

**Minutes of the Council of Governors Meeting
held at 2pm on Tuesday 19 September 2023,
Kesgrave War Memorial Community Centre, IP5 1JF**

Present:

Helen Taylor	Chair
Helen Rose	Public Governor, Lead Governor
John Alborough	Public Governor, Rest of Suffolk
Abhijit Bose	Staff Governor, Ipswich
Caroline Bowden	Public Governor, Colchester
Trevor Catlow	Public Governor, Rest of Suffolk
Harvey Crane	Public Governor, Ipswich
Peter Coleman	Public Governor, Rest of Suffolk
Isaac Ferneyhough	Staff Governor, Colchester
Pride Mukungurutse	Staff Governor, Colchester
Mike Ninnmney	Local Authority Governor, East Suffolk Council
Alison Ruffell	Public Governor, Colchester
Elizabeth Smith	Public Governor, Rest of Essex
Daniel Tweed	Stakeholder Governor, Garrison
Allison Weston	Staff Governor, Ipswich

In attendance:

Dr Angela Tillett	Chief Medical Officer/Deputy Chief Executive
Ann Filby	Trust Secretary (Minutes)
George Chalkias	Director of Governance
Emma Sweeney	Acting Chief Nurse
Eddie Bloomfield	Non-Executive Director
Mike Gogarty	Non-Executive Director – to item 14
Mark Millar	Non-Executive Director
Richard Spencer	Non-Executive Director

Apologies for absence:

Gemma Bourne	Staff Governor, Ipswich
Noreen Cushen-Brewster	Stakeholder Governor, University of Suffolk
Sam Glover	Stakeholder Governor, Healthwatch Essex
David Guest	Public Governor, Colchester
Carlo Guglielmi	Stakeholder Governor, Essex County Council
Tim Newton	Public Governor, Ipswich
Gillian Orves	Public Governor, Rest of Suffolk
Sara Smith	Stakeholder Governor, Anglia Ruskin University
Barry Wheatcroft	Public Governor, Rest of Essex
Jane Young	Public Governor, Rest of Essex
Jonathan Baker	Committee and Membership Secretary
Martin Nixon	Public Governor, Rest of Essex
John Humpston	Non-Executive Director
Rebecca Hopfensperger	Stakeholder Governor, Suffolk County Council

Para no		Action
Section 1 – Chair’s Business		
38/23	<p>1. Welcome and Apologies for Absence</p> <p>The Chair welcomed everyone to the meeting and apologies were noted as above. The Council was advised that unfortunately Emma Blowers had resigned as a Staff Governor. Our thanks have been sent to her for the contribution made. Noreen Cushen-Brewster and Mike Ninnmney were welcomed as new stakeholder governors. A representative is awaited from Tendring District Council.</p>	

Para no		Action
39/23	<p>2. Declarations of Interest The updated register of interests was presented. The Fronks Road PPG no longer exists and would be removed from Liz Smith's declaration.</p>	AF
40/23	<p>3. Minutes of the meeting held on 29 June 2023 The minutes were approved as an accurate record.</p>	
41/23	<p>4. Matters Arising from the minutes and action log Two items remained outstanding with narrative updates provided by the Trust Secretary. In relation to the work on the Trust Constitution, 56/22, it was suggested that a small group discusses this to enable proposals to be presented to the next meeting.</p>	
42/23	<p>5. Report from the Trust Chair The Chair updated on a range of topics:</p> <ul style="list-style-type: none"> • A further round of industrial action begins today, the first time that junior doctors and consultants will be taking action at the same time. The Chair thanked all colleagues for dealing with the impact, with specific reference to those administrative staff who have the task of cancelling patient appointments and procedures. The focus is on keeping patients safe. • Nick Hulme's secondment to the Norfolk and Norwich University Hospitals NHS Foundation Trust, remaining Accountable Officer of ESNEFT. Dr Tillett was in attendance as Deputy Chief Executive. • A tough summer was described with record levels of patients waiting, levels of activity remaining high and 15% more beds open at Colchester since May. • The outcome of the Letby case has led to shockwaves and significant discussion throughout the NHS. This was considered at the ESNEFT Board with focus on the use of data and encouraging a culture of speaking up. • The Gold Award has been confirmed, the highest level that can be achieved, in recognition of the work that we are doing to support the government's Defence Employer Recognition Scheme and the armed services. • Recognition for our staff, with the cancer information services team shortlisted for an HSJ award in relation to the digital support for patients. The finance team has also been shortlisted for the public finance award team of the year. • Consultant Mr Ilham has been presented with the Murray Mathieson international trainer of the year award; Mr Morgan-Jones is the inaugural president of a new society focussing on bone and joint infection. • All units are now on site for the Elective Orthopaedic Centre at Colchester. • Two new Butterfly Centres are in place for families and carers for patients in the last 12 months of life. • A day had been spent with community services in Suffolk, seeing the range of developments including Access to the Stack programme (waiting list for ambulances), enabling reducing waiting times for patients and fewer ambulance conveyances. Over 1100 cases had been taken on so far. Integrated neighbourhood teams are co-located with social services colleagues. • Innovations including a targeted lung health check programme, a new service for gynaecology patients at Colchester and cardiac services at Ipswich with provision of pacemakers, meaning that patients won't have to travel outside of the area. • Over £41,000 had been raised from the charity abseil, including staff governor Allison Weston. <p>There were no questions.</p>	

Para no		Action
Assurance and Accountability		
43/23	<p data-bbox="293 163 954 197">6. Chief Executive's Briefing on Trust Activities</p> <p data-bbox="293 197 1366 533">The Chief Medical Officer/Deputy Chief Executive reiterated the time and planning that is required to respond to industrial action, with very little respite prior to the next confirmed dates. The Chair's thanks were echoed. We are hearing the distress of patients and the support that can be provided to them whilst they are waiting was described. The national focus is on looking at outpatient processes and ensuring that we are using all the tools available, questioning whether patients still require an appointment, or if they should move to patient initiated follow ups. Patient safety incidents are tracked daily and there have not been any direct patient incidents, whilst ultimately some harm will be caused to those patients waiting. Other items highlighted were:</p> <ul data-bbox="293 533 1382 1352" style="list-style-type: none"> <li data-bbox="293 533 1366 667">• The significant planning underway as part of the seasonal variation; COVID-19 can contribute to a patient's length of stay in hospital, and vaccination for both flu and COVID-19 is being encouraged as having both can cause significant issues for patients. <li data-bbox="293 667 1366 837">• We are not where we want to be in terms of performance. Around 71% of patients are being seen within the Emergency Department standard (ESNEFT is currently ranked 44 out of 122 hospitals) and looking at those community services and virtual wards where appropriate patients can be cared for in their own home with monitoring, nursing and medical oversight. <li data-bbox="293 837 1382 940">• The impact of seasonal planning on elective care, seeking to meet the standards required, and plans to ensure that no patients are waiting longer than 65 weeks. Appointments are required by the end of October to achieve this. <li data-bbox="293 940 1366 1043">• A focus on the 28 day faster diagnostic new cancer standards. Colorectal cancer pathways have been a priority and a stepped improvement has been seen with the aim of meeting the full standard next year. <li data-bbox="293 1043 1366 1214">• The Elective Orthopaedic Centre and the Dame Clare Marx Building offers an incredible opportunity for patients who are waiting for orthopaedic procedures. There will be over 80 beds, three theatres, and 10,000 patients if working at maximum capacity. The topping out ceremony is this week, and the plan is to open in August 2024. <li data-bbox="293 1214 1366 1285">• The Urgent and Emergency Centre and new theatre suite at Ipswich Hospital are set to open in May 2024. <li data-bbox="293 1285 1366 1352">• A virtual visit from the national GIRFT lead reviewing the elective pathway, and we were commended as a system having made significant progress. <p data-bbox="293 1384 1366 1487">John Alborough asked if there was any evidence of RAAC concrete on Trust premises. The Deputy Chief Executive (DCEO) confirmed that a review had been undertaken and there are no RAAC panels within ESNEFT buildings.</p> <p data-bbox="293 1518 1366 1720">Mike Ninnmey referred to the growth of patient waiting lists and asked if there had been increasing demand on GPs/A&E and whether additional funding had been received to meet that demand. The DCEO responded that advice to patients is clear that if conditions deteriorate, they should seek medical help. In her role chairing the GP Forum it was evident that GPs have seen an increased request for referrals, and it is their role to make that assessment.</p> <p data-bbox="293 1751 1366 2087">The Chair referred to a significant shift in those patients presenting with mental health needs, particularly at the Colchester site. The DCEO advised that an acute hospital is not necessarily the safest place for them. Emma Sweeney, Acting Chief Nurse, was introduced and talked about the Mental Health Steering Group which had been re-established and involved external stakeholders. There is good data demonstrating that the numbers at Colchester have remained constant, but patients are staying three times longer than in 2019. The number attending Ipswich Hospital has decreased, and looking to learn from what has worked well in Suffolk and how that can be replicated. The Integrated Care Board (ICB) lead will be presenting to a Board Seminar this week.</p>	

Para no		Action
44/23	<p>7. Board Proceedings Report The Director of Governance presented the report outlining the key matters considered at the July and September 2023 Board meetings.</p> <p>Helen Rose, Lead Governor, had observed the meeting and referred to the positive work that the Director had been doing regarding the Board Assurance Framework.</p>	
45/23	<p>8. Verbal Reports from Board Committees</p>	
	<p>a) Performance and Finance Committee Caroline Bowden advised that meetings are always well run, and everyone has the opportunity to speak, and meetings keep to time.</p>	
	<p>b) Quality and Patient Safety Committee Harvey Crane had attended the most recent meeting, it was well run, focussed, and he had enjoyed it, with the opportunity to speak at the end. He had made a comment about the high level of stress amongst staff and sickness levels, and asked how that would be taken forward. It was confirmed that this would be considered through the Performance and Finance Committee, which reviews the degree to which staffing issues are affecting performance. The People and Organisational Development Committee looks at deep dives in relation to the People Strategy.</p>	
	<p>c) People and Organisational Development Committee Helen Rose reported that two governors had attended.</p>	
	<p>d) Audit and Risk Committee Helen Rose stood in for the nominated governors. During the meeting the Chair was congratulated for his leadership. Self-certification spot checks are undertaken in relation to compliance with the provider licence, which includes the training and induction of governors. This is no longer required to be submitted but the opportunity is taken to review our governance processes with the Board approving the final assessment. Helen added that those governors who observed the recent Board meeting would have heard that this is the third year that BDO had not met statutory requirements and as one of the Council's appointment roles this should be taken account of. This would be addressed in more detail within the private meeting. Mr Millar would welcome any feedback on training.</p>	
	<p>e) Charitable Funds Committee Peter Coleman advised that this continues to be well organised, the charity team are good at summarising their papers and the frequency of meetings is being changed to bi-monthly. The August meeting focussed on the annual audit of the charity accounts with good relationships evident.</p> <p>The Chair thanked governors for the time that they spend in attending to observe as a key part of their role in holding the Non-Executive Directors to account for the performance of the Board.</p>	
46/23	<p>9. Report from Lead Governor A written report had been provided detailing the issues considered since the previous meeting of the Council, and governors were briefed on each element. The importance of filling current vacancies on the Council as part of the elections due to take place early next year was highlighted.</p> <p>There were no questions, and the Council noted the report.</p>	
47/23	<p>10. Appointments and Remuneration Committee Report A short report was presented by the Trust Secretary, confirming the decisions made by the Council in private session. This related to the Chair and Non-</p>	

Para no		Action
	Executive Directors' appraisals for 2022/23, remuneration, and the reappointment of Mr Mark Millar, Non-Executive Director, Deputy Chair and Audit and Risk Committee Chair for a further three-year term.	
48/23	<p>11. Non-Executive Director Recruitment</p> <p>Due to the resignation of Fiona Ryder at the end of August, the Appointments and Performance Committee convened on 5 September to consider a full report proposing the process to recruit to this vacancy. The Committee was also presented with a report reviewing Board succession planning and talent management and the new checklist implemented following the appointments concluded earlier this year.</p> <p>Work has subsequently been undertaken to finalise a page on the Trust's website to advertise the role, add dates into diaries and ensure appropriate unconscious bias training for the interview panel. An additional Council meeting was currently identified as 12.30pm on Wednesday 8 November which would consider the panel's recommendation following the selection process taking place on Monday 30 October. The proposed experience required was set out within the report, with diversity of shortlist across the protected characteristics essential to enable this to progress to interview.</p> <p>The Chair referred to the skills required in relation to major organisational transformational programmes. Regarding the procurement of an Electronic Patient Record, it is not technical skills that are required but the people end of that digital transformation which will be a helpful addition to the Board. Diversity across the range of protected characteristics is important. Once the post was advertised this would be circulated and governors were asked to share within their own networks.</p> <p>Appendix 1, an outline timetable for recruitment during 2024, was referenced with approval in principle sought. A further meeting of the Committee will be required to take forward these appointments. Everyone was thanked for their input.</p> <p>The Council agreed the key skills and experience required to recruit to the NED vacancy, using a Trust-led recruitment process, and agreed in principle the outline timetable for NED recruitment during 2024.</p>	AF
49/23	<p>12. Lead Governor Election Process</p> <p>The current constitution requires election of the Lead Governor every 12 months. Helen Rose was elected on 9 November 2022 as the only candidate who expressed an interest, so a decision is required on next steps. Suspension to standing orders was proposed to enable Helen to remain as Lead Governor until the 13 March 2024 Council. This will enable an election to be held once the constitution revisions are confirmed. Helen Rose is aware and happy to continue if Council is agreeable.</p> <p>Helen Rose advised that this was the case and questioned whether this opportunity was open to staff, public and appointed. The Trust Secretary confirmed this.</p> <p>The Council of Governors confirmed the suspension of Standing Order 3.5 to enable Helen Rose to continue as Lead Governor to the meeting of Council on 13 March 2024 and an election for Lead Governor to be held once the Trust Constitution has been revised.</p>	AF
Membership and Engagement		
50/23	<p>13. Membership Engagement Plan 2023-24</p> <p>The plan had been considered on two occasions at the Membership and Engagement Working Group, chaired by a governor – most recently on 6 September. The Trust Secretary advised that this forms part of the Trust's Communications and Engagement Strategy and will deliver one of the two general</p>	

Para no		Action
	<p>duties of the Council. The Committee and Membership Secretary will work with the corporate communications and engagement team to implement an action plan to make best use of time and deliver the plan, enabling engagement in a more focussed way. This includes:</p> <ul style="list-style-type: none"> • Council input into new Get Involved e-newsletter – this went out in August • 2-3 health talks each year, based on what local people want to see – a request was included in the Get Involved newsletter although a limited response had been received so far • A new briefing sheet for governors, so they have the right information when they are talking to people in the community – governors have previously asked what they could do to support the Trust during operational pressures • A programme of planned engagement, linked to corporate engagement priorities, such as the Ask 3 Questions campaign, extension of the NHS App and development of a customer service charter • Building membership in under-represented communities – links to the governor elections, and wanting to enhance the diversity of the Council in the same way as we are seeking to do for the Board • The action plan will be a standing item on the working group meetings, with review of the membership data on a six monthly basis • We will work with staff governors to see how they are undertaking their representative role • Ideally we will implement a single feedback mechanism. <p>Helen Rose added that this is now a governors’ group and she felt recent attendance was not sufficient. We owe it to the people who elected us to listen to them. The Trust Secretary advised that this would return to an open invitation to all governors who wished to attend to enable a cross-section of views.</p> <p>John Alborough asked whether these meetings would be virtual as they are currently. The Trust Secretary responded that a survey would be prepared for governors to gain everyone’s views and to consider their needs prior to any changes being made.</p> <p>John Alborough advised of previous budgetary constraints having an impact on the work that governors could do. The Trust Secretary responded that whilst there isn’t extensive resource, there will be some funds available for delivery of the plan. The Chair was hopeful that these health talks when implemented would be a positive step forward.</p> <p>Harvey Crane reported that Jonathan Baker, Committee and Membership Secretary, has been very positive in terms of administration, and he advised of a tremendous improvement. The Trust Secretary thanked Harvey for his comments, confirming a recent email.</p> <p>The Chair reflected that any thoughts would be welcome for the Get Involved newsletter, dates for the working group will be circulated, the research and innovation annual report has a huge number of developments included within in that may be of interest.</p> <p>John Alborough was not comfortable with the separation between the governor and volunteer role. The Trust Secretary would consider this, however, there is a clear distinction in that governors are elected and have statutory responsibilities in legislation in a way that volunteers do not.</p> <p>The Council approved the final membership plan for implementation.</p>	<p>JB</p> <p>JB</p>
51/23	<p>14. Governor Activities Update This item has been included in the last two meetings to provide governors with the opportunity to report on the work that they had been doing:</p>	

Para no		Action
	<ul style="list-style-type: none"> Liz Smith and John Alborough described PLACE visits - Patient-led assessments of the care environment - looking at the food and environment. It is not mandatory, but the expectation is that trusts will participate. Mini PLACE visits are undertaken throughout the year so there are no surprises when the main visits take place. All curtain rails were spotlessly clean, the food was nice and attractive, with hardly any waste, the service was led by ward domestics and hostesses who made it an experience for patients. John reported on a visit to Aldeburgh Hospital this morning and it being dementia friendly. <p>The DCEO thanked governors for undertaking these visits, and the feedback to staff is important. Areas for improvement will be considered as part of this process. Pictorial menus are being piloted and have been well received on care of the elderly wards. The catering staff are also looking at a lite bite menu, giving more flexibility for patients, with support from the dieticians. The Acting Chief Nurse also thanked governors for their feedback and the time taken to support these visits. She talked about the senior leadership team supporting the delivery of mealtimes recently and they are learning and building relationships, to ensure that those requiring assistance receive this in a timely fashion to meet their nutritional needs. Staff are proud of their areas and welcome visits. The process was described to support improvements in ward areas where minor adjustments are required.</p> <p>Mike Gogarty left the meeting.</p> <p>The Trust Secretary asked if other governors would like to participate, they should let her know via email to ensure that everyone had the opportunity to do so. These visits do required training and are a fantastic way to see the Trust. There is a plan of visits in place.</p> <p>Helen Rose referred to a previous visit and a very recent patient had become involved having heard about it.</p> <ul style="list-style-type: none"> Pride Mukungurutse outlined a 15 steps visit with Eddie Bloomfield and Richard Spencer at Felixstowe Hospital. It was really welcoming and friendly, well decorated, with a garden for patients. The improvements required are being taken forward by the matron, with estates support. The position regarding x-ray facilities and opportunities to use under-utilised or vacant space were described, alongside the challenges in providing sufficient waiting facilities and how medical staffing on site is managed. The Chair advised that several buildings had only recently transferred into Trust ownership hence a backlog of maintenance being required. The Trust Secretary confirmed that these visits and any follow ups are managed through the patient experience team. <p>The DCEO referred to the issues raised and recent discussions on x-ray facilities. Mike Ninnmey advised of the increase in population and requirements and questioned the potential for expansion of beds at Felixstowe. He felt that a wider view was required on the medical services that are available in the immediate community area that could take the pressure off the hospital and reduce the need for patients to travel. The Chair reflected that this is a role for the ICS to include primary care.</p> <ul style="list-style-type: none"> Alison Ruffell had joined the Armed Forces Group, a good group, with the camaraderie obvious. Alison also reported on visits to the Urgent Care Centre and the uncertainty of patient waits following triage, and AMSDEC (acute medical same day emergency care). <p>The DCEO confirmed that we want to use AMSDEC as intended, for same day emergency care, but it has unfortunately been bedded for much of the time to support patient flow.</p>	

Para no		Action
	<ul style="list-style-type: none"> Alison Ruffell had finally got involved with the virtual ward, which was not as she had expected, with a focus on frail elderly. Staff were enthusiastic and were very keen to show people around. <p>The DCEO confirmed that step up/down frailty is the focus as there has not been much need within surgical pathways.</p>	
Public Questions		
52/23	15. Questions from members of the public present There were no members of the public present.	
53/23	16. Date of next meeting The next meeting would be held on Wednesday 6 December 2023, 2-5pm, MS Teams. The meeting closed at 4.15pm.	

Signed Date

Name
Chair

Disclaimer: The minutes do not necessarily reflect the order of business as it was considered.