

# RULING OF THE MARITIME DISCIPLINARY COURT OF THE NETHERLANDS OF 20 JULY 2022 (NO. 1 OF 2022) IN THE CASE 2021.K1– HEGEMANN II

On the complaint of:

A.J. C.,

the complainant, referred to below as: the complainant or AB 1,

versus

J.R. C., the person concerned, referred to below as: the person concerned or the captain,

lawyer: O. Yesildag, LL.M.

# 1. The course of the proceedings

On 19 June 2021, the complainant lodged a complaint with the Disciplinary Court against the person concerned in his capacity as captain of the vessel Hegemann II, sailing under the Dutch flag. The complaint was accompanied by a copy of the Human Environment and Transport Inspectorate (ILT) investigation report dated 9 June 2021.

In its ruling of 29 July 2021, the President of the Disciplinary Court decided to open a preliminary investigation under E.R. IJssel de Schepper, member of the Disciplinary Court. The final report of this preliminary investigation was sent to the complainant and the person concerned on 21 October 2021.

By letter of 25 January 2022, counsel for the person concerned submitted a defence. On 31 January 2022, the complainant replied in writing. By letter of 15 February 2022, counsel for the person concerned submitted a rejoinder.



The President of the Disciplinary Court stipulated that the oral hearing of the case will be held at 10.30 hours on 25 May 2022 at the offices of the Disciplinary Court in Amsterdam.

The hearing took place at that place and time. The complainant appeared at the hearing. The person concerned also appeared, represented by his counsel.

# 2. The background

The complaint was filed concerning the following accident on the Dutch trailing suction hopper dredger Hegemann II, part of the fleet of Hegemann GmbH – Dredging (hereafter: the vessel).

Early in the morning on 7 July 2019, the complainant, who worked as a seaman on the vessel, was found lying at the bottom of, or at least near, the stairs of the vessel's pump room. He had gone to the pump room to start the engines. The complainant appeared to still be responsive. He had no external injuries but was suffering head/neck/back pain. He was helped up and escorted to his cabin, where he lay down in his sleeping berth. At about 10.00/10.30 that morning, the vessel docked in the port of Stepnica, Poland. From there, he was taken by ambulance to a hospital. Before docking in Stepnica, the vessel made several short dredging trips. The vessel's crew consisted of four people in total. The person concerned was captain of the vessel.

# 3. The complaint

According to the complainant, the person concerned acted or omitted to act in violation of the care he should have exercised as a good seaman towards him as a seafarer (Article 55a of the Seafarers' Act). According to him, the person concerned acted inadequately, indifferently and negligently concerning the accident and provided minimal care.



The complainant argued that he fell down the stairs and passed out but that the person concerned only examined him briefly and then decided that he did not need acute medical care. The person concerned then started unloading and dredging. The person concerned did not consult the Emergency Manual, seek medical advice or mediation from the Radio Medical Service (RMD) or contact the DPA. According to the complainant, this exposed him to physical and mental pain/stress for an unnecessarily long time (five hours).

### 4. The position of the person concerned

The person concerned disputes the complaint. According to him, he acted adequately and with due care under the circumstances and therefore did not violate the standards of good seamanship. He points out that the ILT, which investigated the accident, shares this view.

The person concerned gives as his version of events that after the accident, he and the crew gave first aid and examined the complainant for injuries, which he did not visibly had. The complainant was conscious and lucid, could answer all questions and could move his arms and legs. He also went the stairs on his own, without support, and walked to his cabin, after which the person concerned agreed with the crew that the complainant's condition should be monitored every ten minutes, which is what the person concerned says happened. The complainant indicated that certain complaints were diminishing and others were still present, giving the impression that everything was not too bad. This was reason enough for him to decide that a doctor should examine the complainant but that this did not have to be done immediately.

The person concerned also argues that he did call the foreman of the project on site immediately to arrange for the complainant to disembark. Since, in the person concerned's opinion, there was no emergency (according to him, there was no question of a fall from height or serious injuries), he did not consult the Emergency Manual and did not contact the RMD. The person concerned did not contact the DPA either, as they were in Bremen and would



probably have referred to the project foreman. The person concerned further points out that the complainant was already suffering from back problems before the accident and had just come off sickness benefits.

If the complaint is (partly) upheld, the person concerned asks the Disciplinary Court to consider that this is the first time he has been confronted with an incident, that he has learned from it and that the accident has left its mark on him.

### 5. The ruling of the Disciplinary Court

5.1 The means of evidence

In assessing the application, the Disciplinary Court takes the following evidence as its starting point:

A. The statement of the person concerned at the hearing, in so far as it states:

"I treated the complainant like any other crew member; I treat them all well and normally. The complainant could move and answer questions. We do not know whether he had been unconscious. Calling the DPA would not have changed anything. The project foreman was the closest and spoke Polish. The project foreman arranged for an ambulance. In the meantime, I made two more trips. As soon as I heard that the ambulance was on its way, we put straight into port. To my mind, it was not an emergency. If it really had been an emergency, I would have called the traffic control centre, ordered an ambulance to the harbour, and put in straight away. In retrospect, perhaps I should have gone straight to the harbour. I think it is fine to leave it to a doctor to decide how to act next time.

We checked every ten or fifteen minutes at the complainant's cabin to see if his condition was getting worse. The complainant was kept informed of what we were doing for him. I told him that I would call the company immediately. When that contact was made, the company (the



foreman) immediately decided to send an ambulance. Of course, I had no objection to that, but as far as I was concerned, they could have just sent the doctor. In retrospect, in future, I will call the DPA first. I do not think I was negligent in not calling the RMD in this situation. Although we are not medics, we worked in a group of three people and consulted each other. I have been trained in medical care. I now understand that it would have been better if I had called the RMD. There is no question of my not having taken the complainant's physical and mental condition into account. He did not make it known that he felt abandoned. We are grown-ups, after all. Should I have held his hand all day? Also, contact was maintained by app. As I said, we kept an eye on him and kept him informed.

In the port of call, you can communicate with the port authority in English. I did not call the port authority to ask for a blood pressure monitor and neck collar. Considering where the complainant was found, I do not think he fell completely from above. I show you pictures of the situation on the ground. The staircase has ten steps."

B. A statement prepared/signed by the person concerned dated 7 July 2019, to the extent that it reads:

"On 07–07–2019 around 05:30 the engineer, AB 2 (the other AB), AB 1 (the complainant) and the captain started our working day on the Hegemann 2. Around 05:50, the captain was called to the bridge by the engineer from the pump room with the message that AB 1 had fallen down the stairs and was lying there. When the captain arrived at the front of the pump room, the engineer and AB 2 were already doing their first aid, which showed that AB 1 was conscious and could move everything but had pain in his back, neck and head. Then AB 1 got up with our help and left the pump room on his own, with the engineer walking in front of him and the captain behind him. Once there, AB 1 went quietly to his cabin and lay down on his bed. The captain then sought contact with the project foreman and the building supervisor, which did not immediately succeed, but eventually the project foreman



called back and directly arranged for a doctor with an ambulance. In the meantime, we sailed with the Hegemann 2 to the port of Stepnica, where we arrived around 10:15 hours, once there the ambulance arrived and the doctor took over the care, and they took AB 1 to hospital (...)."

C. An e-mail message dated 9 July 2019 09:28 from the project foreman (regional manager Eastern Europe of Hegemann GmbH) to Th. B. of Detlef Hegemann B.V., insofar as containing:

"Please be informed that AB 1 (...) on 07.07.2019 at ca. 05:45 o'clock fall down on the stairs in machine room on Hegemann II. He was feeling very bad and an emergency ambulance was being called to Hegemann II in port of Stepnica. I also talked to the doctor of the ambulance who decided to take him to the hospital to do a detailed medical test and the necessary ultrasound scan. (...) On 07.07.2019 in the evening I was also in the hospital and talked to AB 1 and doctor who decided to leave him for one day in the hospital for observation. The doctor confirmed that there are no broken bones or cracks on the bones. In the hospital they put a neck brace around his neck and switched on the medical equipment. In the hospital, his blood pressure was above normal, said doctor. On 08.07.2019 the doctor at the hospital decided to let him out of the hospital. (...)."

D. An e-mail message dated 31 January 2020 10:18 hours from the project foreman to Ms K. van der Wal, senior inspector ILT, insofar as it concerns:

"(...) i estimate that i have been informed per telephone round about 09:30 o'clock in the morning. (...) Dredger Hegemann II has arrived to the berth inside port of Stepnica at 10:15 o'clock in the morning and ambulance was waiting on the berth. (...)"

E. The report of the telephone interrogation of the captain as a witness, drawn up by the ILT on 1 June 2021, insofar as it contains:

# TUCHTCOLLEGE VOOR DE SCHEEPVAART

"AB 1 fell down the stairs. I have not been there. I do not know what happened, and he couldn't tell me that himself. The accident occurred around six o'clock in the morning, when the engines were started. I was in the wheelhouse starting everything up. At one point, the engineer came to the wheelhouse to say that AB 1 had fallen down. AB 2 was already with AB 1. The three of us checked what was wrong. That was also around six o'clock in the morning. We applied first aid and asked what had happened and his name. He was still joking about that. We looked to see if there were any injuries, but did not notice any. (...) I told him to lie down on his bed. I do not know if he had been unconscious. We discussed the use of external medical assistance. Because AB 1 could walk to his cabin by himself, I did not think it necessary to call in ambulances and helicopters. I contacted the project foreman and I think also the building supervisor, but I am not sure whether I actually spoke to him on the phone at the time. I do not remember what time I was in contact with these people. It was a few hours after the accident. I did not contact Hegemann's DPA because I did not think it was necessary to set off all the alarm bells at once. The vessel made several more dredging trips to the lake before AB 1 disembarked for the ambulance. We just went to work. We went to see AB 1 about every ten minutes. He also sent me messages on his mobile phone saying, "Thanks for your help" and "Sorry for the inconvenience". I did not feel there was any urgency for AB 1 to see a doctor. He only complained of headaches and pain in the back.

I did not consider contacting the RMD because we applied first aid together with the crew, he was able to walk up the stairs of the pump room and went to his cabin by himself. I did want him to disembark to have someone look at him, but not in five minutes. When AB 1 was in his cabin, the crew checked on him about every ten minutes. Once in his cabin, we did not provide any medical assistance. When we went to see him, we asked how he was doing. And every time, we got a normal response.



A procedure on how to act in the event of an accident is available on board. We had a project form at that time. It contains all the procedures, including what to do in case of emergency. It also contains the emergency numbers. We also have an Emergency Manual on board, but given the situation, I did not use it. The project form does not state how to act in the event of an accident at work. It depends on the situation. On board, there is a first aid booklet of the Oranje Kruis. I did not consult it.

I did not administer any medication, including painkillers/paracetamol. The project foreman went to the hospital. No one went with him in the ambulance. After AB 1 was transferred to the ambulance, we, the crew, did not have any further involvement with him. I only had some Whatsapp contact with him to ask how he was doing."

F. The written statement of the engineer dated 21 December 2019, which statement was made in the context of the (ILT) investigation and was also signed by AB 2 and the captain, to the extent that it contains: "On 7 July 2019 around six o'clock in the morning, I found my colleague AB 1 in the pump room, violently coughing and in a half-sitting foetal position, about 1.5 metres starboard of the stairs on the floorboards. I tried to speak to him, but because of the coughing, I could not really make contact with him. It was clear to me that he was conscious and breathing. I called my colleague AB 2, who was standing on the jetty to cast off, and informed the captain via the intercom. Then I went back to AB 1. The coughing had subsided. It was not clear to me whether this was due to smoking or some other cause. I got in touch with him. Meanwhile, the other two colleagues had also arrived. We reassured AB 1 and asked a few questions to find out what his condition was (What happened? /Where does it hurt: head and back/Do you know where you are: correct answer) What is your name? He answered "Paarde lul" [donkey dick]. We took this as a sign that he was alert. We looked at AB 1's back and saw no injuries or bruises. This, too, was a bit unclear because AB 1 had just been home for three weeks due to a back injury



and had only been back on board for four days. We also examined his head. We did not find any injuries or bruises at the places indicated. Then we left AB 1 where he was, after discussing this with him. I sat behind him to support him while he recovered from the shock and after a few minutes, AB 1, with a little help, stood up, walked to his cabin, and lay down on his bed. Every ten minutes, one of us went to AB 1 to assess his state of mind, and it remained stable. He himself telephoned the captain to explain a few things. On arrival at the port, AB 1insisted on packing his own bag. He sat up straight. I helped him pack. After being treated by the ambulance staff, AB 1brushed his teeth himself and made to put on his trainers. The captain pointed out to him that putting on his work boots was easier. AB 1disembarked on foot with the ambulance crew and got into the ambulance. AB 1later thanked me via the App for my help."

G. The report of the telephone interview of the engineer as a witness, as drawn up by the ILT on 27 May 2021, insofar as it concerns:
"I do not know what accident AB 1 had. He himself did not know either. Several things may have happened. It is true that I found AB 1 in the pump room.

I had started everything aft, and then we cast off. Then I look to see smoke coming from the chimneys fore. That shows me that they have also started that one up. I did not see any smoke, so I went to look in the front of the pump room.

I found AB 1, on the SB side of the stairs, about 2 metres away, half sitting, half lying, in a kind of foetal position. He was coughing. In my opinion, he was conscious. I spoke to him but didn't really get an answer because of the coughing. He was breathing, but his condition was not as usual. I looked to see if I could make contact with him and called the other crew. I went outside and called AB 2. I alerted the captain on the bridge via the intercom. Then I went below again. I sat down with him, and we asked him some questions. He responded well to that; he also made some jokes. We briefly examined the places



where he had complaints. We did not find any scratches or bruises. He got up, walked up the stairs by himself, and went to his cabin. The captain and I discussed calling in external medical assistance. We also intended to contact the construction manager, the project foreman, and as soon as we could, we would enter the port of Stepnica. In Poland, nobody speaks English or German. It is difficult to call an ambulance just like that; they don't understand. There was not enough urgency to call in a helicopter, for example. I do not know who decided that.

I do not recall any contact with the RMD about AB 1's situation. I do not remember when contact was made with the company or the project foreman.

When AB 1 was in his cabin, we talked to him every so often and checked on his condition. He himself had App contact with the crew from his cabin. I estimate that we went every ten minutes to fifteen minutes. I also went to see him. I did that in consultation with the captain. Then I spoke to him and saw how he reacted.

We did not feel there was any urgency for AB 1 to see a doctor. We did not think that anything terrible was going on. Also, he wanted to get his own bag and sit up straight."

Code	Description
()	()
7	(5) Coastal waters whereby the
	offshore distance does not
	exceed 5 nautical miles and the
	sailingtime from the port of
	operation, mentioned on the safe
	manning certificate, shall be
	within 12 hours and shall not be
	more than 6 hours from a port of
	refuge.

H. Annex I (Trading Areas) van het Minimum Safe Manning Document:



### I. Emergency Manual:

# 2.4 Rescuing the iniured

Situation	Responsible	Measure	Means
1 <sup>st</sup> aid	Chief Officer	Have first-aid kit brought to injured	1st aid kit
		person.	
		Proceed with first aid (respiration,	
		heart, stable position, bandage	
		wou <mark>nds).</mark> Caution, do not lift, carry or	
1		mov <mark>e anyo</mark> ne who has fallen from	
		a height!	
Safeguard		Alleviate pain (painkillers), calm injured	Painkillers
injured person		person. Request outside medical help	Blankets
		immediately if person has fallen from a	
		height with suspected back injuries	VHF radio
Rescue from		Rescue injured person and bring to	
room		sick bay. When back injuries suspected,	
		only change position in	
		emergency.	
		➔ Request outside medical help	
Sick bay	Chief Officer	Place injured person on bed. Examine	
		injured person. Breathing, pulse, blood	
		pressure, temperature, responsiveness,	
		reflexes etc. Record everything in	
		writing. Possibly request help by radio	



### 2.8 Severe injuries/diseases

Situation	Responsible	Measure	Means
Diagnosis	Chief officer and	Do not reach premature conclusions	Health care
	captain	from symptoms! Consider all	manual
		possibilities! Incorrect treatment	
		usually results from premature	
		conclusions and one-sided	
		examinations!	
Advice from	Captain	Collect all facts and data. Ask for radio	
radio doctor		doctor assistance on coastal radio. To	Radio, GMDSS
1		this end, observe patient as accurately	
		and comprehensively as possible.	
Treatment	Captain/ chief	Treatment according to health care	
	officer	manual. Take notes of type of	Patient's
		treatment and administered	record
		medication stating name, dose	
		administered and point in time.	
Treatment in	Chief Officer	Write down all the facts, data and	Letter with
port on land	/captain	course of the illness in a letter for the	details
		doctor. Ask doctor for an examination	
		report and treatment schedule.	
		Accompany patient in severe cases	
		and where language problems.	

- J. The conclusion of the ILT in the report of 9 June 2021: "Conclusion: The crew, in particular the captain as the person ultimately responsible for the vessel, did not act contrary to the standard of good seamanship. However, there are things that could have been done better or differently:
  - 1. Although the complainant may have created the impression on board that everything was not that bad, the captain would have been better



off consulting the Emergency Manual. That manual describes what to do in the event of a fall from height and a suspected back injury.

- 2. It is necessary to seek medical help from outside. Since the regional manager was (temporarily) unavailable by phone, the captain could have contacted the RMD and asked for medical advice. The RMD is available 24/7. The RMD could also have intervened, via the Dutch Coast Guard, to arrange an ambulance.
- 3. Another option would have been to inform the company's DPA directly. The DPA could also have helped to arrange an ambulance.
- 4. It would also have been advisable to sail directly to the port of Stepnica from the unloading dock instead of making several dredging trips first. In this regard, a medical situation should outweigh economic interests."

K. The sworn statement of AB 2 made to the preliminary investigator, in so far as it concerns:

"Disciplinary Court: on the question: What was his condition] (...) he was a bit confused (...) And he was feeling short of breath. (...) We were with him every 10 minutes to 15 minutes. (...) [Disciplinary Court: When asked why the situation was considered so serious that AB 1 had to be watched every quarter hour:] Because of his confusion I guess. (...)'

L. The sworn statement of the engineer made to the preliminary investigator, in so far as it concerns:

"[Disciplinary Court: To the question: if AB 1 fell down the stairs, from what height could he have fallen?] (...) you can stand on it straight 2–2.5 metres or so. (...) maybe you will slide down."

The captain's statement to the preliminary investigator, in so far as it contains:

"He said [Disciplinary Court: that he had pain] in his back and on his head. He said: I have a headache, and I have a backache. (...) I cannot measure his blood pressure. We do not have that on board. (...) "



N. The sworn statement made to the preliminary investigator by a doctor, associated with the Radio Medical Service, in so far as: "(...) I will go over the exploratory neurological examination with the captain. That is: take an intense flash light and compare the eye pupils. (...) That was one thing, and the second thing is that coughing. (...) That, too, may be the result of being unconscious (...) Then there is a third thing that comes to mind: that is that, because of that not quite clearly reconstructed fall down a flight of stairs and having pain in the chest, the chance is not insignificant that he has broken a rib. (...) It is all far-fetched but we consider the possibility that you can have a pneumothorax, a punctured lung. Request to the captain to at least listen to both lungs with a stethoscope. (...) I did advise him to put on the neck collar. (...) The fact that they checked him regularly is fine, but the neurological examination should have also been done (...) I asked for the blood pressure (...) If he now has more or less normal blood pressure, and I ask for it to be repeated a few times over the course of time, and then suddenly it goes up 20 or 40, then I am more worried about something in the brain. (...). If you ask me whether the action was adequate, I think of someone who, while nobody saw it happen, is lying at the bottom of the stairs with a headache because of a blow and that you can't really tell whether he has broken his neck or not, yes, that he shouldn't move and that you first put a neck collar on him and then very, very carefully, if you also know that he can move his fingers well and has no tingling in his hands and reacts adequately, yes, that you then lay him very carefully on his side in the stable side position and then we take a closer look: is there any bleeding, or follow the A–B–C principle. Everyone who has received first aid knows that. (...) That impression [Disciplinary Court: 'that I have also, cautiously put, a little (...). So question 1 is: did the captain act appropriately in such an accident? (...) you can make a few comments about that (...)."



O. The preliminary investigator's remark in his summary report:
 'I would like to point out that II.405 Stethoscope, II.4.06 Anaeroid
 blood pressure gauge and II.7.05 neck collar are not required on the
 Hegeman II. This is important in connection with the statement of the
 expert doctor.'

#### 5.2 The considerations

5.2.1 The Disciplinary Court first and foremost states that the person concerned, in his capacity of captain, should exercise the care of a good seaman towards the seafarers/crew of the vessel. That concern for good seamanship includes the ultimate responsibility for the safety of and assistance to a crew member who suffers an accident.

5.2.2 In this case, on 7 July 2019 at around 05:50, the person concerned was confronted with an accident at work, which was not entirely clear. All indications were that the complainant had fallen down the stairs to the pump room shortly before. The complainant himself could not give a definite answer about what had happened; he seemed to have lost consciousness or at least a loss of consciousness could not be excluded. The chief officer/engineer, who the complainant encountered first, could not immediately make proper contact with him. This was because of the complainant's severe coughing A fellow seaman/AB calls the complainant short of breath and confused. Based on the report drawn up/signed by the person concerned on the day of the accident, the complainant complained of pain in his back, neck and head. Although no external injuries were observed, and the complainant was still able to move and eventually managed to get up with the help of others, the possibility of internal injuries could not be ruled out. Under these circumstances, the person concerned should have sought medical help immediately. The fact that the person concerned has successfully completed a course in medical care does not make this any different; he is not a medical doctor. He should have



submitted his observations/findings to a doctor/medical authority. This would also serve to reassure the complainant.

Immediate medical assistance – for which the Radio Medical Service can be contacted – is also what the Emergency Manual prescribes in case of a fall from height and a suspected back injury. A fall from height could not be ruled out here: according to the person concerned, the staircase has 10 steps and the height difference it covers is about 2–2.5 metres. It could not be ruled out that the complainant had fallen from that height or, as he thought himself afterwards, had slid down. It was clear from the start that his back was hurting.

5.2.3 The Disciplinary Court points out in this respect that there are requirements for each sailing area that must be met in the event of an accident. Only limited medical equipment is on the vessel in question, which sails less than five miles from the coast. For example, there was no blood pressure monitor, stethoscope or neck collar on board. This because in the event of an accident, the vessel can and must sail directly to shore. Particularly on ships with limited medical equipment on board, medical assistance must be sought immediately in the event of an accident such as this, where internal injuries cannot be ruled out, and some unconsciousness may have occurred. That is what was lacking.

5.2.4 The vessel also did not immediately moor in the port of Stepnica; at least two more dredging trips were carried out first. After the complainant was found at the bottom of the stairs, it took about 4.5 hours before he was examined by ambulance staff and taken to hospital for a medical examination.

5.2.5 All in all, the conclusion must be that the person concerned – by not immediately calling in medical assistance and by sailing out to make dredging trips instead of mooring in the harbour – did not react appropriately to the accident. That is culpable. On the other hand, it is not true that the person concerned did nothing and left the complainant to his



fate; he (eventually) managed to get in touch with a local project manager, who immediately arranged for an ambulance. Others have also confirmed that the complainant's condition was monitored in the meantime. As a result of the not (entirely) adequate action, The complainant's medical assessment may have been delayed by a few hours. No plausible case has been made this delay caused or aggravated injury. It is also noted that the complainant is someone with ample life experience. At the meeting of the Disciplinary Court, he showed himself to be a positive communicator. It is not inconceivable that the signals he gave out on the day of the accident through his replies/app messages gave cause to assume that it might not be so bad. That is certainly no excuse for the negligence of the person concerned, who had a responsibility of his own in this matter. However, it is a circumstance that may weigh in the person concerned's favour when choosing the settlement. The latter also applies to the fact that the person concerned, in the words of his counsel, is a 'first offender' and has learned a lesson from the event that has not left him unmoved.

### 6. The disciplinary measure and a point of attention

6.1 The Disciplinary Court judges that the person concerned failed in his duty as the ship's captain. As a result of the omissions referred to above, he did not act as befits a responsible captain in the event of an accident at work on board the ship. The complainant's complaint is well-founded in this sense.

On the basis of the foregoing considerations, the Disciplinary Court believes it is sufficient to impose the measure of a reprimand.

6.2 This case gives the Disciplinary Court cause to emphasise that in the event of an accident such as the one in question – in which, despite the absence of external injuries, the absence of internal injuries cannot be ruled out and there may have been some loss of consciousness – it is always advisable to have the patient examined by a doctor as soon as possible. If, due to circumstances, a physical examination is not possible, contact should



be made as soon as possible with the Radio Medical Service to investigate the (seriousness) of the situation and to take further steps. The ship should also report any limited medical equipment on board.

7. The decision

The Disciplinary Court,

- declares that the objection lodged against the person concerned is well founded;
- imposes the measure of a reprimand on the person concerned.

Duly delivered by J.M. van der Klooster, presiding judge, C.R. Tromp and H. van der Laan, members, in the presence of V. Bouchla, LL.M., as secretary, and pronounced by J.M. van der Klooster, LL.M., in public session on 20 July 2022.

J.M. van der Klooster presiding judge

V. Bouchla secretary

An appeal against this ruling can be lodged within six weeks of the date of forwarding with the Dutch Trade and Industry Appeals Tribunal ('College van Beroep voor het Bedrijfsleven'), Prins Clauslaan 60, 2595 AJ The Hague, P.O. Box 20021, 2500 EA The Hague, the Netherlands.