- The number of appointments which were made at Advisory Appointment Committees.

### Terms of Reference

- The PODCC TOR for onward ratification by the Board.
- The BAME Advisory Group ToR, with the caveat that the proposed new name Hywel Dda Anti-Racist Wales Implementation Group would be reconsidered, to provide more of a focus of Hywel Dda University Health Board driven work rather than Wales-wide, and to also consider whether there was enough emphasis on all minority groups.

## 6. Committee Effectiveness - Feedback from self-assessment process

As stipulated within Standard Orders, the Board introduced a process of regular and rigorous self-assessment and evaluation of the performance of the People, Organisational Development and Culture Committee.

- For the People, Organisational Development and Culture Committee this involved the completion of a short digital form which requested feedback on the following areas:
  - Governance and administration
  - Committee's inputs
  - Conduct of Committee meetings
  - Interface with other Committees, including the Board
  - Committee's impact
  - Individual role on Committee

The results from which were fed into an action plan, combining information and Auditor/Regulator feedback.

The process was undertaken during the year and reported to the Committee on 16 December 2024. [Link to Self Assessment Outcome Report.](#)

The Committee will receive an update on progress at the mid-year point.

## **7. Conclusion**

The Committee is satisfied that it continues to operate effectively and in line with the Terms of Reference. Issues have been escalated to Board as appropriate, and the Committee uses feedback from the self-assessment process to evolve and continually improve.

It has been agreed going forward in 2025-26, the People, Organisational Development and Culture Committee would meet on a quarterly as opposed to bi-monthly basis. Meetings are scheduled to take place in May 2025, August 2025, November 2025 and February 2026.