St Helena Government

PERFORMANCE REPORT

FOR PERIOD 8 - NOVEMBER 2018
FINANCIAL YEAR ENDING 31 MARCH 2019

Introduction and Overview
Key Performance Indicators

Overview of Performance for NOVEMBER 2018

Introduction

On 5 November 2018, the regulator for St Helena Airport granted an open-ended aeordrome certificate to St Helena Airport Ltd (SHAL). A series of planned audits and checks were conducted by Air Safety Support International (ASSI) at the end of October 2018, and as a result, an open-ended aerodrome certificate was issued.

Throughout this month we saw a great increase from 2 in October to 20 for November, in the number of unplanned electricity interruptions hindered by unfavorable weather conditions.

The Legislative Programme was discussed at the Executive Council meeting held on 27th November 2018. The Programme will be published once minor amendments have been made. Council Committees will then prioritise legislation falling within ther respective remit.

For November we saw 5 scheduled arrival flights and 5 scheduled departure flights.

Summary of Key Performance Indicators

1. Number of stay over tourists for November were 127, making year to date total of 1104.
2. Number of plane passengers were 273, making year to date total of 2134.
3. St Helena Fire & Rescue received a total of 14 reports with an average 7.7 minute response time.
4. 61% of 2 year olds were immunised against those due on census data, and 80% of 2 yr olds were immunised against those due from birth rate.
5. 33% of budget from local revenue.
6. A total of 24 crimes were reported for October.
7. 31.05% of energy generation from renewables, and unplanned electricity interruptions increased to 20.

Corporate Risk Management

Next quarterly update due December 2018

Overall Rag Status		Monthly Progress	⬌	Leading Indicator	⬌

Summary of Financial Performance

Overall Rag Status		Monthly Progress	⬌	Leading Indicator	⬌

Key Revenue and Expenditure Variances
Next quarterly update due December 2018

Overall Rag Status		Monthly Progress	⬌	Leading Indicator	⬌

Capital Programme
No reporting at this point as currently there is no programme.

Overall rag status summary

	October			November		
	Overall Progress	Monthly change 2018/19	Leading Indicator 2018/19	Overall Progress	Monthly change 2018/19	Leading Indicator 2018/19
R	**4**	1	2	**4**	1	2
AR	**1**	0	0	**1**	0	0
A	**28**	26	22	**27**	26	23
G	**14**	20	23	**15**	20	22
UNKNOWN (due to lack of/unavailability of data)	**1**	1	1	**1**	1	1

The above table summarises the data in the report. There are 48 areas outlined in the report and both backward and forward looking RAG ratings have been provided.

For this report information has not been provided for all areas .
8**%** of areas were given a Red rating
2**%** of areas were given an Amber Red rating
56**%** of areas were given an Amber rating
31**%** of areas were given a Green rating
2**%** of areas were given an unknown rating

*Figures may not total 100% due to rounding

METHODOLOGY

For the Performance Report information is provided in four columns.

•The first **("Overall Performance Progress")** is an indicator of progress over the past month relative to expectations at the beginning of the year.

•The second **("Monthly Change")** highlights whether this progress is an improvement, or otherwise, from the previous month.

•The third **("Leading Indicator")** aims to give a snapshot of how progress is likely going forward and provide a early warning system for potential issues.

•The fifth **("Commentary")** aims to provide a succinct overview of each area.

RAG Criteria

Red

Amber Red

Amber

Green
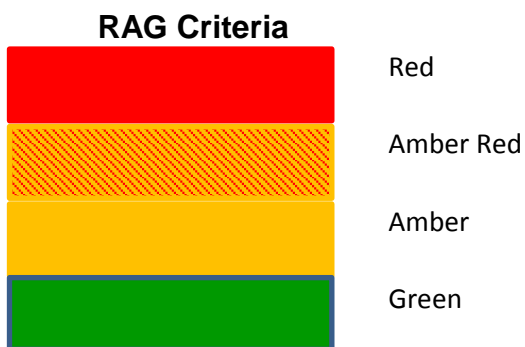
Key to Leading indicator arrows:

Performance improving
Performance maintaining
Performance worsening

No.	National Goal	Directorate Responsible	Performance Indicator/ Risk Mitigation	Benchmark	Target 2018/19	Target 2019/20	Target 2020/21	Performance Update	Overall rag status progress	Direction of Travel (Monthly Progress)	Leading Indicator 2018/19	Notes	Overall Brief Monthly Commentary on Progress/events
1	Altogether Safer	Safeguarding (Adele)	(A) % of referrals received for children's services resulting in 1) assessment 2) strategy meeting 3) section 57 4) no further action (B)% of referrals completed in agreed timescales (quarterly reporting); Looked After Child (LAC) reviews completed in agreed timescales; (C) % of children open to Childrens Services who have an uptodate care plan 1) Child in Need (3 monthly) 2) Child Protection Plan (3 monthly) 3) Looked After Child (6 monthly); (D) Number of children open with a disability; 1) number of cases where direct work is being completed; 2) number of cases with MAPPA involvement	309 referrals received 23% required single assessments Approx. 90% completed within timescale	A. 1) 35% 2) 20% 3) 10% 4) 35% B. 95% C. 100% (1) 100% (2) 100% (3) 100% D. 90%			NOVEMBER: (A) No of referrals 10 1) No. resulting in assessments 4 2) No. resulting in strategy discussions 1 3) No. resulting in S57 enquiries 0 4) No. resulting in NFA 1 (10%) (B) % assessments completed within timescale – not due for reporting yet (C) Up to date plans – 1), 2) and 3) = all 100% Case Breakdown November No. of CIN cases: 32 No. of CP Cases: 1 No. of LAC cases: 2 (D) No. of children open with a disability 5 No. of cases where direct work is currently being undertaken 8 (this does not include work carried out by the Therapeutic Practitioner) No. of cases with MAPPA involvement 11	(orange)	↔	↔		
2		Safeguarding (Rosalie)	Joint visits are conducted with other agencies (Health, OT, MH, Physio etc.)	2016 was 47 OT visits and 2 MH. Currently all joint visits OT, Police, Specialists etc. and MDTs are captured – 2017/18 YTD is 123. All joint visits to be recorded.	60			November - 13 joint visits conducted (Year to date total: 81)	(orange)	↑	↑		
3		Police	Reduce Overall Crime	The figure will not be set until the end of the current PPY as the figure for the current year plays a part in setting the figure. In any case, the figure will be divided by 12 and monitored on a monthly basis.	Less than five year average The target is 240 crimes a year which is an average of 20 crimes per month.	Less than five year average	Less than five year average	November- 24 crimes	(green)	↑	↔		

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4a		Police	Improving community trust and confidence in the services provided by the Directorate		80% satisfaction level from those surveyed.	80% satisfaction level from those surveyed.	85% satisfaction level from those surveyed.	November : 0 call backs, 5 surgeries completed. 25 hrs community engagement hours	🟩	⬌	⬆		
4b		Police	Working with partners, volunteers and stakeholders to maintain public safety and our responses to incidents		100 Road Traffic Collisions (RTCs) or less	100 RTCs or less	100 RTCs or less	November = 10% reduction in RTCs 3 in total	🟧	⬆	⬌		
5		Police	The St Helena Fire and Rescue Service will provide an immediate response to all related emergencies	Monitored on a monthly basis based upon the number of calls attended.	Attendance within 12 mins for the first appliance	Attendance within 12 mins for the first appliance	Attendance within 12 mins for the first appliance	November: 14 reports received with an average 7.7 minutes response time.	🟩	⬆	⬆		
6		Safeguarding (Wendy)	Number of older persons (over 65) who are admitted to residential/sheltered accommodation - Reduce the number of admissions compared to the previous year	13 admissions in residential/sheltered accommodations for 2016/17 (3 in sheltered and 10 in residential)	15 admissions			0 Admissions to residential 1 Admission into Sheltered Accomodation	🟧	⬆	⬌		
7		Safeguarding (Nicolene)	% of eligible clients engaging in Day Care or Overnight Respite on at least three occasions per calendar month.	Monitoring of respite/day care provision would allow us to monitor this against our home support figures – ie should home support reduce as respite/day care increases?	65%	70%	90%	74% engaging in day care No overnight respite available at this time	🟩	⬆	⬌		
8		Safeguarding (Rosalie)	% of those receiving Home Support/Home care who have had a review within the specified timeframe.	Adults and Older adults 81.5%	Record on a quarterly/yearly basis (financial year) Target = 90%			Qtr (Sept/Oct/Nov) - 15 reviews completed in this quarter (will only be able to report a yearly percentage given that reviews can be done in 12 m period)	🟧	⬆	⬌	Quarterly	
9		Safeguarding (Rosalie)	All adult social care assessments to be completed within the specified timeframe.	82 assessments completed	50 assessments			15 assessments completed all in specified timeframe	🟧	⬆	⬆		
10		Health	**Vaccination Coverage** Children at 2 years of age, up to date with vaccinations. Measured as a) % of 2 year olds immunised against those due on census data.(Aim = >90%) b) % of 2 year olds immunised against those due from birth rate.(Aim = >100%)	2017/18 data a) 85% of 2 year olds (against Census data) b) 102% of 2 year olds (against birth rate)	a) ≥ 90% b) ≥ 90%	a) ≥ 90% b) ≥ 90%		November 2018 YTD a) 61% b) 80%	🟩	⬆	⬌		

Performance Summary

No.	National Goal	Directorate Responsible	Performance Indicator/ Risk Mitigation	Benchmark	Target 2018/19	Target 2019/20	Target 2020/21	Performance Update	Overall rag status progress	Direction of Travel (Monthly Progress)	Leading Indicator 2018/19	Notes	Overall Brief Monthly Commentary on Progress/events
11		Health	**Diabetes** a) % of registered diabetes clients who have had their HbA1c tested at least once during the preceding year.(Aim = >85%) b) % of registered diabetics with "Good Control". (Aim = >50%)	**a) 75% (2015 data)** **79% (2017/2018)** **b) 34% (June 2015 Data)** **46% (2017/2018)**	a) ≥90% b) ≥60%	a) ≥90% b) ≥60%		a) 68% b) 51%		⟷	⟷		
12		Health	**Obesity: Early detection and prevention or reduction of obesity amongst resident population of St Helena** (a) % of Children who are overweight or obese when measured on an annual basis in school. (b) % of adults with a BMI >25 out of all patients seen. (c) % of adults with a BMI >25 out of all patients who had BMI check	**Accurate baseline to be established for** **(a) 53% of school children overweight or obese** **Overweight = 34%;** **Obese = 19%** **N=372 school children weighed March 2017 Boys=191 Girls=181** **• Boys (51%): overweight = 33%; obese = 18%** **• Girl (54%)s: overweight = 34%; obese =20 %** **(b) 23% (222 with excess weight out of 978 patients seen)** **(c) 74% of all BMI's checked have BMI >25 (222 out of 298)**	a) 5% reduction in recorded percentage of overweight children in 2018 b) 5% reduction in % of adults with BMI >25 c) ≤70% of recorded BMI among adults is >25	a) 5% reduction in recorded percentage of overweight children in 2019 b) 5% reduction in % of adults with BMI >25 c) ≤70% of recorded BMI among adults is >25		(a) 31% of school children overweight or obese. (137 out of 449) Overweight = 11%; Obese = 19% N=449 school children weighed. Boys = 226 Girls = 223 • Boys TOTAL 31%; overweight = 12%, obese = 19% • Girls TOTAL 30%; overweight = 10%, obese = 20% b) 31% (1121 out of 3572) c) 76% (1121 out of 1469)		⟷	⟷		

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13	Altogether Healthier	Health	**Obesity - Structured Interventions** **% of children and adults identified during health assessment as being overweight who receive support through a structured intervention.** **Children** a) % of children identified with excess body weight (149) receiving brief intervention b) % of children identified with excess body weight referred for specialist advice that received specialist advice **Adults** a)% of adults identified with excess body weight receiving brief intervention b) % of adults identified with excess body weight receiving specialist dietetic advice	**Children** **a) Baseline in July 2017: 0** **b) Baseline in July 2017: 2 (100%)** **Adults** **a) Baseline in July 2017: 1** **b) Baseline in July 2017: 3 (100%)**	a) ≥60% of children with excess body weight receive brief intervention b) ≥60% of children with excess body weight receive brief intervention	a) ≥70% of children with excess body weight receive brief intervention b) ≥70% of children with excess body weight receive brief intervention		Children a) 18% (24) b) 0% (No specialist in post) c) 0% (No specialist in post) Adults a) 40% (451 out of 1121) b) 0% (No specialist in post) c) 0% (No specialist in post)		⬌	⬌		
14		Health	**Safe provision of an appropriate range of Mental Health services on island** a) Waiting times for mental health first follow-up appointments once deemed clinically necessary b) Waiting time for first follow-up clinical psychology apppintment once deemed clinically necessary c) Caseload per qualfiied mental health practitioner d) % of cases per practitioner with care coordination rating of 4 & 5	**Baseline to be established March 2018**	a) ≤3 days b) ≤7 days c)≤40/practitioner d) ≤25%	a) ≤3 days b) ≤7 days c)≤40/practitioner d) ≤25%		Current data provided does not correspond with KPIs provided (being dealt with) a) b) c) 59 d)					

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15	Health		**Access to Healthcare** **1. General Hospital (Secondary Health Care)** a) No of general admissions to hospital (YTD) b) Number of surgical admissions(YTD) **2. Total number of different patients per month that accessed Primary Health Care to see** a) Doctor b) Nurse c) Overall **3. Total number of different patients per month that accessed Primary Health Care at** d) Half Tree Hollow e) Longwood f) Levelwood **D=Doctor** **4. Total number of occasions per month that patients with a registered disability were seen by a Doctor** **5. Total number of home support visits for palliative / end-of-life care**	**1(a) = 2000** **1(b) = 30** **2 (a)** **(b)** **(c)** **3 (d)** **(e)** **(f)** **4. Awaiting info from Safeguarding to determine stats.** **5. 20 (Nov 2016)**	Target to maintain services at basline level of 4 consultations/person/year	Target to maintain services at basline level of 4 consultations/person/year		1 a) 224 b) 298 2 a) 2863 b) 2917 c) 3572 3 d) D = 435 e) D = 193 f) D = 50 4. Figures soon to be collated. 5. 67		⬆	↔		

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16	Health	Health	**Encourage Smoking Cessation** a) % of all patients who have had their smoking status screened b) % of screened smokers seen in clinics receiving brief intervention c) % of screened smokers who set firm quit date d) % of screened smokers seen in clinics receiving specilaist advice e) % of treated smokerswho remained quitters at 13 weeks verified by CO monitoring f) % of treated smokers who remained quitters at 4 weeks monitored by CO g) % of treated smokers that are self-reported 4-week quitters h) Number of treated smokers [a treated smoker is a smoker who undergoes at least one treatment session on or prior to the quit date and sets a firm quit date. Smokers who attend an assessment session but fail to attend thereafter would not be counted. Neither are smokers who have already stopped smoking at the time they first come to the attention of the services] i) 4-week quit success rate [Number of 4-week quitters verified by CO/Number of treated smokers] j) 13-week quit success rate {Number of 13-week quitters verified by CO/Number of Treated Smokers}	**a) 37%** **b) 1%** **c) unknown** **d) 5%** **e) unknown** **f) unkown** **g) unknown** **h) unknown** **i) unknown** **j) unknown**	a) 50% b) 20% c) 30% d) 30% e) 40% f) 40% g) 40% h) *** i) ≥ 40% j) ≥ 40%	TBD		a) 762 b) 105 c) 59 d) 0% e) 79% f) 2% g) awaiting data h) awaiting data i) awaiting data j) awaiting data		⬇	⬇		
17	ENRD	ENRD	Social Housing - Increase the social housing stock.	**184 social houses (Jan 2017)**	**Require target**					⬌	⬌		Pilot House for GLH has been authorised by ENRC for tender at HTH. It is anticipated building work will commence January 2019 and completed April 2019, Planning permission being sought for 4 plots in New Ground.
18	ENRD	ENRD	**Plants and Wildlife .** Monitor the health of St Helena's marine and terrestrial habitats, to make sure they do not decline ie that we don't lose any of the endemic life there and we maintain the environment in which these endemic animals and plants live.	**Benchmarking done for 21 terrestrial and 22 marine in 2015/16)**	5% of high value native habitat managed 95% not under management monitored to assess rate of decline					⬌	⬆		Nursery work at Scotland and Peaks continues ; Nurseries for Nature project fern propagation final report, project end December 2018. Transplanting of endemic in living gene banks and wild habitat. Ongoing work with LEMP project, propagation of endemics to supported restoration work. Critical habitat ecological restoration work continued on 5% of target sites of high endemic diversity value with special focus on flax clearance on the central ridge ongoing

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19	Altogether Greener	ENRD	**Environmental Protection** - St Helena's environment is protected through the implementation of the Environmental Protection Ordinance (EPO) enabling the conservation of biodiversity, regulation of trade in endangered species and the control of pollution, hazardous substances, litter and waste.	**10% of the required supporting policies, guidelines and procedures have been formally adopted and or are in place to facilitate the implementation of the EPO (Jan 2017)**	Formal adoption of at least 50% of the secondary legislation and supporting policies, guidelines and procedures to facilitate implementation of the EPO by March 2019			The (revised) Policy for collection, propagation and distribution of endemic/native plants (Plant Propagation Policy) was approved by ENRC in their November meeting.		↔	↔		General awareness of the EPO continues through provision of advice to potential researchers, project staff, SHG staff, potential developers and the general public. The revised Plant Propagation policy was approved by ENRC in their November meeting. Work continued on developing the supporting documents to assist with implementation of the plant propagation policy. Implementation will begin in January. The review of the whale shark interaction policy and guidelines (now the marine species interaction policy) continued. Issues relating to the EIA process are still to be resolved/ addressed. 2 Export Permits were issued. A pollution incident occured which is still being followed up.
20		ENRD	**Waste Management**	**Equally sized domestic waste cells last for approximately 1 year**	5% increase in domestic waste cells life					↔	↑		Charging for waste approved by ENRC, due implementation on 1st January 2019. Waste Prevention Campaign planned for December 2018 now delayed until February 2019 due to staffing constraints. No other significant change to date; glass recycling continues as per agreement with Private Sector partner. OCTA Anaerobic Digestion Project proceeding. DEFRA Marine Debris (Plastics Recycling) Project proceeding, with wheelie bins for recyclable plastic waste due distribution in February 2019.
21		ENRD/Connect	**Energy Use**	**More efficient use of energy per head of population**						↔	↑		The Power Purcashe Agreement for increasing renewable generation continues to be progressed.
22		ENRD	Increase Land available for Housing through the development of the CDA's and individual site identification.		Release 60 plots by the end of 2018.					↔	↓		Designs for Bottomwoods CDA underway. Working with Connect and other stakeholders to overcome sewerage issue which is effecting all residential development on every CDA. Therefore it is ulikely any plot sales will be achieved this year.
23		Education	**Primary Education** % of Year 6 pupils assesed as performing at or above Age Related Expectations *NOTE: New measure which reflects changes in assessment policy in the English National Curriculum*	**English 50% Maths 30% (July 2017)**	English 60% Maths 60%	English 65% Maths 65%	English 65% Maths 65%	**August 2018 RESULTS** English 56.1% Mathematics 41.5%		↔	↔	Reported on academic year	In October 2018, schools worked to analyse the data and incorporate their findings into the new 2018/19 School Improvement Plans. Schools are now working towards achieveing the set targets.

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24	Altogether Better for Children and Young People	Education	**Inclusion** % of students on Special Education Needs (SEN) Register with active Individual Education Plan (IEP) (*IEPs are the learning plans that spell out what steps the school will take to meet the needs of children with special education needs or disabilities. They document both the child's needs and the actions to address them and the targets that the child is expected to meet*) *NOTE: Final assessment to be made at end of academic year*	**new measure**	100%	100%	100%	100%	🟩	⬆	⬆		With the SEND policy approved, work has commenced on a Code of Practice to guide full implementation of the policy. The Head of Inclusion has completed Play Therapy training.
25		Education	**Secondary Education** % of pupils achieving 5 GCSE A*-C including English and Maths (or the equivalent grades on the new 9-1 GCSEs)	**22% (Aug 2016)**	45%	50%	50%	45%	🟧	⬆	⬆	Reported on academic year	PAS is developing the 2018/19 School Improvement Plan. Head teacher has completed headship qualification.
26		Education	% of teachers qualified to Level 4+	**33.3% (March 2017)**	50% of teachers qualified to Level 4+	70% of teachers qualified to Level 4+; 40% of teachers qualified to Level 5+	75% of teachers qualified to Level 4+; 50% of teachers qualified to Level 5+	50%	🟧	⬆	⬆		Three new teacher trainees began their training in September, and in October began their academic course with the Open University.
27		Education	St Helena Community College provides a range of general, technical/vocational, professional and higher education programmes to meet the needs of the local economy. *NOTE: Because the enrolment cycle of the SHCC operates on the academic year, this data should be reported and KPI assessed on the basis of the academic year ending in the financial year. Thereafter, regular updates in the narrative can provide details on progress toward the upcoming year's performance.*	**a) SHCC Courses offered: 159 courses b) General/Community 27 General/Community(accredited) 39 c) Higher Education 36 d) Professional 10 e) Technical/Vocational 47 f) 273 student/course registrations from 1/9/2016 - 20/2/2016. g) 363 students enrolled in SHCC programmes to date.**	Annual Training Needs Assessment completed. 100 courses offered (with information on accreditation status and level) 400 course registrations	Annual Training Needs Assessment completed. 100 courses offered (with information on accreditation status and level) 450 course registrations	Annual Training Needs Assessment completed. 100 courses offered (with information on accreditation status and level) 500 course registrations	2017 Training Needs Assessment used to inform planning. More than 200 courses offered 114 courses with active enrolment during year Community Education: 52 courses, 25 accredited Higher Education: 17 courses; 16 accredited Professional Studies: 16 courses; 15 accredited Technical/Vocational: 26 courses; 24 accredited 532 students registered (Academic Yr ending 8/18) 831 course registrations (Academic Yr ending 8/18) 106 registrations in accredited L1 - L2 core skills courses (English, maths, ICT)	🟩	⬆	⬆	Data reported on academic year	SHCC's second year built on the success of its' first year of operation, with more courses offered and registrations slightly up. Although the total number of students declined slightly, those students registered for more courses in total. The 2018/19 academic year saw the launch of a wide array of new courses, with very positive indicators for a successful third year of operation.
28		Safeguarding (Rosalie)	Number of people who we are supporting on our employability scheme	**Benchmark Year 1 (2017/18 = 21)**	21			27 people are supported on our employability scheme	🟩	⬆	⬆		

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29		Corporate Services (Corporate Support - Carol)	% of Report It Sort It reports acknowledged and allocated for action within 3 working days of receipt	95%	100%	100%	100%	3 reports were received for November 2018 and all reports were acknowledged and allocated for action.	Green	↔	↑	Monthly	
30		Corporate Services (Corporate Support - Carol)	Number of people making use of the public transport service	18070 tickets sold (2013/14)	Further 10% increase	Further 10% increase	Further 10% increase	6232 tickets were sold for Apr-Jun 2018. 6189 tickets were sold for Jul - Sept 2018	Green	↑	↑	Quarterly	
31		Corporate Services (Corporate Support - Linda B)	Revised timetables for the Public Transport Service to make provision for Park and Ride schemes into Jamestown.	No Park and Ride Scheme exists at the moment.	Commence March 2019			No further progress since last reporting period.	Amber	↔	↔		
32		Corporate Services (Corporate Support - Linda B)	% of requests for information dealt with in accordance with the Code of Practice for Access to SHG	Baseline to reflect 2016/17 Performance of 40%	90%	95%	95%	There were no requests for information for November 2018.	Green	↔	↑		
33		Corporate Services (Statistics Office)	Number of stay over tourist visitors to the island	2,527 (2012/13) 2,054 (2013/14)	1,959 (2017/18) 10% increase (195.90) Target - 2,154.90	10% increase on 2018/19	10% increase on 2019/20	November 2018 No. of Stay Over Visitors – 127 2018/19 YTD: 1,104 No. of Plane Passengers – 273 2018/19 YTD: 2,134	Amber	↑	↑		
34		Connect St Helena (Barry)	Sustainability % of energy generation from renewables	9.13% (2012/13)	40%	80%	80%	April = 21.53% May = 26.47% June = 20.13% July = 20.45% Aug = 31.09% Sept = 31.62% Oct = 26.58% Nov = 31.05%	Amber	↔	↑		Performance has being helped by favourable weather conditions.
35		Connect St Helena (Barry)	Reliability Unplanned electricity interruptions per annum	146 (2012/13) 134 (2013/14)	95	90	85	April = 6 May = 3 June = 10 July = 6 Aug = 20 Sept = 10 Oct = 2 Nov = 20	Amber	↔	↔		Performance has being hindered by unfavourable weather conditions.

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36		Air Access (Janet/Richard)	Regularly scheduled flights to St Helena	Airport open and operational but in 2016/17 catered only to charter and medevac flights	Minimum of a weekly scheduled flight to St Helena	Minimum of a weekly scheduled flight to St Helena plus ability to schedule additional flights as required	Minimum of a weekly scheduled flight to St Helena plus ability to schedule additional flights as required	The total number of flights for Period 8 (November 2018) is summarised below: Type Arrival Departure Scheduled 5 5 Charter Calibration Medevac **Total** **5** **5**		⬆	⬆		Flight on Saturday 17th November was cancelled due to weather and operated on 23rd November. Normal flight operations resumed Saturday 24th November.