

**Minutes of the Council of Governors' meeting
held at 14:00 on Wednesday 11 March 2026,
Orwell Room, Kesgrave Community and Conference Centre, Twelve Acre Approach, Kesgrave,
Suffolk, IP5 1JF**

Present:

Tracy Dowling	Chair
Mark Millar	Non-Executive Director and previously Interim Chair
David Guest	Public Governor, Rest of Suffolk – Lead Governor
Eddie Bloomfield	Public Governor, Essex
John Cook	Appointed Governor, Ipswich Borough Council
Tony Dutch	Public Governor, Essex
Isaac Ferneyhough	Staff Governor
Paul Gaffney	Public Governor, Ipswich
Debbie Miles	Appointed Governor, University of Essex
Tim Newton	Public Governor, Ipswich
David Nicholls	Public Governor, Suffolk
Light Onyekachi	Staff Governor
Gillian Orves	Public Governor, Rest of Suffolk
Andrew Taylor	Staff Governor
Donna Webster	Public Governor, Essex
Allison Weston	Staff Governor
Tony Wooderson	Public Governor, Suffolk

In attendance:

Adrian Marr	Interim Chief Executive – from 15:15
David Eagles	Non-Executive Director
John Humpston	Non-Executive Director
Hussein Khatib	Non-Executive Director
Anthony May	Associate Director of Risk, Governance and Compliance
Laura da Rita	Committee and Membership Secretary – minutes

Apologies for absence:

Sara Naylor	Appointed Governor, Colchester City Council
Jane Simpson	Appointed Governor, Integrated Care System – Anglia Care Trust
Shazad Uddin	Public Governor, Essex
Sam Glover	Appointed Governor, Healthwatch Essex
Michael Lucking	Public Governor, Essex
Verity Jolly	Public Governor, Suffolk
Roger Blake	Staff Governor
Gemma Bourne	Staff Governor
Shazia Sharif	Staff Governor
Caroline Bowden	Public Governor, Essex
Tracey- Williams Macklin	Appointed Governor, University of Essex

Para no		Action
Section 1 – Chair's Business		
1/26	1. Welcome and Apologies for Absence Tracy Dowling welcomed the Council and the apologies above were noted. TD reminded the Council of the Trust values and Nolan principles and asked that we aim to conduct our business in line with these values.	
2/26	2. Declarations of Interest Donna Webster declared her new role as Secretary, Reform UK.	

3/26	3. Minutes of the meeting held on 10 December 2025 The minutes were approved as an accurate record.	
4/26	4. Matters Arising from the minutes and action log The action log was updated as appropriate.	
5/26	5. Report from the Trust Chair Mark Millar provided a brief update and thanked governors for their continued support and contribution to the Trust. ESNEFT has entered the NHS National Excellence Awards for the digital award, relating to the Epic implementation, and for the neighbourhood health category, recognising partnership work with Suffolk County Council and community healthcare services at Stow Lodge. Mayuri Patel, a management accountant at the Trust, has received the Healthcare Finance Management Association Eastern Region Equality and Diversity Champion Award. A new Nurse Specialist Cancer Charter was published on 16 March 2026. Colchester and Ipswich hospitals are now among more than 70 sites nationally participating in The Generation Study, a free and optional research programme run by Genomics England in partnership with the NHS. The study aims to understand whether analysing newborn babies' DNA can improve the diagnosis and treatment of genetic conditions. The process to appoint a new substantive CEO is at its midpoint, and Mark Millar highlighted the excellent work of Adrian Marr in the interim position. The Q3 NOF results are expected in the coming weeks, with the Trust likely to fall into segment 4. This decline is expected due to the impact of the period of Epic implementation, though performance recovery in Q4 has been strong. Ambulance handovers continue to be challenging, particularly at Colchester. Isaac Ferneyhough referred to recent communications with senior managers about budget constraints and queried the potential impact on patient care. Mark Millar responded that ESNEFT is expected to be overspent in 2025–26 but emphasised the Trust's obligation to return to breakeven, and the need for all budget holders to be mindful when making expenditure decisions. Eddie Bloomfield asked why ESNEFT is likely to drop into segment 4 and noted the possibility of media attention. Mark Millar explained that the segmentation reflects performance relative to other trusts. Because Epic was implemented in October, ESNEFT performance was adversely affected at a time when other organisations were able to progress with their recovery plans. John Humpston noted that the Performance and Finance Committee will review the decline in performance in detail. Tracy Dowling added that several trusts have been unable to produce reliable data for months following the implementation of a new electronic patient record such as Epic, whereas ESNEFT had immediate access to accurate data. Both the Performance and Finance Committee and the Board will monitor performance closely. The Council noted the update.	
Assurance and Accountability		
6/26	6. Chief Executive's briefing on Trust activities Adrian Marr provided governors with a brief update on current operational and financial pressures. • Performance has been challenging this year, though the Trust is likely to meet the 52-week constitutional standard. • Four-hour emergency performance is improving and placed the organisation 24th in the country last week. • More than 105,000 patients are now using MyChart, and over five million pieces of paper have been saved since the launch of Epic in October. The next phase of the Epic programme will focus on stabilisation, and feedback from staff has generally been positive.	

	- The current financial forecast is a deficit of £4.1M, with feeder system issues for Pharmacy contributing to this position. Projected turnover stands at £1.3B. - Financial plans for next year have been submitted to NHS England, alongside additional plans covering the following three years. - A national shortage of orthopaedic cement has affected services in recent weeks, though ESNEFT has managed the situation well and is now back to full capacity. - The Trust is still awaiting a national resolution on Resident Doctor pay, and good progress continues to be made on the 10-point plan. - Adrian expressed disappointment that the CQC Well-Led report from November has not yet been received. - The Trust is now working with two ICBs; Norfolk and Suffolk, and Essex, both of which are undergoing restructure. - The results of the Staff Survey are expected to be unembargoed in the coming days. - Provider organisations now have the option to take on NHS Property Services properties. The Board must express interest by 20 March, and ESNEFT is likely to enquire about around eight properties, including Clacton Hospital. The Council noted the update.	
7/26	7. Board Proceedings Report Anthony May spoke to the report received and explained that two public Board meetings had taken place since the Council last met. Full Board papers packs are available on the Trust's website and governors are welcome to observe public meetings alongside other members of the public. Recent Board discussions have focused on strategy for the coming years, financial performance, and the quality of care provided by the Trust. Each assurance committee, chaired by a Non-Executive Director, presents a CKI to the Board. The Board has approved additional funding linked to the Seasonal Variation Plan. A written summary was received setting out the verbal feedback provided following the CQC Well-Led inspection held in November 2025. Two CQC inspection reports from Ipswich, carried out in September 2025, were also considered, with the site remaining rated as "Requires Improvement". Catherine Morgan, Chief Nurse, is leading the actions arising from all CQC findings. The Board also approved the Sexual Safety Charter and signed up to the Unison Anti-Racism Charter. The Clinical Strategy was approved in February 2026, and the second stage of the Medium-Term Plan was submitted in mid-February. Tracy Dowling suggested Andy Higby attend a future Council meeting to present the Clinical Strategy. The Council noted the proceedings and decisions of the Board.	AM/L dR
8/26	8. Verbal Reports from Board Committees	
	a) Performance and Finance Committee – Paul Gaffney provided a brief and positive update.	
	b) Quality and Patient Safety Committee – Donna Webster and Tim Newton provided a brief and positive update.	
	c) People and Organisational Development Committee – No feedback was available at this meeting.	
	d) Audit and Risk Committee – The governor observer was not in attendance. David Eagles, chair of Audit and Risk, provided a brief update.	

	e) Charitable Funds Committee – David Nicholls provided a brief and positive update.	
9/26	9. Report from Lead Governor David Guest, Lead Governor, provided the Council with an update. He noted the recent appointment of the new Chair and confirmed that the process to appoint a new Chief Executive is currently underway. Governors observing committees remains a key part of the role and David emphasised the importance of reaffirming this approach with the new Chair. Tracy Dowling indicated that this is an arrangement she favours and she would like to see this continue. Eddie Bloomfield referred to previous Non-Executive Director and Governor visits. Tracy Dowling shared her experience as a non-executive undertaking 15-Steps Quality Programme visits alongside Governors. She commented that there is an opportunity for governors and the Board to collectively agree how best to work together for the benefit of patients and staff. TD will discuss this with the Lead Governor when they next meet.	TD/D G
Governance		
10/26	10. External Audit update: Extension of contract Anthony May spoke to the paper received explaining the original appointment of EY as the external auditor of the Trust. The original contract was for 3 years plus a 1-year extension. This extension has been agreed. The Council noted the update.	
11/26	11. Lead and Deputy Lead Governor election outcome Anthony May thanked the Council for their engagement and support throughout the process. Congratulations were extended to David Guest and Verity Jolly.	
Appointments and Performance		
12/26	12. No items for consideration.	
Membership and engagement		
13/26	13. Membership and Engagement Working Group Anthony May explained March's meeting was postponed to April due to a high number of apologies. The Council discussed the history of the group and explored ways to increase attendance and engagement. It was agreed that Paul Gaffney should be added to the group. The Council also discussed holding a Whole Council workshop to support future development. Governors requested ESNEFT email addresses to assist with communications, especially to ensure that apologies are noted when invites are declined.	AM/L dR
14/26	14. Membership Engagement Plan This item was deferred due to the cancellation of the Working Group.	
15/26	15. Governor activities update Donna Webster referred to her recent personal experience at Clacton Hospital and highlighted the donation of Syringe Driver bags. Gill Orves raised the matter of PLACE visits, noting that these have been postponed for the last two years. Gill asked for confirmation about the future of PLACE visits. Tony Dutch expressed a wish to observe an assurance committee and offered general feedback regarding the use of acronyms. Isaac Fernyhough referred to previous training opportunities available for governors, especially when new in role.	LdR LdR

	Eddie Bloomfield shared a recent encounter with a patient who had raised concerns about the difference in waiting times between Colchester and Ipswich. Adrian Marr explained that a process is in place to enable long-wait patients to be seen at the alternative hospital site when appropriate.	
Briefing		
16/26	16. Quality and Patient Safety at ESNEFT Hussein Khatib, Non-Executive Director and Chair of the Quality and Patient Safety Committee, provided the Council with an overview of his work during his seven years at ESNEFT, during which he has chaired three committees and worked alongside four Trust Chairs. He reflected on recent observational visits to the robotic theatres, noting that Epic now enables surgeons to complete operative notes within minutes of finishing a procedure. This improvement saves significant clinician time and ensures that accurate information is recorded and shared promptly. He went on to describe his role as Chair of the Maternity and Neonatal Improvement Board. Maternity services remain a major national priority, particularly in light of Baroness Amos' recent report, which highlighted poorer outcomes for Black and Asian women and ongoing concerns that women's voices are not consistently heard, issues also identified in the Ockenden Review. Nationally, leadership within midwifery services continues to present challenges. ESNEFT has strengthened its own leadership structure with the appointment of both a Director and Deputy Director of Midwifery, and workforce levels are under active review to ensure that midwife numbers remain aligned to service demand. Mr Khatib acknowledged the estate-related challenges within the maternity service, particularly at Ipswich, where facilities are not ideal. The Trust will undertake a review in response to the latest national findings, which will also encompass neonatal nursing. He noted that both maternity units have made progress in meeting national standards, supported in part by the work of the Maternity and Neonatal Voice Partnerships, which ensure that women who regularly use ESNEFT maternity services contribute directly to quality improvement. A culture-change programme is also underway, with staff focusing on improvements to triage processes. The Board has recently examined potential options to improve the maternity estate at Ipswich. This remains under review as a priority. Medical cover for newborns and rota management remains areas of challenge, though these are supported by paediatric medical staff. Hussein also highlighted the value of Board Safety Champion walkarounds undertaken with the Chief Nurse, with themes and feedback routinely reported to the Maternity and Neonatal Improvement Board. Recent improvements to the birthing suite at Clacton were noted. He commented on the national debate surrounding homebirths; although ESNEFT has clear and robust processes in place, complications can arise when hospital transfer is required, and decisions to decline hospital birth, as has been seen in national cases, continue to present some risk. In his capacity as Chair of the Quality and Patient Safety Committee, Mr Khatib explained that the committee alternates between a three-hour monthly meeting and a shorter deep-dive session focused on priority topics. The committee maintains close oversight of issues highlighted during recent CQC visits, and a new Fundamentals of Care Board, chaired by the Chief Nurse, has been established in response to several findings. One example raised by the CQC was the presence of unattended paper notes; this issue will be fully resolved through the roll-out of Epic. The committee also reviews broader aspects of quality including Quality Assurance, Quality Improvement, End of Life Care and Mortality and Morbidity. Key indicators, such as pressure ulcers and falls, continue to be monitored closely, and the Chief Nurse has introduced the ACE care accreditation programme across the organisation. Mr Khatib also spoke about his role as Chair of the EDI Strategic Group, which focuses on addressing the needs of both patients and staff. A series of roadmaps has been developed to outline priority areas and provide a clear framework for monitoring progress over time. Tracy Dowling thanked Hussein Khatib for his contribution to the Trust during his time as a Non-Executive Director.	

	Donna Webster asked about the challenges midwives face when recommending that birthing women transfer to hospital. Hussein Khatib confirmed that this is being considered by the Maternity and Neonatal Improvement Board. David Guest asked about the governance process for the Fundamentals of Care Board. Hussein Khatib confirmed that it reports to the Quality and Patient Safety Committee. John Cook referred to his personal experience relating to a family member. Hussein Khatib recommended that the Council be given access to a video recently viewed by the Board.	
Public Questions		
17/26	17. Questions from members of the public present There were no questions from members of the public present at the meeting.	
18/26	18. Any Other Business No further business was discussed.	
19/26	19. Date of next meeting Wednesday 17 June 2026, 16:00-19:00. Colchester Rugby Club.	

Approved: 17 June 2026 **TBC**

Chair Tracy Dowling

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