

PUBLIC COUNCIL OF GOVERNORS MEETING
7 April 2022, 9.00 am - 11.00 am
Minutes of the meeting held via Microsoft Teams

Present

Ms Helen Taylor, Chair of ESNEFT (Chair)
Ms Helen Rose, Public Governor, Rest of Suffolk and Lead Governor
Mr David Gronland, Public Governor, Rest of Essex
Mr Barry Wheatcroft, Public Governor, Rest of Essex
Ms Gemma Bourne, Staff Governor, Ipswich
Ms Lynda McWilliams, Stakeholder Governor, Tendring District Council
Mr David Guest, Public Governor, Colchester
Mr James Stephens, Staff Governor, Ipswich
Mr James Chung, Public Governor, Rest of Essex
Mr Martin Lewis-Jones, Public Governor, Rest of Suffolk
Mr Paul Gaffney, Public Governor, Ipswich
Ms Sara Smith, Stakeholder Governor, Anglian Ruskin University
Ms Jane Young, Public Governor, Rest of Essex
Ms Gillian Orves, Public Governor, Rest of Suffolk
Mr Tim Newton, Public Governor, Ipswich
Mr Philip Davy, Public Governor, Rest of Suffolk
Ms Allison Weston, Staff Governor, Ipswich
Ms Alison Ruffell, Public Governor, Colchester
Mr John Alborough, Public Governor, Rest of Suffolk
Ms Pride Mukungurutse, Public Governor, Colchester
Ms Mary Rudd, Stakeholder Governor, East Suffolk Council
Ms Sam Chenery-Morris, Stakeholder Governor, University of Suffolk
Ms Rebecca Hopfensperger, Stakeholder Governor, Suffolk County Council

In attendance

Mr Eddie Bloomfield, Non-Executive Director
Mr John Humpston, Non-Executive Director
Mr Mark Millar, Non-Executive Director
Mr Richard Spencer, Non-Executive Director
Ms Jill Hall, Interim Trust Secretary
Mr Nick Hulme, Chief Executive
Mr Adrian Marr, Director of Finance
Mr Paul Fenton, Director of Estates & Facilities
Ms Kate Read, Director of Human Resources & Organisational Development
Mr Mark Ridler, Associate Non-Executive Director
Ms Anne Rutland, Deputy Chief Nurse - Quality
Ms Anna Turner, Associate Director of Engagement
Ms L Fraser, EA to Director of Finance / Senior Committee Secretary (Minutes)

Apologies

Ms Caroline Bowden, Public Governor, Colchester
Mr Laurence Collins, Public Governor, Ipswich
Mr Isaac Ferneyhough, Staff Governor, Colchester
Mr Carlo Guglielmi, Stakeholder Governor, Essex County Council
Ms Margaret Llewellyn, Public Governor, Ipswich
Ms Elizabeth Smith, Public Governor, Rest of Essex
Mrs Rebecca Driver, Director of Communications
Dr Angela Tillet, Chief Medical Officer

CHAIR'S BUSINESS		ACTION
1/22	WELCOME & APOLOGIES FOR ABSENCE	
	<ol style="list-style-type: none"> The Chair welcomed attendees to the meeting. The Chair advised that Mr Paul Ellis had resigned from his role as public governor for Colchester due to personal circumstances. The Chair expressed thanks to Paul for his contribution as a governor on behalf of the Trust and wished him well in the future. Apologies for absence were received from: <ul style="list-style-type: none"> Ms Caroline Bowden, Public Governor, Colchester Mr Laurence Collins, Public Governor, Ipswich Mr Isaac Ferneyhough, Staff Governor, Colchester Mr Carlo Guglielmi, Stakeholder Governor, Essex County Council Ms Margaret Llewellyn, Public Governor, Ipswich Ms Elizabeth Smith, Public Governor, Rest of Essex Mrs Rebecca Driver, Director of Communications Dr Angela Tillett, Chief Medical Officer 	
2/22	GOVERNORS DECLARATIONS AND REGISTER OF INTEREST	
	<ol style="list-style-type: none"> The Chair gave the Council of Governor members an opportunity to mention any interests in relation to the agenda items. No declarations of interest were received. 	
3/22	MINUTES OF MEETING HELD ON 2 SEPTEMBER 2021	
	<ol style="list-style-type: none"> The minutes of the meeting held on 2 September 2021 were received. The Chair advised that the amendments requested prior to the meeting would be made but asked for any comments regarding accuracy. Ms Rose requested that paragraph 6 on page 6 was removed. The Chair stated that following amendment as discussed the minutes would be accepted as a correct record. 	
4/22	CHAIR'S REPORT	
	<ol style="list-style-type: none"> The Chair advised that she had recently returned from a holiday abroad and noted the COVID requirements that had been in place there and that on return to this country through the airport she had become aware that living with COVID in Britain was very different. However, this had brought into focus the future management of COVID within the Trust and the calm visible management that was in place with staff dealing professionally with the ongoing operational pressures. The Chair stated that despite the ongoing pressures she would like to share some positive news regarding the Staff Awards 2022 that had been held virtually a week ago. Being virtual had meant that everyone could join in, including family members and friends. The awards had attracted more than 300 nominations and the Trust was able to recognise and celebrate the achievements of 79 finalists. The judging panel had a tough job because of the high calibre of nominations across every single area of the Trust both in geography and for the very wide range of services nominated. It had been wonderful to be able to celebrate the achievements, success, dedication, innovation and service to others, which was what the staff awards were all about. Almost a thousand colleagues had tuned in to watch the awards being live streamed on the night and that figure had now risen to more than 2,100 viewers. Much positive feedback had been received about the awards which were highly professional and had set a high bar for future awards either in person or virtual. The Chair expressed thanks to everyone who had made the awards possible including sponsor, judges and the organising team. The Chair noted that celebrating innovation at ESNEFT, this week's ground breaking BBC2 series Your Body Uncovered had featured Mr Subash Vasudevan, Associate Medical Director and Consultant Surgeon at ESNEFT together with patient Janet. The film included Janet being able to see inside her own body using augmented reality, and followed her journey through surgery and recovery. The programme had been immensely uplifting and inspirational and viewing was recommended. <p><u>Questions and Comments</u></p> <ol style="list-style-type: none"> Mr Lewis-Jones asked why ESNEFT had not been mentioned in the credits of the programme. The Chair advised that the communications team would be asked if there was a reason for this. 	
5/22	CHIEF EXECUTIVE BRIEFING	
	<ol style="list-style-type: none"> The Chief Executive stated that he was pleased to be back at ESNEFT following his recent secondment and endorsed the comments made by the Chair about the very positive staff awards evening. The Chief Executive noted the challenges currently when dealing with the ongoing COVID-19 pandemic with a high degree of normality in the community, whilst within the Trust COVID-19 was still a major factor particularly impacting on patient flow through the organisation. The 	

	<p>Chief Executive noted the very positive vaccination programme, antivirals and clinical interventions now available to manage the ongoing pandemic and paid tribute to the staff who continued to provide great care during challenging circumstances.</p> <ol style="list-style-type: none"> 3. The Chief Executive note that the decision to restrict visitors on site had been particularly difficult but had been an important step to take, however, the position was being reviewed regularly. 4. Despite the ongoing pressures, the Trust continued with diagnostic and elective work to ensure the most vulnerable and sickest patients were treated in a timely manner. 5. The Chief Executive advised that the staff survey, which had recently been published, had not shown any major concerns. However, the two or three major areas where the Trust was felt to be an outlier in a negative way were being looked at. 6. The Chief Executive noted the Ockenden Report and advised that the maternity team were working through the lessons, which could be learnt for ESNEFT. The wider issue was around what the report said about the need to identify risk and tackle this at an early stage by the Board and leaders. 7. The Chair noted that another feature of Ockenden and other reports was that patients and families had not been listened to which reinforced the importance of engagement with the governors. 8. The Director of Human Resources & Organisational Development advised of the support that was being provided for staff during the current pressures. The Trust was conscious of the pressures being put on staff financially, had been working closely with the unions, and had taken advice from other colleagues across the organisation. The Director of Human Resources & Organisational Development stated that she would assure governors that work was being progressed at pace. 9. The Director of Human Resources & Organisational Development noted that as an organisation of 11,500 staff there were varying pressures on different staff groups. However, the pressure of sickness absence had been felt in all areas, although positively sickness was now reducing. A team of psychologists was now working across the organisation alongside almost 500 mental health first aiders to provide wellbeing support and good feedback had been received. 	
6/22	REPORT OF THE LEAD GOVERNOR	
	<ol style="list-style-type: none"> 1. Ms Rose advised that the last formal business meeting in public took place on 2 September 2021 last year, although she had reported to the Annual Meeting on the 10 November 2021; when assurance was given that governors had continued to observe Trust meetings to be able to hold the Non-Executive Directors to account, both individually and collectively for the performance of the Trust. 2. Ms Rose stated that she would like to formally thank Paul Ellis, who recently resigned from the Council as a public Governor for Colchester and note Paul's contribution to the CoG, and therefore to the experience of patients using Trust services was safely on record and much valued. 3. Governors would be involved in the annual appraisal for Ms Helen Taylor, Chair working with the Senior Independent Director, Mr Richard Spencer. A full report would be brought back to the next CoG meeting in June. 4. Ms Rose observed that the regular informal meetings which had been held with the Chair had been appreciated by governors and that she met regularly with Helen to discuss current issues and to plan agendas going forwards. 5. Ms Rose advised that she had met the staff governors in January and had had an excellent discussion about a variety of issues affecting staff in particular, which included the difficulties of attending governor meetings when clinical duties must take priority. Concerns had been raised about how voting in elections for staff governors were being run, where staff could only vote for a potential staff governor for their own hospital site and it was questioned whether there was enough publicity about the opportunities for any member of staff to be able to put themselves forward. 6. All governors were now invited to the Trust's Membership and Engagement Group which meets on alternate months. This group was now chaired by one of the public governors and was a real opportunity to learn so much more about how the Trust engaged with patients and its membership and for governors to be made aware of ways that they could support this process. 7. Governors continued to be involved in specific engagements with patients on-line for the new Orthopaedic centre in Colchester and the new Breast Care Centre at Ipswich. <p><u>Questions and Comments</u></p> <ol style="list-style-type: none"> 8. The Chair advised that governor elections were due to be held later in the year and the Interim Trust Secretary had been asked to look at the constitution in relation to staff governors and any amendments which were required as ESNEFT had developed since the merger. 	
7/22	TRUST BUILDING PROGRAMME UPDATE	
	<ol style="list-style-type: none"> 1. The Director of Estates & Facilities advised on the current extensive building programme that was currently being carried out across ESNEFT sites and highlighted some of the projects. 	

	<ol style="list-style-type: none"> 2. Work had been carried out at Ipswich to enhance the retail offering at Ipswich utilising courtyard infill to accommodate the new Emergency Department and Urgent Treatment Centre expansion. Further refurbishment of retail units at Entrance 6 was now planned over the next few months. 3. Child Health Development, Ipswich – Work would commence in April 2022 as part of an 18 month construction programme and would increase the number of beds, isolation cubicles and clinic rooms and provide an enhanced and modern environment. 4. A new admin block, which accommodated 112 staff, had been created to facilitate the building works to commence the Breast Care Centre at Ipswich. 5. The new Breast care centre would transform the experience patients have when they come to hospital by bring all elements of breast care under one roof. The programme was approved by the Trust Board and commenced on site March 2022 with planned completion December 2022, with some of the funding being contributed by the Blossom Appeal. 6. A temporary vanguard operating theatre had arrived at Ipswich at the end of July 2021 and was on site for 12 months to support additional elective activity, helping to reduce the backlog of patients awaiting surgical procedures. 7. A temporary urgent treatment centre to enable construction of the new ED/ UTC main building located in the previous South Wards Entrance was being created. 8. The Director of Estates & Facilities advised of the phase 1 work taking place at the Clacton Community Diagnostic Centre. 9. At Colchester the Interventional Radiology Cardiac Angiography Centre would provide state-of-the-art specialist centre for diagnostic cardiac and radiology procedures at Colchester was being progressed with completion expected mid May 2022. 10. Improvements were also taking place to reconfigure the ED and the Urgent Treatment Centre at Colchester. The Acute Medical Same Day Emergency Care (AMSDEC) & Frailty Unit work had been completed which would allow an improved environment for care. 11. The Director of Estates & Facilities advised that the Dame Clare Marx Building was the largest build taking place with enabling works for the 18 month project due to start in April 2022. 12. The Director of Estates & Facilities advised governors of the other projects that had been undertaken at Colchester and Ipswich Hospitals during 2021/22 alongside the ongoing backlog maintenance projects. <p><u>Questions and Comments</u></p> <ol style="list-style-type: none"> 13. The Chief Executive commented that the first thing to say was that none of this work would have happened without the merger and the Trust was obtaining a new hospital but in an incremental way. Funding had been received, as ESNEFT was perceived as a successful organisation. 14. The Chief Executive paid credit to the Director of Estates & Facilities and his team for managing the extraordinary projects that were taking place. 15. Mr Gronland stated that it would be good for the governors to be given a tour of both sites. The Director of Estates & Facilities advised that dates would be put in the diary when infection prevention guidance allowed. It was noted that Ms Tammy Shepherd, Head of Patient Experience would be arranging tours of the community sites for the governors. 16. Mr Lewis-Jones stated that he would assume that all of the building works were suitable and safe with regards to cladding. The Director of Estates & Facilities advised that cladding was considered very closely for all projects and the cladding now used was part of the build itself and the products which had been used at Grenfell Tower had been withdrawn from the market. 17. The Chair advised that safety was paramount and following the Grenfell Tower fire rapid risk assessments were undertaken by all public organisations. 	
8/22	MEMBERSHIP AND ENGAGEMENT GROUP (MEG) UPDATE	
	<ol style="list-style-type: none"> 1. Ms Anna Turner, Associate Director of Engagement introduced Mr John Alborough who had been appointed chair of the Group. 2. Mr Alborough advised that he was very keen to be able to reintroduce wider engagement and share the very positive works that were taking place on all sites. 3. Mr Alborough thanked Ms Turner and the team for their support of the engagement programme. 4. The Chair noted that all governors were welcome to attend the MEG meetings. 	
9/22	QUALITY ACCOUNT REPORT	
	<ol style="list-style-type: none"> 1. Ms Anne Rutland, Deputy Chief Nurse, Quality introduced the draft Quality Account 2021/22 for information noting that the final Quality Account would be brought back to the Council of Governors in June. 2. Every year, the Trust was required to produce a Quality Account. Prior to 2020, all Foundation Trusts had been required to produce a Quality Report, which included the requirement for the Trust's Governors to identify one of the Quality Indicators and instruct the auditors to review and comment on the data quality. Whilst this requirement had been removed, including any auditor requirements, the Governors were invited to include a response to the Quality Account. 3. There had been no indication as to whether or not the requirement for auditors and therefore the quality indicator review would be reinstated, however annual guidance was issued at the 	

	<p>end of January each year and the Council would be updated.</p> <ol style="list-style-type: none"> 4. Three quality priorities had been chosen following survey of stakeholders. 5. The Council was asked to approve the attached Governor Response provided by the Lead Governor to be included as a forward to this report. 6. Ms Rose, Lead Governor presented the Governor Response on the (draft) Quality Account 2021/2022 for approval. <p><i>"The Governors of ESNEFT are the Trust's main conduit for public accountability with eighteen elected Public Governors forming a majority on the Council of Governors alongside six Staff Governors and eight Stakeholder Governors. Over the past year, we have been particularly mindful of the constraints placed on the Trust to be able to engage with patients and potential patients in our communities, without having regular face-to-face contact. We are pleased to note some of the innovative ways that the Trust has endeavoured to overcome some of the challenges, particularly in terms of effective communications, in every sense, for inpatients and their loved ones during periods of restricted visiting. We also note the active recruitment of volunteers to help support patients, particularly on the elderly and dementia wards and the focus on staff health and wellbeing. Engagement has still been able to be achieved with patients and carers, managed effectively on-line. This can be evidenced in particular with the on-going conversations about the forthcoming Dame Clare Marx Elective Orthopaedic Centre at the Colchester site, following a full public consultation in 2019/20. Governors have been actively supporting this process. Before the pandemic, Governors would have been visiting active patients' groups across the Trust and particular groups within the community - listening and feeding back comments to those who plan and provide services across ESNEFT's catchment area. This is just one way for the patient voice to be heard which we plan to reinstate as soon as it is safe to do so, working closely with the Patient Experience Team. As part of one of our key statutory roles, Governors have been involved in the shortlisting and interview process for the appointment of two new non-executive director (NED) posts this year and in the appraisal process of the Chair. It is our duty to ensure that the Chair's performance meets with the Trust's vision and values and that the organisation's strategic direction meets the needs of the population that the Trust serves. We can confirm that we have continued to hold the NEDs to account, both individually and collectively, for the performance of the Trust Board. We have done this through our attendance as observers at their Assurance Committees and at the Trust Board meetings in public. We have noted their effective questioning and challenging of management, where it is appropriate, and their contributions to the development of strategies and governance processes. We do value that both NEDs and Executive Directors have attended our informal on-line meetings with the Chair to provide us with briefings on a number of selected issues during the year, including explanations of aspects of performance, planned capital improvements and investments. With access to Trust leadership, data and information, we look forward to being consulted on key aspects of strategies and governance that affect the Patients' experience and to having a stronger, more effective voice within the Trust to add value to the Patients' experience of services in future."</i></p> <p>Outcome: The Council of Governors approved the Council of Governors Statement as presented for inclusion in the draft Quality Account 2021/2022.</p>	
10/22	<p>BUSINESS PLANNING UPDATE</p>	
	<ol style="list-style-type: none"> 1. The Chief Executive provided an update on the Trust's business plan which brought together all the things the Trust had to do in the year into one document and ensure that everyone in the organisation knows what they need to do, that they have the money to do it and support from other departments to deliver their priorities. Business plans are produced by clinical divisions and corporate directorates, as well as at Trust level. 2. The business planning process is started in September of each year and by Christmas divisions have developed their initial 'plans on a page' summarising their priorities for the year ahead. In the new year national planning guidance was issued outlining priorities for the NHS as well as the funding available. Divisions then meet with executives over 3 months to develop and refine their plans. 3. The Chief Executive highlighted that the Trust had taken the decision to exceed national expectations by setting higher targets where it was felt important to do so for patient care. Noting that in cancer care the Trust had set an 85% Faster Diagnosis standard by December, where the national expectation was 75% by March 2023. The Chief Executive advised that conversations locally and across the region were taking place regarding differential targets for tumour sites. 4. The Trust had also decided to set an ambitious target with regards to ambulance handovers to meet the national target by June 2022 rather than March 2023. Noting that this was a national risk and the Trust currently faced significant challenges. 5. The elective waiting times target had been set at no patients waiting over 78 weeks by end September and to halve the number of patients waiting over 52 weeks in September by March. 6. The Chief Executive noted that a new national target was expected to replace the 4 hour ED standard later this year, but the Trust had taken the decision to introduce a 90% v 95% national expectation. However, this was noted would be a significant challenge given current performance. 7. The Trust had ended the year with an underlying break-even position. The Trust's income would go up by £58m in 22/23, pay rises and the national insurance increase would take up £20m of that rise and inflation would take a further £13m. 8. The Trust would save £17m to reinvest in services through the Cost Improvement Programme with a further £27m reinvested into care. 9. Treating and preventing COVID was expected would cost an extra £15m. The Chief Executive advised that the Trust planned to end the year with a break-even position, however, the major risks to this would be ongoing COVID and inflationary pressures. 	

	<p><u>Questions and Comments</u></p> <p>10. Mr Lewis-Jones stated that he would suggest a change to the waterfall diagram and have the two dark blue columns next to each other to make this clearer. The Director of Finance stated that he would take the comment on board for future reports.</p> <p>11. The Chair noted the significant amount of ambition in the business plan for the year whilst noting the risks.</p>	
ASSURANCE AND ACCOUNTABILITY		
11/22	VERBAL REPORTS FROM OBSERVATION OF THE ASSURANCE COMMITTEES	
	<p><u>Performance Assurance / Integrated Assurance Committee</u></p> <p>1. Mr Newton read out comments received from Ms Smith regarding the Performance Assurance Committee. <i>"The chair Mr Bloomfield is outstanding in the role and manages the time of the meeting, ensuring Non-Executives, executives and attendees have time to raise questions. Working on the premise that the papers are read prior to the meeting so that discussion is more focuses. The chair welcomes input from the governors who are asked for their comments at the end of the meeting. The chair also invites governors to meet outside of the meeting if necessary if required.</i> <i>The three regular Non-Executives take a full and engaged part in the meeting and are well engaged with their individual briefs. The meeting has embraced the challenging times. Governors and the public can be assured that this sub Board committee is well run and facing the challenges."</i></p> <p>2. Mr Newton stated that he was in agreement with Ms Smith's comment and would add that because of the pressures of the COVID pandemic the Performance Committee had had to cover a wider range of issues at its monthly meetings but despite this it had been an effective part of good governance and management of the Trust's core business. The meetings evidence good leadership at all levels, with good team work. Appropriate support and challenge was given and robust conversations held wherever necessary.</p> <p>3. Mr Newton stated that he would confirm that the Non-Executive Directors ensured that indicators are picked up and addressed in a timely way. Mr Newton stated that, therefore, patients, members of the Trust and the local community could be assured that the Committee was working effectively and meeting their health needs during these challenging times.</p>	
	<p><u>People and Organisational Development Committee</u></p> <p>1. Ms Taylor, Chair read out comments received from Mr Gaffney. <i>"The Chair, Richard Spencer, and the NED's (John Humpston and Mark Riddler) were all well prepared, the most recent meeting last week finishing ten minutes early. The agenda and the meeting's other papers had been distributed and read by everyone even though we rely on Decision Time, the digital platform that allows for the sharing of papers, which has its advantages and disadvantages.</i> <i>The chair let everyone participate with no one person dominating the meeting, with the agenda being covered in its entirety. The NEDs did ask probing questions and had some suggestions for improvements and shared their concerns. I can say with some confidence that they are aware of the issues that the trust faces and are doing their best to resolve them."</i></p>	
	<p><u>Audit & Risk Committee</u></p> <p>1. Ms Ruffell advised that the meeting held in March had been an exemplary run meeting where the NEDs appeared well prepared. Although a long meeting with many items the meeting ran to time whilst allowing sufficient opportunity for each participant to contribute appropriately. After each agenda item there was a clear summing up by the chair, Mr Millar, with appropriate action points. The chair was probing without being confrontational and appeared to be well respected by committee members.</p> <p>2. Ms Ruffell stated that she was able to provide the Council of Governors with confidence that issues were being well managed and appeared to be satisfactorily dealt with within an agreed timeframe.</p>	
	<p><u>Charitable Funds Committee</u></p> <p>1. Ms Orves advised that the meeting had been expertly chaired by Mr Bloomfield. Everyone had been listened to time allocated for lengthy discussion. Involvement by the governors had been actively encouraged. Always robust discussion and Ms Orves stated that she was confident as an observer that the Committee was well run and operates with rigour.</p> <p>2. Mr Alborough stated that he would agree with the comments made by Ms Orves.</p> <p>3. Ms Bourne stated that she would like to thank the executives and Mr Bloomfield for welcoming the governors to the Committee meeting and enabling questions and comments.</p>	
	<p><u>Innovation Committee</u></p> <p>1. Mr Lewis-Jones stated that the Committee had been well run to time. There had been plenty of discussion and probing questions. The fact that the papers had been distributed less than 24</p>	

	<p>hours before the meeting was the only concern.</p> <p>2. Ms Rose read out comments received from Mr Collins. <i>"I have attended one informal discussion on the clinical strategy and one Innovation Committee meeting, so there were limited meetings to comment on performance properly. However, both meetings were well run and all the Non-Executive Directors participated effectively and raised points of concern in a relevant way. The level of debate was high and was effective in linking points regarding ESNEFT objectives. My initial view is that this is an effective and high performing committee which the chair leads well and that the Non-Executive Directors make a strong contribution to."</i></p>	
	<p>The Chair thanked the governors for their observations of the Committee meetings. The Chair commented that many trusts did not give governors access to internal meetings but ESNEFT had found that this was valuable for the Trust and also enabled the governors to fulfil their role to observe the Non-Executive Directors.</p> <p>The Chair noted that one of the big questions raised by the Ockenden Report had been around the role of the Non-Executive Directors so it was good to get feedback on the work of the Non-Executive Directors at the Trust.</p>	
12/22	<p>1. Ms Rose advised the governors that Mrs Llewellyn had taken an interest in the garden areas at both sites and how the Trust attempted to enhance the environment in which patients and their visitors were cared for and had provided the following update to be given at the meeting.</p> <p><i>"I have met with Paul Fenton who was most helpful. Unlike Colchester Hospital's enclosed Gardens, at Ipswich Hospital the courtyards have foul water drains so they can't be used anymore than they are already. Some gardeners usually arrive about now to put in some bedding plants where possible. The builders, as part of their contract, have to reinstate grassed and planted areas that they've destroyed.</i></p> <p><i>The Peace garden has problems in that memorabilia of various sorts gets left there. This problem will need to be solved when the memorial garden that is planned at the rear of the hospital is in place.</i></p> <p><i>The 'Scrubs' wall hanging cannot be displayed as it is fabric and therefore has too many infection issues.</i></p> <p><i>Rebecca Driver is in touch with Paintings in Hospitals, which offer a free service to hospitals. There is an on-going discussion about a regional appointment of someone to oversee paintings and displays across the region. None of this is straightforward as Estates has to be involved in the safe hanging or construction of any displays."</i></p>	
13/22	<p>PROPOSED VISIT PROGRAMME FOR GOVERNORS – A WAY FORWARD</p>	
	<p>1. Ms Anne Rutland, Deputy Chief Nurse – Quality presented the report regarding the proposed way forward for governor visits.</p> <p>2. Throughout the pandemic, the Trust had worked to maintain governor and non-executive director visibility within operational areas through virtual visits using Microsoft Teams. Ms Rutland thanked the governors for their participation in the virtual visits which had been held during the past 2 years.</p> <p>3. As the Trust now started to move through the pandemic, many Governors and Non-Executive Directors had expressed a wish to be physically present on Trust sites to meet colleagues and learn about services. It was proposed that this would be delivered through the 15 Step Programme, which would be led by the Head of Patient Experience with feedback provided via the Patient Experience Group and Quality & Patient Safety Committee.</p> <p>Outcome: The Council of Governors approved the recommendation to move to more on site presence, to stop virtual visits, and to begin to be involved in the 15 Steps Programme led by the Head of Patient Experience as described in the paper.</p>	
14/22	<p>MODE OF COUNCIL OF GOVERNOR MEETINGS</p>	
	<p>1. Ms Turner advised of a proposal provided by Ms Driver, Director of Communications and Engagement regarding the Council of Governors meetings going forward.</p> <p>2. Throughout the COVID-19 global pandemic, the Council of Governors had met more sporadically, and virtually, using Microsoft Teams. As the Trust began to move out of the pandemic, normal Trust governance arrangements would resume, with four meetings of the Council per year. Many had expressed a desire to meet in person, whilst it was also acknowledged that virtual meetings were very convenient and efficient, and more accessible for some, particularly public observers. It was, therefore, proposed that two meetings per year should be held in person, one in the Ipswich area, and one in the Colchester area, venues to be confirmed. The remaining two meetings to be held virtually, using Microsoft Teams. The meetings would alternate, one in person, one virtually. It was proposed that the Annual Members Meeting was included in the four meetings and that it counted as one of the two virtual meetings in the year. This was because public members attending more than doubled between 2019 and 2020, so it clearly worked holding the meeting virtually.</p> <p>3. After full consideration, it was considered that a hybrid version of in person and virtual for a meeting in public was not ideal and this option was, therefore, not offered for consideration.</p>	

	<p>4. The Council was asked to consider the proposals regarding how the Council of Governors meetings were run in the future and shared publicly. The recommendation being for four meetings a year, two in person, two virtually, one of which was the Annual Members Meeting.</p> <p><u>Questions and Comments</u></p> <p>5. Ms Rose stated that whilst she would agree in principle to two face-to-face and two virtual meetings she was not able to agree that the Annual Members meeting was considered a governors business meeting. The Chair advised that further consideration could be given to the Annual Members meeting not being considered a Council of Governors meeting.</p> <p>6. Ms Rudd stated that whilst she would agree with face-to-face meetings she would note that she would have difficulties attending a 9.00am meeting in Colchester. The Chair agreed that consideration could be given to timings taking on board the comments raised.</p> <p>7. Ms Ruffell stated that the timing of restarting face-to-face meetings would depend on when other meetings would be allowed to be held in person.</p> <p>8. Mr Gronland stated that he would agree that the Annual Members meeting should not be considered to be a Council of Governors meeting.</p> <p>9. Mr Lewis-Jones stated that he would be against a “hybrid” meeting due to the technical issues that were often encountered. The Chair agreed that hybrid meetings were difficult and that was why the decision had been taken not to offer these as an option for consideration.</p> <p>10. Ms Rose observed that the Council of Governors meetings were held “in public” and were not public meetings.</p>	HT/ RD
ANY OTHER BUSINESS		
15/22	<p>QUESTIONS FROM MEMBERS OF THE PUBLIC</p> <p>1. No questions were raised.</p>	
16/22	<p>ANY OTHER BUSINESS</p> <p>1. No other items of business were raised.</p>	
DATE OF NEXT MEETING: 9 June 2022		

Signed Date

Helen Taylor
Chair

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