



**THE MOST VENERABLE ORDER OF THE HOSPITAL OF ST. JOHN  
OF JERUSALEM**

**MINUTES OF THE TWENTY-SECOND MEETING OF GRAND  
COUNCIL HELD BY VIDEO CONFERENCE**

**Table Discussions 26 & 27 May 2020**

**Meeting 28 May 2020**

**Present:**

**Members of Grand Council**

**Prof Mark Compton (Lord Prior) (Chair)**  
**Mr Patrick Burgess (Chancellor)**  
**Mr John Mah (Sub Prior)**  
**Right Reverend Tim Stevens (Prelate)**  
**Surgeon Rear Admiral Lionel Jarvis (Prior of the Priory of England and the Islands)**  
**Major General Mark Strudwick (Prior of Scotland)**  
**Sir Paul Williams (Prior of the Priory for Wales)**  
**Col Kevin Williams (Chancellor of the Priory for South Africa)**  
**Dr Steve Evans (Chancellor of the Priory in New Zealand)**  
**Mr Geoffrey Loughheed (Chancellor Priory of Canada)**  
**Mr Cameron Oxley, (Chancellor of the Priory in Australia)**  
**Mr Palmer Hamilton (Prior of the Priory in the USA)**  
**Mr Paul Ndungu (Prior of the Priory of Kenya)**  
**Dr Teh Peng Hooi (Prior of the Priory of Singapore)**  
**Dr Chin Hung Chung (Prior of the Priory of Hong Kong)**  
**Sir Andrew Cash (Chair of St John Eye Hospital Group)**  
**Ms Mairi Arthur (Appointed Member)**

**Grand Council Standing Observer**

**Dato Lai See Ming (Chairman, St John Association of Malaysia)**

**Apologies**

**Archbishop Thabo Makgoba (Prior of the Priory for South Africa)**

**Secretary:**

**Vice Admiral Sir Paul Lambert (Secretary General of the Order)**

**Other Attendees**

A full list other attendees is at Appendix 1

## THE TWENTY-SECOND MEETING OF THE GRAND COUNCIL

<b>Item 1: Opening Prayers</b>	
	The <b>Prelate</b> led the opening prayers.
<b>Item 2: Opening Remarks</b>	
<b>a</b>	The <b>Lord Prior</b> opened the meeting by thanking all those involved in the table discussions held over the previous 2 days.
<b>b</b>	The <b>Lord Prior</b> also thanked The Priory of Kenya who had, until just a few months ago, been arranging Grand Council in Nairobi. A considerable amount of effort and thought had gone into ensuring the meetings success. However, the Covid19 crisis meant that all the plans had to be cancelled. The Lord Prior thanked the Prior for his understanding when the problems were first raised and asked that the Grand Council's thanks be relayed to his team. He looked forward to Grand Council returning to Nairobi in 2023.
<b>c</b>	Apologies had been received from Archbishop Thabo Makgoba (Prior of the Priory for South Africa) and from The Grand Prior. The Grand Prior had sent the meeting a personal message which was read (See Appendix 2).
<b>d</b>	The <b>Lord Prior</b> welcomed: Dr Gillian Willmore (Chancellor Designate of The Order) Mr John Whitehead, (Chancellor Designate of the Priory of New Zealand) Mr Alain Laurencelle (Chancellor Designate, Priory of Canada) Mr Nigel Heath (Prior Designate, Priory in the USA) to their first Grand Council.
<b>e</b>	The <b>Lord Prior</b> also thanked Mr Tom Budd for yet again attending Grand Council and for all the time and thought he provided the Order throughout the year.
<b>f</b>	The <b>Lord Prior</b> explained that this would be a Grand Council like no other. Despite the current health crisis that everyone faced, he wanted to make sure that The Order not only responded to the immediate threat but was also in a shape to face problems in the future.
<b>g</b>	Grand Council was not just a meeting to conduct routine business, but a chance to catch up, discuss issues and renew friendships. Partners of all the participants played an important part in this; unfortunately, most of this will be missing this year.
<b>h</b>	The <b>Lord Prior</b> wanted to send condolences from the meeting to Lionel Jarvis who had recently lost his mother; and to the Prelate Tim, who had lost his wife – the thoughts and prayers of the whole meeting were with him.
<b>i</b>	The <b>Lord Prior</b> knew that every establishment represented had been affected in some

	way by the Covid19 virus. There had been a terrible loss of life around the world and he had been extremely saddened on hearing of the death of Gerallt Davies CStJ MBE, from St John Ambulance Cymru Wales who had fallen to the virus.
<b>j</b>	The current pandemic had highlighted the good St John does around the world and he had been heartened hearing how St John people were stepping forward, putting themselves at risk in order to work for the good of humanity.
<b>Item 3: Homily</b>	
<b>a</b>	The Prelate gave a homily centred upon Feast of Pentecost (full text at Appendix 3)
<b>b</b>	<b>The Lord Prior</b> thanked the Prelate for such a thought-provoking homily.
<b>Item 4: Minutes of the Twenty First Grand Council (Singapore 2019)</b>	
	The members accepted the minutes of the Twenty First Grand Council without amendment.
<b>Item 5: Matters Arising</b>	
<b>a</b>	<b>The Secretary General</b> explained that the College of Deans' (CoD) Inter-Faith policy paper would be submitted to GC 2021.  <b>I. [Action – CoD paper to GC 2021]</b>
<b>b</b>	A review of the Terms of Reference (ToRs) for the Hospitaller was on going.  <i>(Post meeting note: Grand Council members agreed that the ToRs should not change and they will be reviewed when the current post holder stands down)</i>
<b>Item 6: Covid -19. Its Impact Across The Order.</b>	
<b>a</b>	The <b>Lord Prior</b> thanked everyone for the short reports submitted before the meeting. These had been shared with all other Priories.
<b>b</b>	The common themes appeared to be that there had been a great demand on services and there had been a devastating impact upon most establishments' revenues. The meeting discussed the fact that it would take some time before the financial hole caused by the pandemic could be filled. It was agreed that it would change the way that St John operated. The meeting noted that the International Executive Meeting (IEM) later in the week would be discussing new ways of working including digital training.
<b>c</b>	The members thought that the St John family had responded exceptionally well to the crisis: from office staff working part of the week voluntarily in Australia, to St John Ambulance England providing 1,000 hours a day of clinical support to the National Health Service (England). It had been an opportunity to share resources and the International Office had done much to connect everyone including setting up the Covid

	App.	
<b>d</b>	The <b>Lord Prior</b> thought that the recovery would need everyone supporting each other. And it would take time.	
<b>Item 7: Our Values</b>		
<b>a</b>	In introducing the Prelate, the <b>Lord Prior</b> reminded everyone how they had started in Williamsburg by asking themselves about the nature of the Order. This had led to the exploration of the Order's Values; the Prelate had done much work in overseeing this journey.	
<b>b</b>	The <b>Prelate</b> highlighted the fact that the Order's Values underpinned its mission. They were split into 2 groups of 4. The first group were about behaviours and how the Order reaches out to humanity. The other 4 undergirds the nature of the organisation.	
<b>c</b>	The <b>Prelate</b> thought that all members should ask themselves how they had measured up to their Values at the end of all meetings.	
<b>d</b>	In discussion it was agreed that Values and Inductions were about the spirit of the Order. It was universally welcomed, and the <b>Prelate</b> reminded everyone that the Values document was not to be appreciated but a document that is set to work in everything they did.	
<b>Item 8: Report from Table Groups</b>		
<b>a</b>	<b>i</b>	<b>Mission:</b> The <b>Lord Prior</b> thought the previous conversation had been a good foundation for the discussion on the Order's future strategy.
	<b>ii</b>	He thanked all those involved in the discussions over the previous 2 days and thought that the summary (see Appendix 4) provided a clear signpost to the direction members wished to go.
	<b>iii</b>	In discussion, members thought the mission should be about what they did, not how they did it. It should also be thematically aligned. It was also important that the mission was not over complicated but did not make any establishment excluded.
	<b>iv</b>	In summary it was accepted that TEC would produce a strategy based on the Order's values, fit for the post-covid world.  <b>II. [Action – TEC to produce Order Strategy]</b>
<b>b</b>	<b>i</b>	<b>Priorities (Relationship Charter):</b> The draft Relationship Charter was generally supported by the Members and the IEM was asked to amend it following the Table Discussions and bring it back to the next TEC.  <b>III. [Action – IEM to take amended Charter to TEC]</b>

	ii	It was accepted that the Relationship Charter did not have the same legal status as the Order's Statutes. But this in itself made it more likely to be accepted by all.
<b>c</b>	i	<b>First Aid/Health Care:</b> It was generally agreed that St John could become the lead organization in First Aid/Community Health. The <b>CEO Priory of England</b> advised that a 'Community of Interest' had been established; it was now into defining reference groups and setting Terms of Reference.
<b>d</b>	ii	The members agreed that TEC should oversee the progress of setting up the group and taking this agenda item forward.  <b>IV. [Action – TEC to oversee First Aid Community of Interest]</b>
<b>e</b>	i	<b>Association Support:</b> The members accepted the Social Franchise model as the way forward to support Associations. IEM was tasked to take this forward (reporting to TEC), noting the fact that Pories needed to allocate time, resources and planning to make it work.  <b>V. [Action – IEM to take forward Association Support and Report to TEC]</b>
<b>f</b>	i	<b>Diversity and Inclusion:</b> TEC was tasked to take forward this agenda item, addressing the issue across a broad front including ensuring that it was included in the Relationship Charter.  <b>VI. [Action- TEC to take forward the Diversity and Inclusion Agenda]</b>
<b>g</b>	i	<b>Youth:</b> The members were encouraged by the inclusion of young members for the second year running at Grand Council. They noted that an International Youth Network (IYAN) had been set up but believed it now needed greater structure. Although the upper age of youth needed defining (and it was noted that there is no universally agreed definition) that for statistical purposes the UN uses 24 and that IYAN should use a similar upper age.
	ii	It was agreed that the IEM should oversee the governance structure of the IYAN and that IYAN itself should be tasked with setting up a structure such that the voice of the child (as defined by the UN – ie under 18) would also be heard.  <b>VII. [Action: IEM Oversee IYAN Governance Structure and Report to TEC]</b> <b>VIII. [Action: IYAN Define a Structure So The Voice of Under 18s Heard]</b>
<b>h</b>	i	The <b>Lord Prior</b> concluded the session for thanking everyone who had taken part in the discussions during the week. On behalf of the Grand Council he thanked the IEM for all the work they were doing both for their Pories but also for the good of the wider Order.

*On conclusion of item 8, members of IEM left the meeting.*

## **Item 9: Executive Committee and OHAC Reports**

### **9.1 Reserved Matters**

- a There were no reserved matters.

### **9.2 Presentation of Draft Audit and Risk Report and Draft Trustees Annual Report**

- a The **Secretary General** explained that TEC had not accepted the Audit and Risk Report and the Trustees Annual Report on the advice of the Order's auditor. If it were not for the current pandemic these reports would have been signed off before Grand Council with no issues. However, due to the crisis, all UK trustees of charities are being advised to delay signing to as late as possible (and for the Order that is October 2020). During this interval, additional information will be added to the Annual Financial Report including range of cash flow predictions for 2021; budget for 2021 etc. These are needed to give the trustees assurance that the organisation remains a going concern. An additional TEC will be arranged to review the reports in October.
- b **RA Lionel Jarvis** (Chair of the Order's Audit and Risk Committee) highlighted the financial risks being faced by Priors. He also explained the range of risks within the Associations and the need to cost out properly the support to Associations as agreed at Agenda Item 8e.
- c The Grand Council noted the reports.

### **9.3 Nominations and Appointments Committee (NAC) Report**

- a The **Prelate** (Chair of the Order's NAC) reported that following internal competition Dr Gillian Willmore (Priory of England) had been selected as the Order's next Chancellor
- b He thanked The Prior of the Priory of England who had chaired a sub-committee of NAC and had selected Mr Todd Skilton (Priory of New Zealand) as the Order's Librarian.
- c The **Lord Prior** congratulated both nominees and thanked the Prelate and his committee for their work.

### **9.4 Changes to Regulations**

- a The **Chancellor** introduced **Mr Budd** and thanked him for all the work he was doing to ensure the Order's Governance Documents were up to date.
- b **Mr Budd** reminded the Council of the report he had given at their last meeting (See GC 2019 Minutes Item 14) and advised the members that he hoped that the Regulations would be completed by about September.

<b>9.5</b>	<b>Report by the Chancellor</b>	
	a	The <b>Chancellor</b> advised the members that over the last few years (and with considerable work from Mr Budd and his team) the Order's Statutes had been updated and the Regulations were nearing completion. Additionally, an Honours and Awards Review had been completed and implemented. The Investiture Service was now being updated.
	b	One of the recommendations from the Honours and Awards Review was for the Order's Honours and Awards Committee to see nominations to Grade II from Priors before being agreed at Priory level. This has led to the raising of standards of reports across the Order.
	c	The <b>Chancellor</b> reported that the Alliance Orders were working extremely well together and this was reflected in the work of the Co-operation Group.
	d	Finally, the <b>Chancellor</b> told the Council that when the Order conducted its major governance reviews in 1999, the post of Chancellor was abolished, and the badge of office was relinquished to one of the other posts. The Priory of England had recently donated a new badge for the Chancellor which will be worn by Dr Willmore. He thanked the Priory for their generosity.
	e	The <b>Lord Prior</b> also thanked the Priory and thanked the Chancellor for all his work.
<b>Item 10: St John Eye Hospital Group</b>		
	<b>a</b>	<b>Sir Andrew Cash</b> reported that the SJEHG Board had agreed 5 strategic aims for the group: <ul style="list-style-type: none"> <li>• Excellent Patient Centred Services,</li> <li>• Employing Caring and Cared for Staff,</li> <li>• Ensuring Sustainable Funding,</li> <li>• Good Governance and Enhancing Partnership Working across the World,</li> <li>• To Deliver Excellent Education, Research and Innovation.</li> </ul>
	<b>b</b>	<b>Mr David Verity</b> described the regional, economic, political and humanitarian background to where the hospital was operating. He explained that 80% of blindness was preventable and that the majority of blindness in the region was caused by diabetes. Therefore the SJEHG mission of preventing blindness was achievable.
	<b>c</b>	<b>Sir Andrew Cash</b> presented a paper by SJEHG on the range of measures taken by them in response to the Covid19 pandemic. At the beginning of the crisis the board had considered a range of scenarios. The budget of the hospital is of the order of £12million. They aimed to have approx. £3 - 4million in reserves. Of that £12million, 19% is from the Priors. He thanked the Priors for their continued generosity.
	<b>d</b>	During the pandemic there had been a 70% in clinical activity in Jerusalem and the Westbank, and a 30% reduction in Gaza. It now needed detailed work to consider how to close any financial gap that there will arise. <b>Sir Andrew Cash</b> told the Council that the Hospitaller will be discussing these matters in greater detail at the IEM and he

	looked to that group to assist in making proposals to close the gap.
<b>e</b>	The <b>Lord Prior</b> thanked the Chair of SJEHG and asked him to pass on the thanks of the Order for all the work that the Hospital is doing in the most difficult of times.
<b>Item 11: General Matters</b>	
<b>11.1</b>	<b>Venues for Future Meetings:</b>
a	GC 2021: 24 May -28 May New Zealand (Queenstown) GC 2022: 20 Jun –25 Jun England (London) GC 2023: 10 Jul – 14 Jul Kenya (dates tbc) (Nairobi)
b	A theme centred around First Aid will be considered for GC 2021.
<b>11.2</b>	<b>Any Other Business:</b>
a	The Council thanked the Secretary General for setting up the meeting and thought that video conference could be used to bring the members together for ad hoc meetings between their annual council.
b	The <b>Lord Prior</b> thanked all the members for their participation. He sadly had a number of farewells to make. Firstly the Chancellor; he thanked him for his company; his humour; his council and his foresight. He also thanked him for all his work noting that he had held things together in some difficult times. He told him that he would be much missed.
c	He thanked all the Priors and Chancellors leaving; Dr Steve Evans (Chancellor of the Priory in New Zealand); Mr Geoffrey Loughheed (Chancellor Priory of Canada) Mr Palmer Hamilton (Prior of the Priory in the USA) Dr Teh Peng Hooi (Prior of the Priory of Singapore) They had all made a difference in their Priors and had made a tremendous contribution at the international level.
<b>Item 12: Closing Prayers</b>	
	<b>The Prelate</b> gave the closing Prayers.

**International Office**  
**15 June 2020**

**Appendices:**



<b>Appendix</b>	<b>Title</b>	<b>Item No</b>
1.	Grand Council 2020 – Other Attendees	-
2.	Message by The Grand Prior	-
3.	Homily by The Prelate	3
4.	Table Discussions	-

## **TWENTY SECOND GRAND COUNCIL – OTHER ATTENDEES**

### **Observers and Order Officers**

Mr David Verity (The Order Hospitaller)  
Mr Tom Budd (The Order, Deputy Honorary Legal Counsel)  
Mr Shayne Leslie (Chair, Commandery of Western Australia)

### **Priory Priors Designate and Chancellor Designate**

Dr Gillian Willmore (Chancellor Designate of The Order)  
Mr John Whitehead, (Chancellor Designate of the Priory of New Zealand)  
Mr Alain Laurencelle (Chancellor Designate, Priory of Canada)  
Mr Nigel Heath (Prior Designate, Priory in the USA)

### **Priory CEOs and Priory Officers**

Mr Martin Houghton-Brown (Chief Executive, Priory of England and the Islands)  
Colonel Angus Loudon (Executive Director, Priory of Scotland)  
Ms Helen Smith (Chief Executive, Priory of Wales)  
Mr George Woods (Joint Chief Executive, Priory for South Africa)  
Mr Brian Cole (Interim Chief Executive, Priory of Canada)  
Mr Len Fiori (Chief Executive, Priory in Australia)  
Ms Michele Blair (Executive Director, Priory in the USA)  
Mr Albert Ruturi (Chief Executive, Priory of Kenya)  
Ms Valerie Ng Suat Hoon (Chief Administrative Officer, Priory of Singapore)  
Mr Warner Ee Boon Watt (Chief Executive, Priory of Singapore)  
Ms Susanna Chow (Chief Executive, Priory of Hong Kong)  
Mr Ahmad Maali (Chief Executive, St John Eye Hospital Group)  
Ms Michelle Fyfe (Chief Executive, Commandery of Western Australia)  
Mr We Tak Hoo (Honorary Secretary General, St John Association of Malaysia)

### **Additional Attendees to Grand Council Table Discussions (26-27 May 2020)**

#### **College of Deans**

Rev David Morris (Wales)  
Rt Rev Neville Naido (South Africa)  
Major General Guy Chapdelaine (Canada)  
Rt Rev Richard Hurford (Australia)  
Rt Rev Charles Muturi (Kenya)  
Rev Paul Williams (Secretary to The College of Deans)

#### **International Youth Advisory Network**

Mr Matthew Orton (Australia)  
Mr Suhail Khan (South Africa)  
Ms Jenny Kisoso (Kenya)

**THE ORDER OF ST. JOHN  
MESSAGE BY HRH THE GRAND PRIOR TO THE GRAND COUNCIL  
2020**

*(Read on his behalf at the beginning of the meeting by the Deputy Lord Prior)*

Until March of this year, I was very much looking forward to meeting you all in Nairobi and hearing your discussions setting out the future strategy for St John. In under 3 months many aspects of our lives have been changed unimaginably.

However, throughout this situation there has been one constant and that has been the magnificent way St John people have supported their communities. I have been most impressed by them and with your leadership. It is difficult, in the midst of a global pandemic, to think about planning for the future and I am heartened to hear that your Grand Council deliberations will cover the immediate issues we are facing as well how we will organise ourselves so we are stronger to deal with future problems.

I know that much of the strength of St John comes from the personal contacts we build during these and other meetings across the globe. However, in these unprecedented times we all have to adapt, and I am pleased to see how St John has changed to be able to conduct its business.

I am sorry I will not be able to join the various video conferences you are holding, both around the world and for some of you, around the clock. However, I will be keen to hear from the Lord Prior of your conversations.

### **Item 3: HOMILY BY THE PRELATE**

“The crowd gathered and was bewildered because each one heard them speaking in the native language of each.” (Acts 2:6)

As we begin Grand Council today, we are reminded that this coming Sunday is the Feast of Pentecost. Around the world the Church is celebrating the coming together of people from all of the known world in Jerusalem for a great gathering of devout Jews from every nation. The Book of Acts describes the astonishing experience of finding themselves united across barriers of culture, gender and language. The Feast of Pentecost was born in the extraordinary experience of people who found that all the things which divided them no longer stood in the way of their understanding of each other and of their deep connectedness to each other.

This experience is celebrated as the birthday of the Christian Church. The moment when many from the Jewish communities have begun to become drawn into a new community of those who understood themselves to be followers of a particular Jew, namely Jesus of Nazareth.

We are gathering as representatives from different cultures even more widely drawn than those who gathered in Jerusalem at the first Pentecost. We come from different backgrounds, shaped by different kinds of community and often by different languages. But our task as a Council is to speak and hear each other across these divides and seek a profound common purpose because of our roots in the long Christian tradition which has shaped the Order of St John.

Because of this common tradition, the Order has found inspiration in the service of humanity for many decades. Today we are meeting in the shadow of a global crisis greater than any which has faced the Order in the past. We know that around the world our Priors and establishments have been rising to the challenge of the virus. The temptation under all the pressures we now face, especially the financial pressures, will be to retreat into narrow national agendas in order to survive.

But the vision of Pentecost stays with us. It is a vision of humanity who began to understand that working across boundaries helped to give birth to something completely new which is why the Christian faith became a worldwide movement. In the same way it is for us as the global leadership of the Order of St John to continue to pursue a common vision, a common purpose and a common understanding of how we can support each other, encourage each other, enable each other and inspire each other to continue the vital work we do together which the world will need from us more than ever before.

May the vision of Pentecost give us energy and courage to do that as we meet together this week.

The Rt Revd Tim Stevens

## Summary of Table Discussions

Held 26-27 May 2020

**Mission:** Agreed the direction of travel but more crafting needed.

- More emphasis on Community Resilience as the unifying purpose
- Needs to be the Community element of healthcare and 'Resilience'
- Focus on the community and volunteer aspect.
- Consider broadening the term, "health" to "community (or public)health"
- Consider inclusion of "physical, mental and spiritual health",
- Mission should reinforce "service to communities"
- Should incorporate .... Sufferings Relief, Humanity and Health.
- A global organisation that builds community health resilience by delivering quality first aid, training and care to anyone in need at a local level.

**Priorities:** Values Document had universal support;

The Relationship Charter was considered to be an excellent piece of work and 5 of the 6 thought it should be taken forward: however one group did not decide on the need for a Protocol between Pories as being the way forward; more discussion was needed.

- It should be aspirational" rather than "binding
- to incorporate [Values] into The Relationship Charter
- concern on how to conduct the peer assessment as well as concerns on the suspension and disaffiliation
- Inclusion of Diversity as a strategic imperative
- Output measurements should be included (Work should begin to develop a basic governance framework to cover key domains).
- The principles of subsidiarity are supported

**First Aid/Health Care:** It was generally agreed that St John could become the lead organization in First Aid/Community Health.

- SJ needs 'proper' credentials through partnering with academic institutions.
- Capitalize on the acquisition and use of new technologies and online opportunities.
- Ask ourselves the question, "Why up till now, have we not been able to achieve the above?".

**Association Support:** Social Franchise model, was broadly welcomed by the group.

- Consistency in approach/Quality Control
- Must be careful about language used, ie Central Authority
- There must be clear guidelines
- There should be a common governance model

## S

- Recognize that a major part of the of the franchisor's central authority role is also education, mentoring, training and support

**Diversity and Inclusion:** Yes -it should be part of the Relationship Charter.

- Support including a broad definition of Diversity and Inclusiveness in the Relationship Charter,
- embedding it in other documents and making it a strong part of our cultural fabric

**Youth:** All agreed that the IEM should be tasked taking this forward and Model 3 favoured.

- Execs already engage with youth – increased engagement is important.
- Much discussion around pace of moving forward with inclusion of young people.

Attached:

A: Detailed Comments from Table Discussions.

**Detailed Comments from  
Table Discussions**  
(Held 26 -27 May 2020)

## Order Mission

There was felt to be too much emphasis on First Aid as the primary focus... **More emphasis on Community Resilience as the unifying purpose** would be preferable, particularly as:

This allowed a **focus on the community and volunteer aspect** of the Order and its work.

It incorporated the **personal, physical, mental and spiritual elements** of the Order.

A **sense of 'vocation'** should be identifiable in the Mission.

It had to be **short and purposeful**. (Communications Notes)

Everyone, from Great Officers to volunteers should be able to articulate the Mission and their role in delivering it, succinctly and clearly, using a simple strapline.

Comms officers were very desirable are Priory level where possible/affordable, to ensure consistency of messaging, and a source of further information as required.

The discussion of the Order's Mission should be part of the training program.

*It was agreed to endorse the principle of a Mission as being the desired direction of travel, but that some recrafting was necessary, to **change the emphasis more towards community resilience. Values of the Order should be included. Review 'life threatening and emergency'. Need to understand 'Healthcare' – it can be a wide phrase. Holistic. All agreed there needs to be the **Community element of healthcare and 'Resilience'*****

*Needs to be very short and snappy so that we can be clear about what we are – choosing 'wide words' so that it can be all-encompassing.*

**The table discussion group notionally supports the Mission with the following points for consideration:**

- **Consider broadening the term, "health" to "**community health" or "public health";****
- **Consider inclusion of "**physical, mental and spiritual health**", either in the statement or in narrative that supports the statement;**
- **Consider broadening the statement beyond "**life threatening situations**" which appears to be too narrow in scope;**
- **Consider anchoring the Mission with the Mottoes of the Order;**
- **The Mission should help us understand, "Who we are?", "How we understand ourselves?" and "What drives and motivates us?";**
- **The Mission should **reinforce "service to communities"****

The single mission statement should incorporate our major common activities, in addition to Emergencies and Life-saving, such as **Sufferings Relief, Humanity and Health**.

## S

St John is a global organisation that builds community health resilience by delivering quality first aid, training and care to anyone in need at a local level.

### Values, and Relationship Charter

The Values were agreed and accepted as presented.

Values document was accepted unchanged

The Relationship Charter was considered to be an excellent piece of work, as it usefully amplified much in the recently updated Statutes in terms of the relationship between Grand Council and the Pories and Associations, and was consistent with the Values of the Order.

The group **did not decide** on the need for a Protocol between Pories as being the way forward; **more discussion was needed**.

*Need for protocol - Summary – **all agreed**.*

**The table discussion group embraces the notion of the Relationship Charter with the following points for consideration:**

- **The Charter should be “**aspirational**” rather than “**binding**”, leaving the Statutes to assume primacy and be binding;**
- **Consider expanding the principles of “**Commitment**” or “**Cooperation**” to explicitly identify the inter-relationship commitment/support to each other as Establishments (which also implies financial commitments);**
- **Perhaps include, “**Advocacy**” as a principle.**

Suggestion to **incorporate [Values] into The Relationship Charter**

For all Pories to **enter into a charter to strengthen the existing connection** and to develop mutually beneficial collaboration.

- Members raised their **concern on how to conduct the peer assessment**; how to audit the safeguarding policies as well as to set minimum standards with benchmark for conducting annual “health check” for their respective pories.

- Some expressed **concerns on the suspension and disaffiliation** should they breach the charter

Relationship Charter was accepted and discussed, the following amendments are proposed:

2.1. Inclusion of Diversity as a strategic imperative

2.2. Output measurements should be included along with an independent evaluation. Work should begin to develop a basic governance framework to cover key domains.

2.5. The principles of subsidiarity are supported



## S

The Charter may need to be customised to the local Covenant or Charter?

### St J to become lead First Aid Organisation

It was **agreed** that St John could become the lead organization in First Aid/Community Health.

*SJ needs to find agreed standards. Clinical Leads to co-ordinate to discuss and agree. SJ needs 'proper' credentials through partnering with academic institutions. Development of Academic Body from the Pories to be considered. First Aid should include Wellness and MHFA.*

**The table discussion group provides the following points for consideration:**

- **Focus on advocacy and building our capacity to be "influencers" and "subject-matter experts", embracing the concepts of "Centre of Excellence", enhanced "Academic" backbone, "Knowledge Management Systems" and "Thought-Leadership".**
- **Establish interconnective processes and relationships between Establishments to bring professionals and subject-matter experts from within together;**
- **Capitalize on the acquisition and use of new technologies and online opportunities - which is understood to require major investment;**
- **Consider opportunities to bring professionals and subject-matter experts from within Establishments together – for example, a local congress linked to Grand Council meetings;**
- **Ask ourselves the question, "Why up till now, have we not been able to achieve the above?".**

Expert group of Clinicians should be recruited to develop international standards for first aid and a process for monitoring and continuous quality improvement.  
Digitally delivered training will be the key to delivering standards

### Association Support

Governance and quality control, all in pursuit of ensuring the Order's reputation, drove much of the need for improving support to the Associations. This in turn would require assistance in the form of mentoring and practical help (say with policies and practice, and functions such as finance and risk management).

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- Support can take three forms:

Transactional (i.e., material support).

Assessment visits (as per the three pilots conducted in late 2019).

The building and maintenance of ongoing relationships between Pories and Associations.

- The first two of the above tend to be short-term, and on an as-required basis, while the third is more enduring. This can allow good relations and trust to be built between the leadership of the entities, and this will pay dividends long term.

A formal 'pairing' between specific Pories and Associations, while maybe technically desirable, would be difficult and expensive to institute in practice. A more achievable system would be for Associations to be able to 'reach back' to identified Pories for advice, in a spirit of 'pastoral companionship' and networking.

Social Franchise model, was broadly welcomed by the group.

It was agreed that the Relationship Charter as drafted was a very useful tool for delivering the Association Support work, although thought had to be given to how sanctions might be applied to Associations (or Pories) that 'failed', either through lack of capacity, capability, incompetence or other reason; this was a sensitive area.

*Summary – General agreement to the Social Franchise Model and delegation to Pories. Group agreement on items that should be considered,*

- *Consistency in approach/Quality Control*
- *Must be careful about language used, ie Central Authority*
- *There must be clear guidelines*
- *There should be a common governance model*
- *Associations need to move towards being self-sustaining*
- *There may be capacity issues for Pories, particularly where there are many associations to few Pories, eg Africa. There may also be financial resource constraints.*

**The table discussion group notionally supports the concept of "Social Franchise" with the following points for consideration:**

- **The ongoing need for a thorough Association risk assessment and analysis prior to and during support considerations;**
- **Considerations to address the lack of fiscal resources to provide support, including capitalizing on volunteer capacity and expertise;**
- **An understanding that implementing/enforcing standards is simply not enough i.e. they need to be backed up by training and resources;**

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- **Explore opportunities to bring Associations together (globalization) through consultative forums, etc. which are not simply limited to in-person gatherings, but also take advantage of new online communication strategies;**
- **Recognize that a major part of the of the franchisor's central authority role is also education, mentoring, training and support i.e. its about both the "carrot" and the "stick"**

To introduce the concept of Social Franchise for Associations.

- Should work out the package/standard for implementation
- Some expressed concerns on the possibility of being sanctioned

Principle of Association Support was accepted unchanged

Commitment expected from Pories will need to be spelled out clearly should be embedded in their Business Plans.

Governance framework needs to be more robust.

Enablement is the next step

Pories can share best practice with Associations.

Associations could be supported by more than one Pory.

Franchising will have to be flexible but firm.

### Diversity and Inclusion

There was a view that, by confining itself to gender equality only, the paper was missing other aspects such as cultural and ethnic diversity.

A Protocol was required to codify the policy, perhaps as part of the Relationship Charter.

Diversity should be included in leadership training and as part of the booklets for induction.

The group agreed that the Relationship Charter should include agreement on D&I.

*Summary – Yes, as a minimum we must 'strongly encourage' all St John organisations to ensure Diversity & Inclusion. Diversity must be considered as wider than gender diversity. All types of diversity are needed to secure our future and diversity is founded in our roots. There must be a commitment by all to embrace diversity.*

**The table discussion group supports including a broad definition of Diversity and Inclusiveness in the Relationship Charter, embedding it in other documents and making it a strong part of our cultural fabric, with "Gender" being established as the lead priority.**

- **The table discussion group's support for "Gender" as a priority, is not about a practice or policy of only favoring individuals believed to have**

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**been suppressed, but rather as noted in the working paper under, “You can’t be, what you can’t see” - providing women the interest, opportunities, confidence and role models, and providing existing leaders the education and understanding to be supportive and encouraging.**

Members agreed that diversity (gender, age etc.) and inclusion should be promoted

- Suggested to be **included in the Relationship Charter**

Diversity as a topic was unanimously [agreed]but with more emphasis on inclusive inclusivity. Optics and how the Order displays in public or its boards needs to be clearly driven as a strategic imperative.

If we are using words like we are a leading international organisation where are the women on our board and senior leadership positions? More needs to be done on education, coaching and mentorship

### **International Youth Advisory Network (IYAN)**

After discussion, the Chancellor proposed that the principle of an IYAN be agreed and that the task of **taking this issue forward should be delegated by GC and TEC to the IEM**. The group agreed.

*Summary – All in support. Execs already engage with youth – increased engagement is important. Much discussion around pace of moving forward with inclusion of young people, but ultimately to agree that it needs to be embraced at all levels (so ensuring pace allows for that). We must ensure there are no barriers to relationships. **Vital to ensure voices of young people are heard***

**The table discussion group sees the reporting relationships as evolutionary, with current consideration (endorsement) to having **IEM inform and facilitate IYAN** who in turn provides feedback back to IEM for consideration/escalation to the International Secretariat and TEC.**

Members tended to **agree on Option 3 that IYAN set** their own outputs and provide feedback to TEC and IEM

Meeting accepted the proposal of Example 3

This option facilitates the voice of the IYAN and the ability to influence the agenda of Grand Council and to have a voice in matters of importance underpinned by effective governance arrangements