

Council of Governors

Date of meeting:	17 June 2026
Report Title:	Board Proceedings Report
Executive/NED Lead:	Anthony May, Interim Trust Secretary
Report author(s):	Anthony May, Interim Trust Secretary
Action required:	For discussion

Executive summary

To support the Council of Governors in discharging its responsibility to hold the Board to account, through the Non-Executive Directors, this report provides a summary of matters discussed at the Board meeting held in public on 7 May 2026.

The Council is not authorised to alter or reinforce the Board's decisions but can hold the Non-Executive Directors to account for them, by way of explanation and discussion.

Action requested of the Council

The Council is invited to note the proceedings and decisions of the Board.

Report of Board proceedings

This report is provided to support the Council of Governors in understanding the matters considered and key decisions taken at the Board meeting held in public; it is not intended to substitute the formal minutes of the proceedings.

Governors and members of the public have access to the papers for the meetings of the Board held in public, which are published on the Trust website and a link is sent to the Council. The papers can be found here (copy and paste into browser):

[May 2026 ESNEFT board meeting papers - East Suffolk & North Essex NHS Foundation Trust](#)

Governors and members of the public can attend and observe meetings of the Board held in public and are encouraged to attend at least one meeting of the Board in each year, to support their understanding of how the Board works as part of the discharge of their responsibilities.

Issue	Summary
Clinical presentation – North East Essex Community Services	The Board received a presentation on the development of community services within North East Essex, with a particular focus on frailty, neighbourhood working, and integrated care delivery. Members noted progress in shifting care away from acute settings through closer partnership working with system partners, community teams and primary care. Discussion highlighted ongoing work to reduce avoidable admissions, support earlier discharge, and strengthen community-based pathways, including the expansion of services at Clacton Urgent Treatment Centre. The Board recognised the strategic importance of community services and the need to further raise their profile within the organisation and across the wider system
Chair's update	This was Tracy Dowling's first Board meeting as Chair. Tracy thanked Mark Millar for his leadership of the Trust, during his period as Interim Chair. The Chair highlighted positive experiences from induction visits across the organisation and the value gained from direct engagement with staff and services. The Board noted the intention to strengthen opportunities for Non-Executive Directors and Governors to undertake similar engagement activity. The Board also noted the forthcoming arrival of the substantive Chief Executive and recognised the leadership provided during the interim period. Discussion also focused on reviewing how the Board uses its time, including creating additional space for strategic development, Board development activity, and consideration of the organisation's wider role within local communities.
Interim Chief Executive's update	Board Members recorded their thanks to staff for maintaining service continuity during recent industrial action, noting that despite significant participation by Resident Doctors, very low levels of planned activity were cancelled. The Board was advised that further industrial action is anticipated. The Board noted achievement of elective care performance targets, improving NHS Oversight Framework positioning, and confirmation that the Trust had exited the national performance tiering regime. Members also reviewed the improving financial position, including lower-than-forecast deficit performance and successful allocation of additional capital funding to support Community Diagnostic Centre developments in Ipswich and Clacton. Positive engagement with both Essex and Norfolk and Suffolk Integrated Care Boards was noted. The Board additionally discussed workforce priorities arising from the staff survey and recognised the need for a focused organisational response.
Integrated Performance	The Board received updates covering quality, operational, financial and workforce performance. Members acknowledged that sustained operational pressures during Q3 and Q4 had adversely affected patient care, particularly in relation to constitutional standards, harm-free care, pressure ulcers and delays in care. Particular concern was noted regarding delayed care pressures at Colchester Hospital. The Board also reviewed infection prevention and control performance, recognising that while infection rates remained comparatively high.

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	Members discussed ongoing quality improvement activity, including work linked to CQC regulatory actions, improvements in discharge decision-making processes, embedding of the RESPECT framework, and continued refinement of VTE reporting within Epic. The Board also reflected on the relative absence of patient experience metrics within the National Oversight Framework and the importance of maintaining focus on patient experience alongside performance delivery. Operationally, the Board noted improving emergency care performance across both sites, with Ipswich exceeding national four-hour standards for February and March and Colchester demonstrating month-on-month improvement. Reductions in 12-hour waits and improved paediatric emergency performance were also highlighted. RTT incomplete pathway performance achieved national standards and elective recovery remained ahead of plan. Cancer standards remained mixed, with anticipated achievement of 28-day and 31-day targets but continued recovery work required against the 62-day standard. Members recognised the cumulative operational impact associated with Epic implementation, PACS transition and ongoing industrial action. The financial update highlighted a year-end deficit of £4.1 million, productivity improvement progress, capital underspend and delivery challenges within the Cost Improvement Programme. Continued focus was noted on productivity, reducing outsourcing and agency expenditure, and maximising benefits from Epic implementation. Workforce metrics showed continuing challenges relating to recruitment, vacancy levels, sickness absence and staff engagement. The Board recognised improvements in both the content and presentation of performance reporting and discussed the need for greater specialty-level analysis in areas such as cancer pathways and RTT performance, alongside enhanced metrics linked to patient flow and corridor care. <u>Learning from Deaths Report</u> The Board reviewed mortality indicators and learning emerging from the Learning from Deaths Group and MBRRACE reporting. Members noted that mortality rates remained above the national average, although all cases had been subject to internal and external scrutiny, with no evidence that concerns identified had affected clinical outcomes. The Board discussed stillbirth and neonatal mortality rates, including contributory factors associated with maternal deprivation and elevated BMI. Discussion focused on the importance of communication with patients and families, strengthening risk prediction and improving support mechanisms such as translation services. Members also noted ongoing safety improvement initiatives, including implementation of the Maternity Ongoing Safety Surveillance tool and participation within the PARTNER maternity study. Oversight arrangements through both the Maternity and Neonatal Improvement Board and the Learning from Deaths Group were acknowledged.

Issue	Summary
Quality and Patient Safety	<u>Health Inequalities Strategy</u> The Board approved the Health Inequalities Strategy following discussion around strategic ambition, financial implications and delivery expectations. Members recognised the complexity of the wider health inequalities agenda and supported the Trust's adoption of the CORE20PLUS5 framework as the principal evidence-based approach The Board discussed the balance between ambition and available resource, acknowledging that much of the work is not directly funded through existing tariff arrangements. Members also noted the importance of maintaining alignment with wider system partners and recognised the organisation's leading position within this area of work. <u>Maternity and Neonatal Improvement Board</u> An update from the Maternity and Neonatal Improvement Board highlighted continued achievement of Quality Improvement Standards, positive progress within transitional care services, and emerging workforce challenges linked to new national standards and funding requirements. The Board also noted estate-related improvement requirements within maternity services. <u>Nursing and Midwifery Skill Mix Review</u> The Board approved the Nursing and Midwifery Skill Mix and Acuity Review, recognising the extensive clinical engagement, triangulated evidence base and risk-based methodology underpinning the recommendations. Members noted that investment proposals focused on areas demonstrating the greatest clinical need and that recruitment activity was already underway. The Board discussed introduction of housekeeper roles at Colchester, continued investment in enhanced therapeutic observation models, and the intention to reduce reliance on temporary staffing. Members also considered the importance of linking staffing investment directly to patient outcomes and experience measures through individual patient reviews.

Issue	Summary
Strategy and Transformation	<u>Medium Term Plan</u> The Board ratified the revised Medium Term Plan following prior review through the Performance and Finance Committee. Members discussed the importance of maintaining focus on delivery against key organisational targets and ensuring clarity around implementation arrangements and financial sustainability. <u>Plan on a page</u> Members considered the organisation's longer-term ambition around integrated care models and Advanced Foundation Trust status, while recognising the need to maintain focus on core operational performance and organisational stability. Discussion emphasised the importance of clearer strategic alignment, communication and delivery planning across the organisation. Members highlighted the need to articulate how individual programmes and partnerships connect together, particularly regarding community services, neighbourhood working and collaboration with system partners. <u>ESNEFT as an Anchor Organisation</u> The Board reviewed progress in relation to the Trust's role as an anchor organisation. Members noted developments in apprenticeships, support for unemployed people and young people, expansion of education partnerships and increased workforce diversity. The Board also recognised the growing contribution of volunteers, enhanced student partnership activity and wider alignment between anchor institution work and the Health Inequalities Strategy.

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People	<u>Modern Slavery Statement</u> The Board approved the Modern Slavery Statement and received assurance regarding safeguarding arrangements, ethical recruitment practices and procurement controls intended to identify and mitigate risks associated with modern slavery. Members also noted relevant workforce and patient safeguarding arrangements supporting this work. <u>National Staff Survey</u> The Board reviewed the National Staff Survey results and discussed themes emerging during a period of significant organisational change. While longer-term engagement trends remained improved compared to historical baseline positions, members noted deterioration across several measures during 2025, including morale, speaking up, bullying and harassment, staff engagement and intention to leave the organisation. The Board discussed planned actions including enhanced leadership engagement, wellbeing support, simplification of feedback processes and strengthening visible leadership. Members also reflected on wider cultural themes, including staff confidence in Freedom to Speak Up arrangements and the importance of building organisational trust that concerns raised by staff would be appropriately addressed.
Governance	The Board received updates from the Audit and Risk Committee and approved revisions to the Trust Standing Financial Instructions and Scheme of Delegation. The annual Provider Licence Self-Certification was approved following review through relevant Board committees. Members also noted changes to committee membership arrangements and approved the Board Work Programme, including future review of the Quality Strategy and staff survey action plan progress.

Issue	Summary
Public Questions and Closing Business	A question was raised regarding staff survey response rates and staff confidence in speaking up. The Board acknowledged the importance of understanding the themes emerging from the survey and committed to strengthening insight into staff experience across the organisation. In closing, the Board reflected on learning from the meeting and discussed opportunities to improve meeting effectiveness and increase organisational visibility of Board discussions and decisions.