MINUTES of the Open meeting of the Board of Directors of Canadian Blood Services held at The Westin Nova Scotian, 1181 Hollis Street, Halifax, Nova Scotia on December 7, 2011.

PRESENT: Leah Hollins
Graham Sher
Tom Warner
Rabbi Dr. Reuven Bulka
Chris Carruthers
Wayne Gladstone
Gary Glavin
Joy Illington
Frank Jones
Denis Losier
Henry Pankratz
Shirley Raab
Marilyn Robinson
Bob Teskey

REGRETS: Dana Devine

Being a quorum of the directors of the Corporation, and invited were:

Jean-Paul Bédard
Christian Choquet
Watson Gale
Ian Mumford
Andrew Pateman
Pauline Port
Melanie Griffin
Sheila McIntee – Minute Taker

Leah Hollins took the Chair and Watson Gale acted as Secretary to the meeting.

Leah Hollins introduced herself, acknowledged that this meeting was open to the public, and welcomed everyone to the 104th meeting of the Board of Directors of Canadian Blood Services. She noted that while Graham Sher will go into detail when he delivers the CEO Report, she wanted to note certain highlights from the past year.
She reminded everyone it has been more than 13 years since Canadian Blood Services took over stewardship of the blood program in Canada and noted that CBS is regarded internationally as one of the safest blood systems in the world. Canadians see CBS as a trusted partner in the health care system. This inspires and drives everyone at CBS, and it serves as a constant reminder of the responsibility CBS carries.

CBS appreciates the commitment of its donors, and relies on their ongoing generosity. In fact, one of CBS’ biggest challenges is keeping the donor-base engaged and growing. This year CBS needs an additional 100,000 donors, as well as another 30,000 registrants to the OneMatch stem cell registry.

CBS’ new three-year creative strategy entitled ‘Rally Together to Save Lives’ encourages blood donation as a group activity and will serve to kick start a new era of social responsibility amongst Canadians. Coupled with CBS’ expanded social media tactics; ethnically diverse outreach; and new web self-serve options for donor appointment scheduling, CBS is confident of sustainable growth in the donor base for the benefit of all patients.

Leah Hollins noted that CBS has worked hard to build an organization that is seen as a trusted partner in health care. This trust is reflected in the agreement by the provincial and territorial ministries of health to co-fund the creation of a national public umbilical cord blood bank under the leadership of Canadian Blood Services.

Trust in CBS was also evident when it was asked to lead the development of recommendations designed to improve the country’s organ and tissue donation and transplantation performance. After nearly three years of extensive consultation with experts, patient groups, international programs and the Canadian public, CBS presented its strategic plan “Call to Action” to the Federal, Provincial and Territorial Ministers of Health in April. Work continues with governments as they analyse the impact of the recommendations and propose next steps.

In addition, the Living Donor Paired Exchange registry was created to facilitate transplants between kidney patients and a willing, but incompatible living donor and other pairs in the same situation. The Registry recently achieved a landmark 100th transplant - less than a year after becoming Canada’s first truly national organ donation registry. This is compelling proof of the benefits that can be realized by strengthening inter-provincial collaboration.

CBS has also formalized key partnerships with its fractionators and the World Federation of Hemophilia in an important humanitarian project. The project will lead to the donation of currently unused cryo paste for Factor VIII to developing countries. One of several production trials has been completed and it is hoped the first shipment of cryo paste will be delivered in 2012.
Leah Hollins advised that this Board has recently passed a resolution to reduce the current indefinite deferral for men who have sex with men, to a shorter deferral period of between 5 and 10 years. Planning is underway to consult with interested stakeholders to help inform that decision.

Leah Hollins introduced the Board of Directors, Executive Management Team, and members of the CBS staff present.

AGENDA

The proposed agenda for the meeting was reviewed and ON MOTION duly made, seconded and unanimously carried, IT WAS RESOLVED THAT the agenda for December 7, 2011 be approved as presented.

MINUTES OF PREVIOUS MEETING

Leah Hollins referred to the minutes of the meeting held on September 21 & 22, 2011. After review and discussion, ON MOTION duly made, seconded and unanimously carried, IT WAS RESOLVED THAT the minutes of the meeting of the Board of Directors held on September 21 & 22, 2011 be approved as presented.

MATTERS ARISING FROM PREVIOUS MINUTES

There were no matters arising from the previous minutes that were not already covered on the agenda.

REPORT OF THE CHAIR

Leah Hollins advised that she, Graham Sher and some other members of the Executive Management Team met with the Ministers of Health on November 24th in Halifax for the CBS Annual General Meeting. CBS’ Annual Report was presented to the Ministers of Health, which was accepted. Graham Sher also had the opportunity to address key issues such as cord blood, OTDT and the ongoing efficiencies journey.

Leah noted that, as part of her remarks, she recommended that an operational review of CBS would be appropriate and welcomed. This would be appropriate for good governance and to provide assurance of the operational performance of the organization.

REPORT OF THE CEO

Graham Sher reviewed the performance highlights of the four lines of business for Q2 2011-2012 with particular attention to the major accomplishments and emerging issues.

In regard to the transfusable products line of business, operational performance has been good with some concerns around collections consistency and the impact on hospital fill rates. Despite growth in the donor base, attendance was insufficient to meet the
collections target in Q2, although hospital demand is being met. Plans are already in place to close this gap, and early Q2 results are confirming substantial performance improvement.

Graham reviewed the current patterns of demand, collections, supply and the state of the inventory for all key fresh products. CBS is still meeting the needs of its customers with an order fill rate of 98% (on target). Red cell demand increased by 2.3% compared to last year and marks a sustained six month period of growth. Platelets demand rose by 8% from last year, and is being monitored closely. Demand for plasma continues to show a small decline and the order fill rate was 99.5%.

Graham described that one of the longer-term initiatives is the strategy to grow the donor base. For the second straight quarter, CBS exceeded recruitment targets. Several activities contributed to the donor base growth including the launch of the new creative platform “Rally Together to Save Lives” and strong Partners for Life performance. Another new program put in place is the ability for donors to now use online technology and self-book their appointments at blood.ca.

One notable achievement mentioned by Graham is the cost savings associated with the investment in large volume platelets, which decreases the production costs and optimizes donors’ time.

Work continues on process improvements across the organization. The National Facilities Redevelopment Program is driving significant standardization efforts. The Program’s activities are on track for completion by early summer of 2012 for Ontario and spring of 2013 for Dartmouth. A further update will be provided on this issue later on in the board meeting at Tab 07.

Others matters include moving forward with the Pathogen Reduction clinical trial proposal and the receipt of approval from Health Canada to use other language interpreters at CBS clinics, including initially Punjabi in Toronto and Cantonese in Vancouver.

Graham Sher then discussed Plasma Protein Products (PPP) with the Board. In Q2, performance of the PPP business line was close to targets, with no major concerns. Product demand has tracked very close to budget, with slight increases in Ig issues, a slight reduction in rFVIII issues, and greatly reduced demand for rFVIIa (Niastase). The Ig product group and the three recombinant clotting factors account for 82% of the budget.

One notable achievement was approval in September by the P/Ts for the distribution of solvent detergent treated plasma (SD Plasma). This will be available in the new fiscal year. SD Plasma has been approved for specific patient groups as recommended by CADTH.
Regarding the stem cell line of business, Graham described how significant progress has been achieved with respect to the Cord Blood Bank Program, including the hiring of key staff, cord blood bank site visits, facilities upgrades at Concourse Gate, and very favourable indicators with respect to ongoing fundraising efforts. A new typing strategy which will facilitate better matching will be in place by early 2012. Demand for stem cells is growing, as demonstrated by a 20% increase in the number of active patients over the last 12 months.

In the Diagnostic Services Business Line, the first phase of a Patient Services Laboratory Information System (Traceline) was successfully implemented. Phase II is progressing as planned in Winnipeg.

Graham Sher discussed the challenges being faced under each of the business lines.

A CBS stakeholder satisfaction survey completed in Q2 showed an overall index of 92.3%, up from last’s year rating of 88%. Again, trust in CBS remains steady with 97% of all standing committee members providing a rating of 7 or higher out of 10.

As noted earlier by the Chair, at the September, 2011 Board of Directors meeting, the Board approved the plans to change the current MSM policy of permanent deferral to a timed deferral between 5 and 10 years. CBS will consult with stakeholders groups prior to submission of the deferral change proposal to Health Canada. The aim is to have it to Health Canada early in the next fiscal year. Graham Sher noted that this is an incremental step, with efforts continuing in order to refine and address ongoing concerns.

CBS continues to work with the Ministries of Health to assist them in understanding and analyzing the impacts of the recommendations in the Call To Action document on organs and tissues.

With respect to fundraising and development, revenue from financial donors has steadily increased. Revenue for 2011-12 is on track to exceed the $700,000 target. Further, CBS has launched a capital campaign to raise $12.5 Million to help create the national Public Cord Blood Bank and an External Advisory Committee has been created to assist with this effort.

For the year to date, CBS is well within the budgeted cost per unit for the quarter ($350). The cost per unit for the fiscal year is budgeted to be $389 for the year.

Graham Sher briefly summarized the financial forecast overview. He noted the forecasted excess of revenues over expenses remains on target to the budgeted levels and that the major initiatives with respect to productivity and efficiencies continue.

There was some discussion about how CBS conducts benchmarking with respect to the Cost Per Unit measurement. Graham Sher advised that different sub-indicators are looked at, as well as extensive cross-market benchmarking.
The Board thanked Graham Sher for the detailed review.

REPORT OF THE GENERAL COUNSEL

Watson Gale advised that there were several items that were already dealt with in other parts of the agenda. Other than these, he noted there was nothing material to report with respect to claims, litigation, other investigations and privacy.

OTDT UPDATE

Graham Sher drew the Board’s attention to the briefing note in the Board binder and noted that, due to the complexity of the OTDT report entitled Call to Action, the thoroughness of analysis needed, and several elections, Deputy Ministers have notified Graham Sher that they will take additional time to complete impact assessments and come to a decision on the Call to Action document in early 2012. Significant effort is focused on answering the questions and concerns arising from the Provinces, some requiring more effort and focus than others.

Graham Sher noted as of October 24, 2011, 101 living donor kidney transplants had been made possible through the Living Donor Paired Exchange (LDPE) registry. Estimates suggest the net cost benefit of a transplant over dialysis is approximately $50,000 per patient per year. This LDPE program has, based on this, delivered savings in the order of $5 Million/year to the national healthcare system.

CBS continues to work towards the implementation of the National Organ Waitlist (“NOW”). There has been considerable progress recently on the privacy impact assessment, data sharing agreements and exchanges with provincial partners.

NATIONAL FACILITIES RE-DEVELOPMENT PROGRAM

Ian Mumford noted that the Ontario projects remain on schedule and within budget. In Brampton, post occupancy deficiencies are being addressed. Commissioning activities are nearing completion and validation efforts are well underway. A submission will be prepared to Health Canada for its review, with an inspection expected in January. Thereafter, CBS expects to receive its licence in advance of moving the Product and Hospital Services function from Toronto in mid February 2012.

Lease agreement negotiations remain ongoing for a new collection site in London and the design of the new donor testing space at 67 College Street is underway.

Construction of the Dartmouth production site remains on schedule for completion April 30, 2012 and remains within budget.

There was a significant discussion with the Board about staffing matters in the context of the National Facilities Redevelopment Plan.
The Board thanked Mr. Mumford for his excellent work his team has done and for staying within budget.

PRESENTATIONS FROM THE PUBLIC

**Rebecca Rose** from the Canadian Federation of Students, Nova Scotia Chapter attended the open Board meeting to make a presentation on the MSM policy. The national and provincial students union represent 500,000 students across the country. She provided some information on the history of the MSM policy and asked the Board to relook at the policy.

**Lucas Thorne-Humphrey**, a Clinical Pharmacist in Cardiology at QEH Hospital and Health Chair of the Nova Scotia Rainbow Action Project (NSRAP), a provincial gay advocacy group, made a presentation to the CBS Board about the MSM deferral policy and its impact on Nova Scotians.

Leah Hollins thanked both individuals for attending the open Board meeting. Following lengthy discussions questions, Graham Sher assured them that CBS and this Board have considered, and will continue to consider the MSM issue in the future.

The Board thanked both Ms. Ross and Mr. Thorne-Humphrey for their presentations and noted that this issue will be kept on CBS’ agenda.

ENTERPRISE RISK MANAGEMENT UPDATE

The Board earlier recommended a concise, high-level policy be created, outlining the risk philosophy and principles which are to govern Enterprise Risk Management in CBS. The policy was discussed and various amendments made. It then went to the National Liaison Committee for stakeholder input. Certain issues were raised by the NLC, such as the inclusion of specific language related to patient risk.

After further discussion by the Board, it was agreed that the policy would be passed in its current form and further discussion would be held on the issue of specific stakeholder risks.

ON MOTION duly made and seconded, IT WAS RESOLVED THAT the Enterprise Risk Management Policy 2.0 be approved in its current form.

FINANCE & AUDIT COMMITTEE

Wayne Gladstone, Chair of the Finance and Audit Committee, provided an update to Board from the Finance and Audit Committee meeting held on December 7, 2011.

Pauline Port reviewed the financial results to September 30, 2011 and the Board spent considerable time going through them. She advised that revenue was in excess of expenses by $28.3 Million as at the end of Q2.
Wayne Gladstone advised that the Committee had a discussion regarding the budget process for next year, as well a discussion on the implementation of a financial literacy program for the Board.

The CBS Internal Auditor updated the Committee on his activities and changes to the audit plan. The Committee was in agreement with the changes noted and the overall plan.

There was discussion on the new not-for-profit accounting statements and the impact on CBS.

The Chair thanked Wayne Gladstone for his report.

TALENT MANAGEMENT COMMITTEE

Frank Jones, Chair of the Talent Management Committee, provided highlights from the meeting held on December 7, 2011.

The Committee discussed various changes to pension plans. He noted the Committee’s recommendation to the Board to pass the following resolution:

ON MOTION duly made, seconded and unanimously carried, IT WAS RESOLVED THAT the following resolution, agreeing to certain language changes in the Defined Contribution Pension Plan being to conform with legislative changes in several provinces related to vesting provisions, be approved.

[Note: This resolution contains extensive detailed language as presented to the Committee and the Board not produced here]

Frank Jones spoke to the Board about a second resolution recommending the appointment of Pauline Port as a Management Trustee and Co-Chair of the Defined Benefit Pension Plan Board of Trustees.

ON MOTION duly made, seconded and unanimously carried, IT WAS RESOLVED THAT Pauline Port, the Vice-President Corporate Services and CFO of CBS, be appointed as a Management Trustee of the Defined Benefit Pension Plan and to act as its Co-Chair, such being confirmed as being effective as of September 27, 2011.

The Committee had an extensive discussion with respect to the timing and approach to CEO and EMT compensation. The Board had various comments on this issue. It was agreed this issue would be addressed by the Committee and the Board. It was also agreed that the CEO, Vice-President, Talent Management and the Chair of the Talent Management Committee will meet to review the precise timing and approach to these matters in order to prepare for future Board meetings. It was acknowledged that the Committee’s role regarding EMT compensation is expanding.
The Committee received various updates on the following items:

- A review of the status of the various labour negotiation presentations under way.
- A discussion of the preliminary results of the Employee Engagement Survey. It was noted that there are two high-level takeaways: first, the level of commitment to the organization and the work they do was very high. Second, there were some weaknesses detected in how employees viewed the quality of their management. Until the detailed results are reviewed, we will not be able to truly know the meaning of these results. Frank Jones noted the intent is to have a more detailed review of the results at the next Talent Management Committee meeting.
- The Vice-President, Talent Management, Andrew Pateman, provided the key dates for when he and his team intend to complete a first early pass at initiating Strategic Workforce Planning into CBS. The first round of this will be completed by March 31, 2012. Andrew also provided the Committee with a background document on Strategic Workforce Planning.

The Committee met in Camera to discuss the recently completed CEO 360.

The Chair thanked Frank Jones for his report.

**SAFETY SCIENCE AND ETHICS COMMITTEE (“SSEC”)**

Chris Carruthers, Chair of the SSEC, provided highlights from the meeting held on December 7, 2011.

CBS is proposing to change the Ken Fyke Award from a one year to a two year award in the amount of $50,000 per year with the goal of making the award more attractive and to increase the applicant pool. Discussion on this was postponed until the March 2012 Committee meeting as work on the scope of eligibility for the award is still being finalized. It was agreed that Ken Fyke would be provided an update with respect to the award.

An update with respect to the threats to the blood system was provided by Dr. Fearon. While there are a number of interesting issues, it was noted that there is no new or material known threat that is not currently being addressed.

Regarding Chagas disease, the Committee learned that CBS has now tested over 21,000 at-risk donors (donor who answer yes to one of the risk questions) and the number of confirmed positive remains at 12 as was reported to the Board in Q1. Phase 1 of the study completed in September 2011; Phase II is now underway with the testing of 30,000 Manitoba donors that report no risk. Over 5,000 donors have been tested to date and there are yet no confirmed positives. CBS will continue with selective testing strategy.

With respect to XMRV, the scientific community has come to a consensus that XMRV is not the cause of Chronic Fatigue Syndrome (CFS). As mentioned in Q1, CBS will
continue to defer donors who report a diagnosis of CFS because of a lack of understanding as to the cause of CFS.

The Committee discussed babesiosis and the discussions ongoing in the US on a testing strategy. CBS is involved in the planning of a seroprevalence study with Hema-Quebec (H-Q) and the Public Health Agency of Canada of blood donors who live in areas where ticks are found (tentative start date is summer/fall of 2012). H-Q is also investigating the possibility of testing donors who travel to the North Eastern U.S.

In Canada, cases of Dengue are associated with travellers to high risk Dengue countries. Most donors traveling to these countries would also be deferred for malaria risk. CBS will continue to monitor the situation.

A review of the 2011 seasonal report for West Nile Virus (WNV) indicated that pool testing has confirmed 6 positive cases so far (5 in Ontario and 1 from a donor who lives in Quebec but donates in Ontario). There were 4 cases detected by H-Q. In comparison, there were no cases in 2009 and 2010. The testing strategy proved effective this year again.

The Committee reviewed the corporate safety indicators for Q2, all of which were on target. However, two incidents resulted in a significant increase in the total number of recalled blood components. The Committee spent time reviewing these incidents and were satisfied with management responses. All sites inspected by Health Canada (8) and all corporate processes audited by the internal quality group were deemed compliant and in a state-of-control.

There was an increase in the number of minor observations for facilities inspected by Health Canada in the Ontario region. This is believed to be due to a change in inspectors’ practice rather than to a degradation of performance by CBS.

The SSEC reviewed supply data from all business lines. The written report identified some areas that remain challenging (mainly donor attendance and 0 neg red blood cells). Since the written report was submitted to the Committee, there has been a 4.5% increase in collections and an increase in red cell inventory. The level of preparedness is very strong.

There was a report from Judie Leach Bennett about the CBS Research Ethics Board (REB) meeting held on November 8, 2011. Three submissions were reviewed and approved with recommendations for improvement. The composition of the REB will be brought to a future SSEC meeting for discussion.

The Committee discussed the AABB Annual Meeting. The meeting had good representation from CBS including the official involvement from the CEO as an AABB Board member and Dr. Devine as the chair for the Abstract selection unit. There were five oral presentations and 13 poster presentations by CBS staff. CBS staff also
participated in the organization of 9 Educational Programs sessions and two workshops or learning sessions.

Regarding SSEC Committee Education, there was a request to have 10-15 minute “primers” prior to specific discussions in Committees so as to bring context to issues to be discussed and decisions to be made. There was a suggestion to have a full board session about “Where CBS has come from (from a scientific perspective)”.  

The Chair thanked Chris Carruthers for his report.

REPORT OF THE NATIONAL LIAISON COMMITTEE (“NLC”)

Bob Teskey and Rabbi Dr. Reuven Bulka are the Co-Chairs of the NLC.

Bob Teskey advised there had not been an NLC meeting since September (which was held in conjunction with the September Board meeting). However, a number of issues have arisen since then and Mr. Teskey provided an update to the Board on said issues.

There has been some comment and consideration from the Canadian Hemophilia Society (CHS) with respect to the MSM policy issue. They perceive that CBS had made a decision without stakeholder feedback. Mr. Teskey noted this was not the case. The CHS, through one of their committees, has addressed the issue and supports the reduction of the deferral period, but to a fixed period of 10 years.

The NLC spent a significant amount of time talking about plasma protein products and the ongoing and upcoming procurement of manufacturing products.

Bob Teskey advised that he attended an annual meeting of the Aplastic Anemia and Myelodysplasia Association of Canada, a very engaged group of people who rely heavily on CBS’ stem cells and OneMatch systems.

The Chair thanked Bob Teskey and Rabbi Dr. Reuven Bulka for their report.

REGIONAL REPRESENTATIVE COMMITTEE

Marilyn Robinson, Chair of the Regional Representative Committee, provided highlights from the meeting held on December 7, 2011.

The Board reception held on December 6, 2011 was discussed and it was noted that it was a success.

The Committee reviewed the debrief of the Provincial and Territorial elections.

The Terms of Reference were circulated. The Committee recommends to the Board that the Terms of Reference of the Regional Representative Committee be approved. Marilyn Robinson noted the changes were very minor.
ON MOTION, duly made, seconded and unanimously carried, IT WAS RESOLVED THAT the Terms of Reference for the Regional Representative Committee be passed.

The Board questioned if there is a role for them to make contact with the Ministers of Health in their respective provinces and territories with respect to OTDT. Jean-Paul Bédard advised that it is in CBS’ plan to leverage the skills and experience of Board members, as appropriate.

The Chair thanked Marilyn Robinson for her report.

REPORT OF THE GOVERNANCE COMMITTEE

Joy Illington, Chair of the Governance Committee, provided highlights from the meeting held on December 7, 2011.

Four matters were dealt with at the meeting.

The full Board retains responsibility for risk oversight. The VP responsible for risk oversight spoke to the overall policy for the Board and provided an update on ERM.

Internal Audit’s review of the program which included an interview with each Board member regarding the understanding of the ERM program is expected in the last quarter of 2011-2012.

The education session on the CBS Captive Insurance Program was held. It was very well presented and more education sessions will come to the Board.

The transition in 2011 from meeting binders to an electronic board portal is proceeding. Chris Carruthers has agreed to sit on the selection committee for the Request for Proposal (RFP) for the Board portal service provider. Delivery and implementation should be resolved this coming Spring.

Planning for April 2012 Retreat is underway with the focus being the current and emerging health fiscal landscape and its impact on the future of CBS.

The Chair thanked Joy Illington for her report.

CBS CAPTIVE INSURANCE PROGRAM

Watson Gale provided a summary with respect to the Captive Insurance Program being managed by Canadian Blood Services. A detailed briefing note was provided in the Board materials. He discussed the basis for establishment of the program, operational aspects, governance and a variety of issues both past and present that face the organization and the program itself.
QUARTERLY REPORTS OF CBS INSURANCE COMPANY LIMITED AND CANADIAN BLOOD SERVICES CAPTIVE INSURANCE COMPANY LIMITED

Wayne Gladstone presented the quarterly reports for CBS Insurance Company Limited (“CBSI”) and Canadian Blood Services Captive Insurance Company Limited (“CBSE”) for the quarter ending September 30, 2011. The following key points were addressed:

- As of September 30, 2011, the market value of the investment portfolio for CBSI was $335 Million and as of December 5th the assets were $341 Million. Statutory requirements of the Bermuda Monetary Authority are in good standing.

- There are no new claims to report.

- CBSI will be directly involved in the ongoing discussions of the overall net asset program being developed at CBS.

- CBSI is undertaking a “governance review” in February, 2012 to look at roles and responsibilities, mandate and governance matters relating to CBSI.

- Efforts are underway to identify possible efficiencies with respect to operations of the captive in Bermuda.

- There will be a review all service providers built into the CBSI Board work plan and confirmation of the various roles and responsibilities.

- CBSE is in good standing with no adverse or negative issues being faced at this time.

PRESENTATIONS FROM THE PUBLIC

Dr. Ian Alwayn – Surgical Lead, Multi-Organ Transplant Program, QEII Hospital, Halifax, Nova Scotia, made a presentation to the Board of Directors on the Living Donor Paired Exchange Registry (LDPE).

Dr. Alwayn explained that since inception, the LDPE has allowed for over 100 patients in Canada to get donations. Ten match cycles have been completed since inception in 2009. He described the matching process in great detail and discussed the combinations of transplants and broke it down by province. He reiterated the need to have sufficient funding in place to support this registry and the transplant program. Dr. Alwayn spoke on several other aspects of organ donation and transplantation, and he answered numerous questions from the Board.
The Board thanked Dr. Alwayn for attending and making his presentation. The Board noted they were delighted that he assisted CBS with the *Call to Action*.

There being no further business, the meeting was terminated.

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Chair                                  Secretary