

**Minutes of the Council of Governors meeting
held at 2pm on Wednesday 13 March 2024,
MS Teams**

Present:

Helen Taylor	Chair
Helen Rose	Public Governor, Lead Governor
John Alborough	Public Governor, Rest of Suffolk
Caroline Bowden	Public Governor, Colchester
Peter Coleman	Public Governor, Rest of Suffolk
Isaac Ferneyhough	Staff Governor, Colchester
David Guest	Public Governor, Colchester
Rebecca Hopfensperger	Stakeholder Governor, Suffolk County Council
Pride Mukungurutse	Staff Governor, Colchester
Mike Ninnmey	Stakeholder Governor, East Suffolk Council
Martin Nixon	Public Governor, Rest of Essex
Gillian Orves	Public Governor, Rest of Suffolk
Elizabeth Smith	Public Governor, Rest of Essex
Jane Young	Public Governor, Rest of Essex
Allison Weston	Staff Governor, Ipswich

In attendance:

Dr Angela Tillett	Chief Medical Officer/Deputy Chief Executive
Kate Read	Director of People and Organisational Development
Eddie Bloomfield	Non-Executive Director
Mike Gogarty	Non-Executive Director
John Humpston	Non-Executive Director
Hussein Khatib	Non-Executive Director
Mike Meers	Director of Digital and Logistics (item 16)
Mark Millar	Non-Executive Director/Deputy Chair
Richard Spencer	Non-Executive Director/Senior Independent Director
Emma Sweeney	Acting Chief Nurse
George Chalkias	Director of Governance
Ann Filby	Trust Secretary
Jonathan Baker	Committee and Membership Secretary (Minutes)

Apologies for absence:

Abhijit Bose	Staff Governor, Ipswich
Gemma Bourne	Staff Governor, Ipswich
Jude Ominyi	Stakeholder Governor, University of Suffolk
Sam Glover	Stakeholder Governor, Healthwatch Essex
Carlo Guglielmi	Stakeholder Governor, Essex County Council
Tim Newton	Public Governor, Ipswich
Gina Placey	Stakeholder Governor, Tendring District Council
Alison Ruffell	Public Governor, Colchester
Sara Smith	Stakeholder Governor, Anglia Ruskin University
Daniel Tweed	Stakeholder Governor, Colchester Garrison
Barry Wheatcroft	Public Governor, Rest of Essex

Para no		Action
Section 1 – Chair’s Business		
72/23	1. Welcome and Apologies for Absence The Trust Chair welcomed those present to the meeting and advised of the apologies received as recorded above.	

73/23	<p>2. Declarations of Interest</p> <p>The Chair declared an interest in that they had been appointed as a Trustee for the Suffolk Community Foundation, which would involve being on the awards panel for the Sizewell C Community fund, which links with health impacts. Governors were also reminded of the importance of this process and those governors where declarations remained outstanding were asked to submit these to meet the Trust policy and national guidance.</p> <p>Richard Spencer declared an interest in respect of item 15, Non-Executive Director Recruitment, relating to his role going forward and he would therefore step out of the room for this discussion.</p>	Govs/ JB
74/23	<p>3. Minutes of the meeting held on 6 December 2023</p> <p>The minutes of the meeting were approved as an accurate record.</p>	
75/23	<p>4. Matters Arising from the minutes and action log</p> <p>The Trust Secretary advised that all actions were proposed to be closed with further detail included in the action log.</p>	
76/23	<p>5. Report from the Trust Chair</p> <p>The Trust Chair provided an update on a range of items which included.</p> <ul style="list-style-type: none"> • Nick Hulme had returned to the full-time role of Chief Executive but that he had to send his apologies for today's meeting. • Work on the RHS Wellbeing Garden at Colchester Hospital had started. This would be overlooking the lake at the front of the Hospital, would be ready by May and include wildflowers. This is a partnership between the RHS and the Colchester and Ipswich Hospital Charity to provide a high quality space outside. • The Trust received the National Preceptorship Interim Quality Mark recognising the work done on the programme for newly qualified registered clinicians. • Work is underway on the endoscopy centre, which is due to be completed by next summer. As a result, the location of the endoscopy services has moved. • There had been a recent national commemoration to those who died during the COVID-19 pandemic, which was led by the FTSU guardian and chaplains. As part of the National Day of Reflection there was also the opportunity for staff to sow seeds in hope looking forward. • The support provided to colleagues for Ramadan included chapels and prayer rooms, an all-staff message from the senior leadership team and extended visiting times. There would also be spaces in the hospital including the restaurants where staff can break their fast. • Confirmation regarding the Annual Members' Meeting having taken place in February. • A new edition of ESNEFT Life had just been released. 	
Assurance and Accountability		
77/23	<p>6. Chief Executive's Briefing on Trust Activities</p> <p>The Chief Medical Officer provided the following information as part of the briefing.</p> <ul style="list-style-type: none"> • The support to patients going through emergency pathways. • The industrial action that had occurred since the previous meeting. A significant amount of planning went into this to reduce where possible the number of cancellations and impact on patients. • The number of patients with COVID-19 is reducing, with safety maintained in the emergency departments. Praise was given to the teams working hard to deliver this. • New Government targets that had been introduced with 76% performance targets for four hour waits in the ED to be achieved during March. The Chief Medical Officer praised the teams for their hard work and described the process for patients arriving through to the emergency care unit. • For elective care, 40,000 patients have been seen as part of the 65 weeks target by the end of March, which is a positive position to reduce waiting times. 	

	<ul style="list-style-type: none"> • It was felt that the outcome for the consultants' ballot would be positive. • For cancer services the Trust is on track to deliver the 28-day faster diagnosis standard. • Community Teams and ICS partners have continued with quality improvement work, despite the pressures, and the work on reducing health inequalities. 50% had also still maintained making every contact count. • Information relating to the final planning guidance is still awaited for the next financial year, but for this year the Trust is on track to submit a surplus of £1.3m. There are further opportunities working across the system and whilst from a financial perspective there is still work to do, cost improvement identification is progressing. • The Trust had received an update on the national staff survey which included positive feedback. <p>The Chair thanked the Chief Medical Officer for providing the update and noted the progress on achieving the 76% performance for urgent care and in particular the challenge at Ipswich.</p>	
78/23	<p>7. Staff Survey</p> <p>The Director of People and Organisational Development provided an update on the recently released survey results. This included detail on the increase in numbers of those who had responded to the survey, reaching 52% or over 6,000 members of staff.</p> <p>Whilst there had been improvements nationally for the NHS, the improvements for ESNEFT were significant and across a variety of factors. With 85 questions in the staff survey, there had been a significant improvement in 68 of the categories, which included ESNEFT being recommended as a place to work, be cared for and treated. The Director advised that whilst there had been improvements in areas, there is more to do.</p> <p>With regard to the results around equality, diversity and inclusion (EDI) this had increased at a greater rate than comparator Trusts, but we know that there is unwarranted sexual harassment from staff and members of the public which needs to be taken seriously. The Director reported that there had been improvement around raising concerns, however, there were still reports that staff lack the confidence that a concern would be addressed. Errors and near misses are taken seriously, but there is further work needed in this area and around staff reporting harassment and abuse from patients, particularly impacting staff from a BAME background. It was anticipated that the Trust is in the upper quartile, and the significant progress made was positive. There has also been a deep dive into the work around EDI.</p> <p>The Chair highlighted that these results had been disappointing in the past and were on an improving trajectory, and improvements had been made in leadership and development.</p> <p>In response to a question about how the Trust compares nationally and regionally, the Director of People and Organisational Development stated that previously the Trust had been below the average, however, it would now be in the top 60 Trusts with the recent return rate. Further information could be shared on this after the meeting, and assurance was provided regarding further analysis being undertaken through the Board's People and Organisational Development Committee. In response to a further query the Director also confirmed that the responses to the survey can be broken down by division which allows for better analysis.</p> <p>The Council held a further discussion on the push for more members of staff to respond with information provided on more paper copies of the survey being made available this time. In addition, there is hope that there will be easier ways</p>	

	<p>to complete they survey going forward and further work is required to help those members of staff where English is not their first language. An improved response had been seen from healthcare support workers, whilst further work is required in estates and facilities. There were a higher number of hard copy responses than last year as a result of more being produced, but further detail could be provided on the proportion and a short paper summary of results to be circulated.</p> <p>The Council noted the Staff Survey update.</p>	KR/AF
79/23	<p>8. Board Proceedings Report</p> <p>The Director of Governance introduced the report, which provided further detail about Board discussion in January.</p> <p>The Chair welcomed the information presented, which provided an opportunity for all governors to be aware of the decisions made.</p>	
80/23	<p>9. Verbal Reports from Board Committees</p> <p>a) Performance and Finance Committee</p> <p>Jane Young advised that the meeting is led by an excellent Chair who keeps it moving.</p> <p>Caroline Bowden echoed these comments and stated that the meeting starts promptly and is very time efficient. It provides reassurance that action is taken regarding those problems that have arisen. Caroline also stated that it was interesting to hear about the background work that one is not normally aware of.</p>	
	<p>b) Quality and Patient Safety Committee</p> <p>Gillian Orves reported that it is a pleasure to observe the Committee, with governor feedback sought at the end of the meeting. The meeting is chaired well, with the opportunity for everyone to ask questions and provide constructive challenge. The Committee operates in an open and honest way, with a desire to solve problems and improve things for patients and staff.</p>	
	<p>c) People and Organisational Development Committee</p> <p>John Humpston, Non-Executive Director and Chair of the Committee, provided a contribution as the governor observers were not able to attend the meeting. John stated that the Committee is extremely busy and focuses on a wide range of staffing issues, with input received from governors at the meeting and afterwards. There have been recent meetings focusing on particular items which has been working well.</p>	
	<p>d) Audit and Risk Committee</p> <p>David Guest provided a brief summary of a recent meeting which included detail around consultant job planning. The Non-Executive Directors participate well in the discussions, with the Chair coming across as warm and relaxed, but also firm and in control.</p> <p>Mark Millar, Non-Executive Director, used this as an opportunity to confirm to governors the position with the new external auditors. They are due to attend the upcoming Audit and Risk Committee, and there is an extension to completion of the audit from the end of June to the end of August, with the ambition to do this sooner if possible.</p> <p>The Chair highlighted that this revised date is a reflection of the fact that it might take some time for the new auditor to be embedded in their first Trust audit. Mark Millar noted that there is additional work required within the first year.</p>	
	<p>e) Charitable Funds Committee</p> <p>Peter Coleman provided a brief summary of the detail discussed at the Committee, and in particular the improvements around processes that are being made. Issues</p>	

	<p>for accessing Committee papers prior to the meeting were highlighted.</p> <p>Elizabeth Smith, informed the Council that the meetings are well time managed, and that they are set up well, and had also had an issue with access to meeting papers. This would be followed up.</p>	JB
81/23	<p>10. Report from Lead Governor</p> <p>Helen Rose, Lead Governor, provided her report and in particular highlighted a recent informal meeting with the Trust Chair and the upcoming governor elections, and how existing Governors may be able to support this. Helen welcomed the return to face to face meetings, with Council meetings all now being held in person.</p> <p>The Trust Chair highlighted the number of governor vacancies that had arisen, which was a result of a mixture of different circumstances. It is unusual to have this number of vacancies, but it is not a particular issue. The Trust Secretary commented that the area of most concern was in Ipswich, with Tim Newton the only governor currently representing that constituency.</p> <p>The Trust Chair informed the Council that the Trust had up to five places available at the upcoming NHS Providers Governor conference and the detail would be circulated.</p> <p>The Council noted the report from the Lead Governor.</p>	JB
82/23	<p>11. Annual Members' Meeting Minutes 21 February 2024</p> <p>The Trust Chair informed the Council that following the Annual Members' Meeting on 21 February 2024, the Council are required to approve the minutes from the meeting in line with the requirements of the Trust's Constitution.</p> <p>The Trust Secretary advised that a link from these would be added to the Annual Members' Meeting webpage.</p> <p>The Council approved the minutes of the Annual Members' Meeting, held on 21 February 2024.</p>	JB
83/23	<p>12. Council Elections Timetable</p> <p>The Trust Secretary introduced the report, which outlined the requirements and associated deadlines. Any offers of support from governors were welcomed, in particular, to identify those people in the community that might be interested in the role.</p> <p>The Trust Secretary also noted those governors who were no longer eligible to stand and encouraged governor attendance at their final meeting on 20 June to say thank you for your service. The Trust Secretary also highlighted that NHS England guidance is clear in that the elections can continue when a local election is taking place, as the poll does not open until local elections have been completed.</p> <p>The Trust Chair thanked the Trust Secretary for the information provided and noted that the next meeting of the Council of Governors would include a lunch to which all Board members would be invited. In addition, virtual events have been arranged to enable staff and local people to find out more about being a governor and these would be advertised accordingly.</p> <p>The Council received the update.</p>	
84/23	<p>13. Meeting Dates 2024/25</p> <p>The Council of Governors received a short paper setting out those meetings that are due to take place in public for the Council of Governors and for Board. The Trust Secretary thanked those governors who currently observe Board Assurance Committees and stated that these roles would be reviewed in July when new</p>	

	<p>governors joined the Council.</p> <p>The Chair also confirmed that dates for informal meetings for governors would be set approximately six weeks prior to the meeting.</p> <p>The Council of Governors noted the Meeting Dates 2024/25.</p>	
Appointments and Performance		
85/23	<p>14. Lead Governor Election</p> <p>The Trust Secretary advised that the report provided formal notification of the result, with Pride Mukungurutse and Helen Rose both expressing an interest in the role. Helen Rose was voted as the Lead Governor, until the end of her final term of office in October 2025.</p> <p>The Trust Chair highlighted the revisions to the role as part of the Trust Constitution review, and reiterated the points of contact for governors, including the Trust Secretary and the Senior Independent Director.</p> <p>The Chair congratulated Helen Rose on the role of Lead Governor and thanked Pride Mukungurutse for participating in the process.</p> <p>The Committee confirmed Helen Rose in the role of Lead Governor until 31 October 2025.</p>	
86/23	<p>15. Non-Executive Director Recruitment</p> <p><i>Richard Spencer, Non-Executive Director, left the room for the duration of this item.</i></p> <p>The Chair reported that 2024 is a significant year of change for ESNEFT as the organisation is six years old and as such there are a number of Non-Executive Directors who are coming to the end of their second term. The timescale of the changes was detailed within the report. Given the scale of the change, and to improve the potential shortlisting, a recommendation was received from the Appointments and Performance Committee that an executive search company be appointed to assist with the recruitment process.</p> <p>With regard Richard Spencer’s role as Non-Executive Director, the Appointments and Performance Committee recommended that his term of office was extended for 12 months to enable him to support the transition to a new Trust Chair. The Chair highlighted that if this was approved in principle it would require additional checks through the ICB and NHSE as extending a term is only permissible in exceptional circumstances.</p> <p>The Trust Secretary provided further detail with regards to the appointment process for Non-Executive Directors, which had been reviewed by the Appointments and Performance Committee. Detail of the leadership competency framework, and the potential skills and experience to be sought, alongside a connection to the local area, were proposed. The diversity information in the report had been updated. There was also an ongoing remuneration review.</p> <p>Governors welcomed the report and made a number of comments in support of extending Richard Spencer’s Term of office. Isaac Ferneyhough highlighted the work by Richard on welfare and making extra effort to speak to governors. John Alborough commented that he had worked with Richard Spencer on the Charitable Funds Committee and had a good relationship with him. Helen Rose added that she worked closely with Richard and would concur with what had been said and she was supportive of the extension.</p> <p>The Council of Governors approved:</p> <p>a) progressing the recruitment process and the engagement of an executive</p>	AF/HT

	<p>search company</p> <p>b) the focus on clinical expertise, financial management and project management within very large and complex projects/programmes as the priority skills required.</p> <p>c) The principle of extending Richard Spencer's term of office for 12 months.</p>	
87/23	<p>16. Chair and Non-Executive Director Performance Reviews 2023/24</p> <p>The Trust Secretary introduced the report, which sought the Council's approval to progress the 2023/24 reviews in line with the latest guidance. The process and checklist for performance reviews had been updated, with relevant meetings in diaries. A full report had been considered by the Appointments and Performance Committee on 5 March 2024.</p> <p>Richard Spencer, Senior Independent Director, stated that the Chair's appraisal process is robust, and provided further detail to governors which included the opportunity to provide feedback. In addition, he would be happy to have further conversations with Governors if required.</p> <p>In response to a question from Helen Rose, Richard Spencer confirmed that responses received are kept strictly confidential, and information is anonymised when discussions are taking place with the Chair.</p> <p>The Committee approved the Appointment and Performance Committee's recommendation to progress the 2023/24 reviews in line with latest guidance.</p>	
Membership and Engagement		
88/23	<p>17. Membership Engagement Plan update</p> <p>Martin Nixon, Chair of the Membership and Engagement Working Group, introduced the report and thanked those who had attended the recent meeting, which is open to all governors.</p> <p>The Trust Secretary highlighted that they hoped that the Ask 3 Questions work would begin soon, which relates to shared decision making for the patient and ensuring that patients are involved. Further detail was also provided about the potential of the health talks that could take place.</p> <p>The Council noted the Membership Engagement Plan Update.</p>	
89/23	<p>8. Governor Activities Update</p> <p>The Lead Governor provided detail on their attendance at the accessible information group, and how communication around health matters can be improved. Discussions at the meeting were around the barriers there may be for people taking part, and the information on the Trust website.</p> <p>The Trust Secretary confirmed that with regard to web accessibility, this is a matter that is being reviewed by the Communications Team, to meet the requirements of the accessible information standard. Governors' views on the website content, once those changes had been made, would be very welcome.</p> <p>Elizabeth Smith provided information regarding 15 steps visits and the improvements that had been made as a result. Elizabeth also highlighted that more visits were scheduled until the end of June, and she would like to continue these as a patient representative.</p> <p>Caroline Bowden advised of her attendance on the governor support workshop run by NHS Providers. In attending the meeting, it identified how well-run the Council is at ESNEFT with clear detail regarding the duties of a governor, and that observation of meetings is permitted at ESNEFT, which other Trusts do not allow.</p> <p>The Trust Chair welcomed the updates provided by Governors.</p>	

	The Council noted the Governor Activities Update.	
	Briefing	
90/23	<p>16. Electronic Patient Record and Digital Strategy</p> <p>Mike Meers, Director of Digital, Logistics and Operations, introduced the Electronic Patient Record (EPR) and Digital Strategy presentation. This project was initially intended three years after the merger, but with the organisational change and the pandemic, it had been delayed.</p> <p>The Director provided governors with further detail regarding EPR and the process undertaken in terms of research and understanding how EPRs are implemented. The introduction of an EPR will impact on every staff member and patient, as this will be used across the entirety of ESNEFT including community organisations. It will bring together a range of systems into one standard method of access and will also be accessible to patients.</p> <p>The go live date is October 2025 for all elements as a ‘big bang launch’, with this being only part of the journey. Support will be provided throughout implementation. The Director advised regarding the focus on culture, alongside open and honest engagement across the teams to ensure its effective implementation. The chosen supplier, Epic ranked highly in comparison to other providers. The product itself had been operational since 1970, and no customer of Epic has left as yet.</p> <p>There is an 18-month programme for implementation and a range of different modules that can be used. This includes MyChart for patients, where they can access their clinical records, as an example. Governors were informed that at Addenbrooke’s approximately 200,000 patients interact with the system. The communications team will be contacting user groups and governors can get involved at the right time.</p> <p>The Director reported that there will be significant clinical engagement in terms of building the system under the guidance of an executive steering board, with tailored reporting. Further detail was provided with regards to the other Trusts that had been spoken to as part of the process, and the detail around ESNEFT cost savings and the reduction on paper spend, alongside other improvements. From an operations perspective, the system will transform the way in which the Trust works, allowing for analysis to be undertaken in real time.</p> <p>In response to the presentation Helen Rose raised a question with regard to the patient experience. In response the Director advised that there will be work with regard to patients and clinicians and the governance of when information is going to be seen. There is also functionality around proxy care and consent.</p> <p>John Alborough asked whether a patient’s GP will be able to see information. It was confirmed that a GP will be able to access information and there will be a health information exchange between different Trusts, which will be easier for those that are also using the Epic system. The Chief Medical Officer/Deputy Chief Executive highlighted that use of the system will improve the timeliness of care particularly with patients having access to their records. There is also the possibility of improved population health data which will assist in keeping patients safe.</p> <p>Mike Ninnmey questioned whether using the system creates a single point of failure, and if it does fail, whether the information is captured. In response the Director informed the Council that the relevant security and back up measures are being taken. There will be a separate read only solution that will be available if required and any issues that arise would be reported nationally within an allocated timeframe.</p> <p>Rebecca Hopfensperger asked whether there was an ability to put more enriched</p>	

	<p>data in the application. In response, it was confirmed that one of the modules used will be around patient experience and accessible information.</p> <p>Caroline Bowden asked regarding transferring paper records to digital. This is already underway through a system called Evolve. Paper is being scanned into the system, and existing clinical systems will be migrated to the new.</p> <p>The Chair thanked the Director for the presentation and governors for their questions. The Board had been receiving regular presentations on this matter, learning different elements of the project.</p> <p>The Council noted the Electronic Patient Record and Digital Strategy presentation.</p>	
Public Questions		
91/23	<p>20. Questions from members of the public present There were no members of the public present.</p>	
92/23	<p>21. Date of next meeting The next meeting would be held at 2pm on Thursday 20 June 2024, Colchester.</p>	

Signed Date

Name
Chair

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