

**BRITISH ASSOCIATION OF PROSTHETISTS & ORTHOTISTS**

**VIRTUAL ANNUAL GENERAL MEETING**

**02 July 2020**

**MINUTES**

**Executive Committee members present:**

Lynne Rowley (Chair) (LR)

Ian Adam (IA) (Treasurer)

Kate Spiller (KS)

Conor Brown (CB) (Secretary)

Miriam Golding Day (MGD)

Paul Charlton (PC)

Lauren Cox (LC)

Kate Chauhan (KC)

Peter Iliff (PI)

**Apologies**

LR reported apologies have been received from Lauren Jennings, Gillian Waddle, James Garner & Alison Shearing.

**Lynne Rowley, Chair**

LR Advised that during the course of the meeting, motions may be proposed and therefore members may need to vote. Those who are entitled to vote using the poll system are:

* Full Members Red voting cards
* Technicians Blue voting cards
* Associate Members Blue voting cards

For all other votes a simple majority is required to vote on other business.

**Minutes of Previous Meeting dated 15 March 2019**

LR enquired if there were any amendments to be noted – none.

LR requested a proposer and seconder from the audience that the Minutes provide a true and accurate record of the 2019 AGM:

* Proposer Simon Dickinson
* Seconder David Morrison

**Matters Arising**

LR reported there were no matters arising that would not be covered elsewhere within the agenda.

Prior to progressing with AGM, we share the sad news that on 29th June 2020, Elaine Figgins lost her fight against cancer. Elaine graduated with first class honours from the University of Strathclyde and went on to practice paediatrics and then lecture. She became Director for the National Centre and has mentored & supported many. Elaine was an active member throughout her career until she moved to become Associate Director of NHS Scotland in 2016. Our thoughts are with her family at this time.

**Annual Report**

The EC assumes that all members present are familiar with the contents of the Annual Report for 2019, which was circulated earlier this year. LR requested a proposer and seconder from the EC that the Annual Report provides a true and accurate record of Association work and activities for 2019

* Proposer Ian Adam
* Seconder Miriam Golding Day

**Chair’s Report – Lynne Rowley**

Apologies to our members for the later AGM. I would normally report on work undertaken the previous calendar year however, we are living in exceptional times. We are now 6 months into 2020 & your Executive wants to update you on what our Association has been doing during the pandemic.

January 2020 saw pictures emerging from China of a new virus that was spreading throughout the globe. Our conference was booked and speakers from around the world planned to fly in to educate our profession. Business as usual came to a halt with the outbreak of the Covid-19 virus pandemic in the UK. March 2020 lockdown commenced with all non-essential services closing & people advised to stay home. Clinicians across the UK had to change to adapt with most prosthetic centres closing, many staff furloughed and patients only accessing services in an emergency. Student practice placements were delayed, cut short or cancelled. Some clinics did remain open to prevent admission & facilitate discharge & the NHS went into pandemic mode.

Our conference was postponed until October 2020 then that also was cancelled and we now hope to re-arrange for 2021. With no gatherings allowed a face-to-face AGM wasn’t possible so it too was delayed. Like the rest of the economy there are challenges to be faced by service providers as we move to the new normal. So, what is BAPO doing to support our members? I have weekly meetings with the Government arms & Nicola Munro has represented us at AHPFS, with weekly briefings with the Chief Allied Health Professions Officer & Scottish Government. I have attended HEE weekly briefings with development on student placements, indemnity cover & contracts for Allied Health Professions. In response to the crisis with P&O practice placements, we have created the practice education leadership forum with representatives from Salford, Strathclyde, Keele & Derby Universities. We have created a pandemic group in collaboration with ISPO, BHTA, NOMaG & SCOL to discuss issues affecting the profession, share resources & develop a national approach to address these problems. We linked with HEE & our under-graduate programme leads to advise on student deployment & what programmes would be suitable during the pandemic to support NHS staff, this fed to Chief Allied Health Profession Officer letters to the students & HCPC temporary register. We wrote an advice document to inform HEE, Government & commissioners to highlight our competencies as clinicians & where we could be deployed to make best use of our skills. We were in weekly contact with Public Health England & Dept of Health acting as a conduit to both collect information for Government & disseminate information to our members. We created COVID-19 update bulletins for our membership & a specific BAPO COVID-19 news webpage which contains up to date information from Dept of Health and links to education resources. We surveyed our professions on the impact they were experiencing, we looked at clinical practice, challenged the new normality and considered how to practice safely with less direct interaction with patients. Simon Dickinson led a group of innovative clinicians from around the UK to develop a virtual orthotic assessment pathway creating a valuable resource for use by our profession in these times.

Last year the Executive Committee reviewed the issue of sustainability of leadership of the organization & we realised that with less time available in the working day to commit to attend meetings & represent the profession at essential forums, as well as working as a Prosthetist/Orthotist it wasn’t feasible. As your Chair for the past 5 years, I have condensed my hours, working longer days and using my annual leave to enable BAPO duties and to represent the Association. However, it’s unrealistic to expect another individual to commit. In response the Executive Committee identified funding which would be put in place to support the Chair role. 1 day per week will be funded for the incoming Chair, enabling protected time during the working week to have a set workplan & be our public face when required. Despite this we had no candidates from existing committees to take on role. We had members retiring and no nominations for replacement & with no Vice in place to take over the current Chair position, the Executive Committee had to be creative. External peer support was sourced via the BAPO Advisory Group (BAG) which includes past committee Chairs. The leadership & membership issues were addressed, and solutions proposed. It concluded that we could not expect someone without knowledge of running the Association, to step into the chairs role and it would be easier for someone with prior experience to be seconded to the committee, with support from the current team until the 2021 AGM before taking over the Chair position. The Executive Committee have agreed to a 12-month secondment & will review the project to ensure it’s cost effective and delivers what the membership & association require in terms of leadership & representation. The secondment position will be responsible for workstreams and membership retention. Following the BAG meeting a volunteer stepped forward subject to agreement from his employer. I am pleased to introduce our new Vice Chair Peter Iliff. His one day per week secondment started June 2020 for a 12-month trial. Peter has previously served as BAPO Chair from 1996 – 1998 and was brought back onto the Executive Committee in March 2020. To ensure continuity and smooth transmission the Executive Committee requested I remain in post until the Vice takes over at the 2021 AGM. All current Executive Committee members due to step down in 2020 are prepared to remain until the 2021 AGM to support this. I have agreed in principal (subject to no challenges from membership at this AGM). It’s not a request for a constitutional change, but an emergency measure to resolve crisis for association.

I will now present my report for 2019. Your professional body, BAPO, has continued to build on the work undertaken from last year and has progressed several significant projects.

Key areas of work on behalf of members

Our representation at national level continues to increase yearly. This is a condensed list of the committees our members sit on to represent Prosthetists & Orthotists across the UK. We meet with AHP federations in England, Scotland & Northern Ireland focusing on issues that matter to us all & develop plans to increase our voice & impact for our members. The forum serves as a place where Government can interact with every Allied Health professional body around one table. We have had meetings with ministers, strategists & other chief allied professionals and their teams.

My thanks to Nicola Munro & Jonathan Bull for continuing to represent BAPO at the Scottish & Northern Ireland meetings, to Caroline Royce who serves as BAPO representative with Public Health England - PHE Strategy Board. Jessica Hargreaves for her work with CAHPRA, Richard Hirons for representing us with the prosthetics commissioning review and Ian Adam for attending the inaugural meeting while he was at ISPO, Japan 2019.

With the focus on research our Research Committee, led by Miriam Golding-Day acts as a resource to support P&O professions, active in research and audit as well as researchers interested in investigating our clinical practice. They mentor project leads and advise on ethics & research process providing support to membership who wish to undertake research.

Our Professional Affairs Committee led by Paul Charlton continues to provide response to N.I.C.E on proposed updates and are currently working to provide the BAPO clinical notes audit tool to reflect changes in technology. The commissioning document was finalised for consultation and as a professional body we offer CPD support throughout the year. 2019 saw a combination of a 3-year plan to address identified workforce challenges. BAPO have investigated workplace issues and collaborated with external agencies to alter the picture of our profession. To recap, we have a national shortage of clinicians. The HCPC register increased yearly, however, not all clinicians work in clinical practice as our skills lend themselves to branch out to education, sales, management, research etc. Less students studying for a degree in P&O receive undergraduate courses as a vocational route to practice & use qualifications in different ways & join the mobile graduate workforce in the UK leaving less Clinicians in place. As a small but essential profession, our career profile was poor. We have 2 universities offering P&O education with a training module that originated in the 1980s. Research illustrates that we require all current graduates to enter clinical practice just to keep pace with those retiring. Additional routes into our profession are needed to increase the size of the workforce. Our practice placements are predominately 1:1 & are limited in number. The number of practice placements is a direct barrier to increase the capacity of P&O education in UK. Our aim is to Increase profile & capacity and to offer alternative education leading to HCPC registration. Working with HEE during the past 3 years has been supportive & we have developed tools in collaboration. We now have 2 WOW promotional videos, 1 focusing on our profession with a 30 second snapshot and the other following the journey of an amputee within prosthetic rehab.

The AHP universe of opportunities is an e-learning for health hosted platform which explores the diversity our career path can take and is a resource aimed at qualified P&O & enables them to explore. The virtual 360 experience was filmed to give prospective students the feeling of being in a real clinical environment & HEE have facilitated workshops during 2019 bringing Allied Health professional bodies together to collaborate on issues such as recruitment & practice placement. Alongside our SIHED project continues. The Office for Students project is now in its final funding year & our outreach officer continues to work virtually to promote our careers. Our other project post has been extended until 2020 & Dr Beverley Durrant is creating an online resource working in partnership with University of Chester. This online resource is developed to have a central source for practice placement assessments. It will be a directory of information & an online platform for students, placement educators & Universities to support students regardless of the programme they are on. We have now increased capacity of both our existing programmes with Salford & Strathclyde increasing catchment to 45. We have 2 new courses in P&O planned to start 2021, the exciting development of the apprenticeship programme at Derby University & a compressed 2 years masters entry course at Keele University. This will attract a different type of applicant to our profession. Practice placements remain a challenge, but we have created the practice placement leadership forum with representatives from each of the four HEI’s now involved in our education both established?? The forum has been created to encourage & support integration of the electronic system PAR in the P&O community. Going forward we have secured funding to develop & evaluate new practice placement models for our profession & will be working in partnership with employers, NHS & educators to help create the required competencies in the most effective way for each mode of study.

BAPO plan to form a working group to proceed with this & invite anyone interested to please get in touch with Secretariat following this meeting.

BAPO continues to fund the upkeep of our superb evidence resource DEBOP & our thanks to Laura Barr who leads the team reviewing new evidence & ensuring it’s up to date. I hope you can see that BAPO is continuing to work strategically with all our stakeholders to meet the current & future needs of our profession.

LR closed the Chair report for 2019

**Treasurer Report – Ian Adam**

Attention was drawn to the accounts section of the Annual Report and Statement of Accounts for 2019 and drew attention to the consolidated figures for BAPO and baPo ltd, which show a profit of £35,566 for 2019 compared to deficit of £29k in 2018.

Conference remains the main source of change in our accounts.

Our largest cost to the association is Insurance & we are constantly working to reduce these. The contributing factor is insurance claims - we have had 3 claims in the past 6 years.

IA continues to support our committee Chairs to come in on budget with their committee costs.

IA handed over to CB for the Secretary’s Report.

**Secretary’s Report – Conor Brown**

CB provided the figures for the total membership (447) compared to total HCPC figures of 1087 registrants. This shows there is only 41% of registrants who are members of BAPO. This is a decline of 1% on last year from 42%. This year we have set up a membership referral scheme & Peter has joined EC on this seconded role with plans to re-engage the profession & increase membership numbers.

The Ethics Committee were required to meet once in 2019, but there was no case to answer & there has been no HCPC fitness to practice cases for Prosthetists/Orthotists in 2019.

CB moved on to discuss elections.

The following will remain on the Executive Committee:-

Lynne Rowley, Ian Adam, Conor Brown, Lauren Jennings, Lauren Cox, Kate Spillar, Kate Chauhan, Miriam Golding-Day & Paul Charlton. Peter Iliff will stand for election at the 2021 AGM.

As previously mentioned, all Executive Committee members who were due to stand down have agreed to remain on the committee until the next AGM to ensure continuity in the year ahead. Unfortunately, when we put out a call for re-elections at the beginning of this pandemic we had no responses & were facing an Executive Committee with only 3 members.

We currently have 4 full member & 1 Associate member vacancies.

2019 saw the following step down from Executive Committee:-

Scott McNab, Reg Fifield, Dave Buchanan & Doug Oldrey. Th Executive Committee would like to acknowledge their hard work & commitment & thank them for their service.

CB advised that there have been no proposed Constitutional changes to announce this year.

CB handed back to LR

**Lynne Rowley, Chair -** Stated that this concludes the formal presentations and advised there were two previously submitted questions for this AGM

**Q** **Evalin Gwaki** - can discuss having a committee member for diversity & inclusion. Whilst the NHS has a network for people who identify as being BAME, LGBTQ & religious minorities she feels it would be beneficial for BAPO to have something similar to the CSP that is specific to those that work in that industry. They have a diversity & inclusion network with an aim of the following:- Be a resource to other committees & members for guidance on BAME issues within their profession. Influence & impact activities which affect BAME members & raise non BAME awareness in a safe & supportive space to share challenges, experiences & learning. They work collaboratively to challenge factors that limit individual opportunities & promote the value of contribution of those members.

**A** **Simon Dickinson** – absolutely essential – great idea.

No further comments, poll results 97% in favour - motion carried.

**Q** **Jonathan Wright** – The vast majority of organisations, companies, charities, unions etc. have persons dealing with the welfare of their members & as far as I’m aware BAPO doesn’t. During many years of membership, I have been aware of several situations driven by both members & BAPO that would greatly benefit from this facility as there are many circumstances that our members may find themselves out in the cold i.e. – disputes with employers re conflict billing etc. On a personal level we all have issues that we feel cannot be discussed with immediate family & friends. The majority of instances can be dealt with via phone & therefore do not require huge resources to maintain. The post holder would be carefully vetted and totally independent &be a neutral platform. I would like to put this forward for consideration.

**A** **LR** - advised although very good points, we need to be careful that we don’t verge into employer relationships, as that’s going down union route.

Further comment from William Munro – agree with sentiment behind this and especially in these uncertain times many will find themselves feeling insecure due to practice, redundancies etc, I am happy to be a listening ear, but staying clear of industrial law.

**Simon Dickinson** – the challenge I feel is I’m not sure BAPO is the organization who can influence these things. The idea of having a support network and looking after each other is probably needed now more than ever even from a workforce point of view being recruitment & students. We do really need to hold onto and support each other through these challenging times as I feel it will get worse before it gets better.

**Pam Coulton** – agree with William Munro but feels this is a long-term issue.

**Peter Iliff** – this would be difficult to implement at this time and maybe in the short-term we get up & running a facility where we assign members to organisations who are better equipped & without us performing the function of a union.

**LR** - so the motion is not to create a welfare officer but to create a support network for members and the Executive Committee to investigate solutions to support members

Poll result – 86% motion carried

LR invited any further questions

**Q David Morrison -**  We are creating 2 new courses for graduates but I’m hearing there is likely to be and have been a number of clinical & technical staff being made redundant at this time and I’m concerned there are not going to be any jobs for these people when they come out.

**A Peter Iliff** - I have been representing BAPO with BHTA and have currently heard of 1 redundancy although many are in current position where the funding model we have in England is funding services. I feel this is a Covid specific issue and in the long-term I don’t think there will be a problem because we will come out of this needing more people to treat more patients, therefore the resources going to Universities and other centres will be successful, but in the short-term that is where there will be some real difficulties & challenges - not that we are training too many people, but how jobs can be protected by organisations working together to address some of the idiocrasies that have been thrown out during the contracting process. In England in particular where activity is the base for funding, and I think companies etc are very stressed at the moment financially. There have been measures put in place by NHS England to come up with extraordinary funding solutions unfortunately that hasn’t been taken on board by all trusts. I would suggest the underlying demand for clinicians is still healthy.

**LR** – can I add that patients aren’t going away, it’s the employment situation that is changing but with students quite rightly having their degree and doing what they want with it, we are seeing more of our new graduates moving on to pastures new and not staying in the profession. To maintain the current HCPC figures we need all these students to stay in the profession, so the new courses mean we have more sustainability because people are choosing to do the apprenticeship programme or post graduate degree to join the register rather than using it as a stepping stone to something else.

**Q David Morrison** – I have some concerns about the number of UK students that go on these courses, I understand universities have to fund themselves but how many of these students will actually go on to be working in the UK

**A** **LR**- I can tell you at Salford University the majority are UK nationals, but unfortunately we can’t influence the recruitment of these students and it’s up to them where they take them from.

**Q Pam Coulton** - BAPO is trying to reduce the amount of insurance claims, how do you propose to do this when the world is so claim happy? Is it not more realistic to accept that claims will increase?

**A**  **Ian Adam** - we accept we will get claims, but the insurance industry has changed and they have made it harder for non-genuine claims to make their way through the system. So ultimately what I’m trying to emphasise is that’s the biggest risk to our insurance premium and obviously premiums can rise year to year and the Government can change the insurance premium tax which hasn’t changed for the past couple of years.

**Pam Coulton** – happy with explanation

**Q Simon Dickinson** – Lynne, in your Chair report you advised that BAPO had additional funding to assist with Chair role. Where was it from & what is it for? What is the cost? And one of the challenges we have is we rely on people giving their personal time to commit to our wonderful profession and the reality is doing that & a daytime job is exhausting & I applaud you for being Chair for past 5 years. Would it be possible to create a permanent funding stream to maintain a Chair role on secondment & could we get OETT to change their rules to do that. I wonder if we can come up with a collective solution, we have a surplus in our bank account, we have a profession in crisis, students aren’t able to go on placement, we have further issues with clinics not operating, and we have a lot of patients who are having to wait longer for us to get to them with most getting worse & more complex. There is a great deal of fear at this time & I wonder what our solution could be if we looked more rather than focusing on the structure we have currently in place.

**A LR** – we didn’t get external funding for this secondment role. When you ask for someone’s time on secondment it depends how much that persons time is, as we are giving their employer money for the time they spend doing BAPO work. What we did was put a small percentage increase on the fees and obviously didn’t see Covid coming so appreciate members income may be hit during this time, this partially funded the secondment and the balance was taken from our reserves. Engaging OETT is a discussion we could have but they are set up to fund & support Orthotists in the UK & I don’t see them releasing funding to help the professional organisation, but we can ask.

**Q Andrew Lodge** question on similar subject – he would welcome a proposal to support new Chair - is this intended to be a single event?

**A** **LR** – No its not

**Q Andrew Lodge** - or is it an oncoming programme to support future Vice Chairs?

**A LR** – No its not, it’s actually supposed to be supporting the Chair but because of the current situation we decided to pilot it & see if it was effective and second our current Vices time for next few months, so, by 2021 he’s up to speed and can take over Chair with hopefully maintaining secondment. If it doesn’t work, it’s only a pilot, the contract is only for 12 months. We didn’t want to sign the association up to something that may be unsuccessful.

**Q Andrew Lodge** – Is it sustainable for the association?

**A LR** - we are reducing costs, as you will have seen from Ian’s presentation we have negotiated a significant reduction for our Insurance policy with a much better policy than we previously had. And our KPI is to increase our membership, this is key to supporting it going forward. Obviously, this will be evaluated going forward.

**IA** – last year we asked Lynne to indicate how many days she had actually taken to represent BAPO, this showed she had actually represented BAPO more than her annual leave, her employer had been very helpful but at the same time she was doing meetings in her own time. We felt that this was an amount of money that needed to be spent to support the association & we feel we can’t justify not spending it for this person to use paid time and not their holidays & own time to represent our association at all the places we should be represented.

**Q Simon Dickinson** – I fully accept this and the challenges we face, but in order for us all to try and get through this we need to have people who have the time to do it without killing themselves. The world has changed, OETT can exist to train & educate Orthotists, but if we don’t represent ourselves properly now - I’ve seen Juliet’s comment about getting on forums, yes that’s brilliant but it’s going to take time. We need someone who can deal with this full time and I’m not being critical of Lynne here in any shape or form, and not be also running a NHS Department and I think it would be worth having a discussion with OETT, they have £2.7 million in the bank, but if there is no profession left what use is having that money? I feel this is a massive opportunity to stand up & move forward. It’s horrible, what’s happening has killed people, but in adversity we have to rise to the challenge & explore every avenue to do that effectively and I’m sure there would be people who would come forward if it was a full time seconded paid role. If we can’t get OETT to do it there may be another way. So, my question is, should we look at avenues to seek funding for a permanent representative to focus on the desires & needs of our profession & organisation whether NHS or commercial to represent us at national level for the next year or two while we go through this radical change?

**A PI** - there is a lot of money within OETT, but in my dealings with them I would suggest they would respond with their terms of the trusteeship would not allow them to subsidise the professional body. I do agree we need to move to a place where we do have an element of permanent professional staff to represent us and that is what I’m working towards in my term, should it be extended. My purpose would be to get that in place so the next person taking on the role, whether it be Chair - I think with some other professional bodies have a Chair for day or two or in the capacity of Policy Officer to do representation pieces & report to the Chair on a fulltime basis. Strategically how we do it I think we can work through it? It needs to be affordable & I sense it will probably need to be self-funded & if we look at membership numbers, if we can drive an increase to 50/60% that would be close to funding required to have a full-time officer. We may get funding from other sources but ultimately the success of this organisation I think will come from within.

**LR** – Juliet you have commented about fellowships & forums, again this all take time and they would need to step away from clinical practice to do that, but absolutely, the more people that step forward the better because the work you are doing with HEE at the moment has raked dividends with people understanding what we do & how we work. Pulling resources with other P&O organisations like ISPO, BHTA, OETT – every organisation has its own identity and its own agenda and varying types of membership, so it would depend on what the intervention is. We are already aligning ourselves with these stakeholders in our profession to take key work forward, but again it requires dedication & time.

**LR** – agree with Simon, yes we need to give people a reason to join the association, but I also agreed with Andrew Lodge’s comment that we tried a full time post before & it nearly bankrupted us and that was when we had a much larger membership. We do need to find a way forward and this is literally dipping our toes into the waters to see if we can make it work.

The vote proposed is - should the EC explore a full-time funded post going forward?

Poll Result – 69% motion carried

**Q LR** – Any further questions? Jonathan Wright has responded to Simon Dickinson’s question - if not full time could we explore part time?

**A Simon Dickinson** – Absolutely, any option we have to be more visible and proactive the better.

**LR -**  I would like to take this to the full membership as this would not just alter our activities but could impact on our costs & our reserves.

**PI** - to look at now would be challenging. If we could get a bit more traction under our belt by building our membership numbers and seeing how responsive that drive will be post Covid because there is a risk that a lot of people may take the view they can’t afford their membership for next 6/9 months as a lot may have been on furlough, financially stressed or it may be out-with P&O role and relate to home life. Money is generally going to be tight. There needs to be a business case where we can take an informed view on what we can achieve and take on Simons point, but it needs to be what’s affordable & what the deliverables are of that post & who that person is going to be governed by needs to be worked through to ensure membership is appropriately protected.

**Q LR** – Any further questions?

**A SD** – I would like to ask our Professional Affairs Committee to review the best practice guidelines that we currently have relating specifically to appointment times. We have a pandemic now where decisions may be made at a local level according to risk, but I have been doing this for 25 years and remember when 5/10 minute appointments with no notes were horrific. Our colleagues in physio & podiatry who aren’t measuring patients or providing them with stretching/strengthening, other device, consistently get 40/60 mins per new patient whereas our current guidelines are 20 mins. I appreciate that has ramifications on waiting lists however, a previous comment, how do we reduce insurance costs and how do we improve our profile, I believe we can do that by having longer appointments, so we can be more consistent, thorough, and our notes can be more legally binding, and we can properly act as professionals rather than dispensers of all orthosis which we are by some trusts around the United Kingdom. It is totally unreasonable that Orthotists have a very limited amount of time to do something very complicated and then write notes, add the ppe to the Covid19 pandemic, we need more time, and I would love to see these guidelines reviewed.

**PC** – we will take that on board and certainly look at it.

Any further comments – Jonathan thinks the virtual AGM has worked well and would like to see this continue in future.

**LR** – I agree what this environment that we are currently working in has taught us is that we can use technology and we shouldn’t be frightened of it. We are having all our meeting through the association virtually and if you feel this has worked well, I don’t see any reason why we can’t proceed like this in future. We are looking at a platform of our own to use for education so if we have the tools, we should use it. Any further questions?

**Q Andrew Lodge** – can I follow up on that, how many people have attended this evening AGM & how does that compare with numbers at previous AGMs?

**A LR** - about the same. We currently have 40 in the room and at previous AGM’s between 40/50. Obviously it’s dependant on if people have something they wish to discuss.

**Q Evalin Gwaki** – will this meeting be available to view. LR – this is not something we would normally do, but we can look at putting this recording on our members website. The minutes are always sent to membership before the next AGM.

**Q Juliet Sturgess** - could virtual conference be considered to reduce the costs of conference?

**A Lauren Cox** - that would detract from our exhibition and that’s where we make a lot of our revenue.

**LR** – I agree the BAPO conference has always been about collectively getting together both professionally & socially.

**LC** – I feel going virtual you lose the aura aspect of coming together.

**LR** - however, we are looking at having some of conference digitally as it may not be possible to have a face-to-face conference in 2021.

**LC** – we have been looking at having some speakers remotely, but to have the whole of conference would certainly detract from the element of conference.

**IA** – I believe the Australian association are due to have a virtual conference in October and it would be interesting to receive some feedback on virtual compared to an attended conference.

**LR** – Completely agree Juliet, the world is moving virtual at the moment & we should be flexible with that & we are looking at changing our online education to reflect that as well as our meetings, so I think we should take conference to next stage also and why not have people in the room for AGM and people zooming in too. This will make running it more challenging, but I’m sure we can do it.

**LR** – concerns about the recording of AGM being made available, I agree this should be for members only and should be here at AGM rather than seeing it later.

There being no further questions LR thanked the Executive and Standing Committee members for their continued work and support to develop and deliver the various projects on behalf of the membership.

LR also acknowledged the hard work of the dedicated staff in the Secretariat led by Manager Lorna Graham.

In closing, LR thanked the membership for the support they have given to the Association over the past year and asked for their continued support, as the advice and opinions offered are crucial in assisting the Executive Committee to deliver the needs, desires and aspirations of the membership.

The date of the next AGM TBC