Meeting:	Brighton and Sussex University Hospitals NHS Trust Board of Directors
Date:	29 th March 2016
Board Sponsor:	Amanda Fadero, Chief Executive (interim)
Paper Author:	Oliver Phillips, Service Strategy Director
Subject:	Operational Plan 2016/17

Executive summary

The operational plan is the Trust's annual summary of its planning aims and objectives for the year ahead, setting the direction of travel for the Trust. The Trust is required to submit a Board approved Operational Plan to NHS Improvement by 11th April. The required content and format of the plan is prescribed by NHS Improvement, with sections on Activity planning, Workforce planning, Quality planning and Finance planning.

Negotiations with the Trust's Commissioners, NHS England and local CCGs, are continuing; currently there remains some uncertainty and risk regarding income and activity levels; this position is reflected in the Operational Plan, particularly the finance and activity section.

Links to corporate objectives Identified risks and risk management actions	The plan supports the delivery of the corporate objectives for 2016/17 There remain external risks relating to the Trust's contractual position which the Trust continues to negotiate with Key internal risks are having the resource to deliver the Trust priorities; this is being addressed through the introduction of a Programme Management Office and a new quality and service improvement methodology
Resource implications	Resources are detailed in the finance section of the Operational Plan
Report history	Finance, People and Performance Committee, February and March 2016
Appendices	Appendix 1 – Priority Area Summary Table

Action required by the Board

The Board is asked to APPROVE the Trust's Operational Plan for 2016/17

Report to the Board of Directors, 29/03/16 Operational Plan 2016/17

1. Introduction/purpose

1.1 The operational plan is the Trust's annual summary of its planning aims and objectives for the year ahead, setting the direction of travel for the Trust. The Trust is required to submit a Board approved Operational Plan to NHS Improvement by 11th April. The required content and format of the plan is prescribed by NHS Improvement, with sections on Activity planning, Workforce planning, Quality planning and Finance planning.

2. Risks and Issues

- **2.1** The late publication of guidance and contractual detail, together with the late receipt of contract offers from our commissioners mean that there remains uncertainty regarding the income levels and activity requirements. In particular, local CCG Commissioners have specified a high level of QIPP schemes, predominantly focused around unscheduled care demand management. At the point of writing, no offer for 2016/17 has been received from NHS England.
- **2.2** Delivery of the Trust's recovery trajectories for both RTT and unscheduled care are also dependent on a number of actions which are not in the direct control of the Trust. For unscheduled care, the Trust is seeking to ensure that the CCGs commission sufficient out of hospital care in order to ensure that there is sufficient capacity in the community to allow for improved flow through the Trust. For elective care, our improvement trajectory is dependent on demand for services from Primary Care not increasing.

3. Next Steps

- **3.1** Following Board approval, the Operational Plan will be submitted to NHS Improvement by 11th April. Following the conclusion of the Trust's contractual negotiations with its Commissioners, an update to the Operational Plan will be brought to the Board for review.
- **3.2** The Operational Plan will be used as the basis for reviewing performance of the Trust throughout 2016/17. The Trust Board will receive quarterly updates on the delivery of the Plan during 2016/17

6. Conclusion/action required by the Board

6.1 The Board is asked to APPROVE the Trust's Operational Plan for 2016/17

Author: Oliver Phillips Title: Service Strategy Director Date: 23rd March 2016