In March 2018, the Board approved the Trust’s Operational Plan for 2018/19. The Operational Plan is a key document, establishing priorities and ambitions for the Trust for the forthcoming year.

The purpose of this paper is to:

1. provide a narrative update against agreed actions for 2018/19, including many objectives that are being successfully implemented, with examples of innovation, but more importantly;
2. provide three RAG (Red, Amber Green) ratings to indicate the extent to which the actions described deliver the desired impact or outcome. (For example, in some cases, the agreed actions have been implemented but these have not yet produced the anticipated outcome).

The 3 ‘outcome’ RAG ratings columns:

- review progress as at month 6 to implement the Trust’s Operational Plan 2018/19;
- highlight objectives and priorities where there are risks to achievement in the current financial year; and
- use current and projected 2018/19 performance to suggest implications for the Trust’s Operational Planning cycle for 2019/20.

The Finance, Business and Investment Committee has agreed a revised business planning process for 2019/20, with wider Board, operational and clinical leadership involvement. Two collaborative business planning events have been arranged for the Board and senior leaders across the Trust in mid November and late January. The mid-year review of the 2018/19 Operational Plan will help to inform context-setting analysis that will be considered at the November business planning event, to inform the priorities and work programmes for 2019/20.
Recommendations:
That the Board:

- **considers** progress in implementation of the 2018/19 Operational Plan;
- **discusses** the potential risks to achievement of objectives and priorities and mitigating actions;
- **identifies** key implications from the mid-year review of the 2018/19 Operational Plan for the 2019/20 Operational Planning cycle.

Governance/Audit Trail:

| Meetings where this item has previously been discussed (please mark with an X): |
|----------------------------------|--------------------------------------|-------------------------------|---------------------------------|
| **Audit Committee** | **Quality & Safety Committee** | **Remuneration Committee** | **Finance, Business & Investment Committee** |
| Executive Management Team | X | Directors | Chair of Committee Meetings | Mental Health Legislation Committee |
| Council of Governors | | | |

**This report supports the achievement of the following strategic aims of the Trust:**
Consolidation of Market Share : being great in our patch X
Manage the impacts of the whole system of reduced health and social care funding: working in partnership to develop cost effective out of hospital services and pathways to support the delivery of sustainable services X
Secure Funding for new or expanded services X

**This report supports the achievement of the following Regulatory Requirements:**
Safe: People who use our services are protected from abuse and avoidable harm X
Caring: Staff involve people who use our services and treat them with compassion, kindness, dignity and respect X
Responsive: Services are organised to meet the needs of people who use our services X
Effective: Care, treatment and support achieves good outcomes, helps to maintain quality of life people who use our services and is based on the best available evidence. X
Well Led: The leadership, management and governance of the organisation make sure it's providing high-quality care that is based around individual needs, encourages learning and innovation, and promotes an open and fair culture. X
NHSI Single Oversight Framework X

**Equality Impact Assessment:**
Not applicable

**Freedom of Information:**
This paper has been made available under the Freedom of Information Act.