

Green Plan

Net Zero Update

2022-2023

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Introduction

In January 2020, the campaign for a greener NHS was launched to mobilise our 1.3 million staff, setting out an ambitious, evidence-based route map and date for the NHS "To become the world's first net zero carbon health service and respond to climate change, improving health now and for future generations." As detailed in the 'Delivering a net zero National Health Service' report released alongside this campaign, it is now mandated that every Trust and ICS has a Green Plan approved by their organisation's board or governing body, reflecting national priorities by aligning with the plans, actions and timescales laid out in this report.

However, organisations such as ours which produced a Green Plan prior to the Net Zero obligation, will not need to draft a new Green Plan until the three-year cycle is complete. Although, we are encouraged to review and update our plan in light of this guidance and the 'Delivering a net zero National Health Service' report, and then to focus on accelerated delivery of our existing plan.

The 'Delivering a Net Zero National Health Service' report specifies three core objectives that all NHS Trusts must work towards in both the short and long-term. Firstly, it sets out the NHS Net Zero commitment, detailing two fundamental targets that must be met. These goals are based on the scale of the challenge posed by climate change, current knowledge, and the interventions and assumptions that underpin this analysis. The two targets are as follows:

- For the emissions we control directly (the NHS Carbon Footprint), net zero by 2040, with an ambition to reach an 80% reduction by 2028 to 2032.
- For the emissions we can influence (our NHS Carbon Footprint Plus), net zero by 2045, with an ambition to reach an 80% reduction by 2036 to 2039.

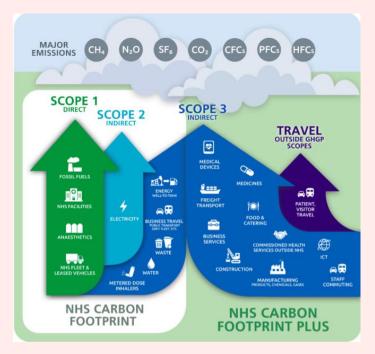


Figure 1: Carbon footprint of NHS in England, Delivering a 'Net Zero' National Health Service (2020)

Scope 1: Direct emissions from owned or directly controlled sources, on site

Scope 2: Indirect emissions from the generation of purchased energy, mostly electricity

Scope 3: All other indirect emissions that occur in producing and transporting goods and services, including the full supply chain, patient and visitor travel

Further ambitions include, improving health and patient care and reducing health inequalities, as well as building a more resilient healthcare system that understands and is responding to the direct and indirect threats posed by climate change.

Since the publication of our original Green Plan, the current global Covid-19 pandemic has further reinforced the connection between global public health, healthcare systems and populations across the world. The NHS' response to the pandemic has demonstrated an impressive capacity to adapt and respond in an emergency. It also highlights the importance of preparedness for future pandemics, and the wider health implications of climate change.

The Covid-19 outbreak has influenced our behaviour, including how we work and interact with our colleagues and patients. Perhaps it has also increased our awareness of the vulnerability of global and planetary health. Environmental issues continue to permeate our lives including single use plastics, air pollution, drought, flood, warming temperatures and food security. Therefore, despite significant progress, the NHS must continue to play its part in mitigating the climate emergency. The NHS remains one of the largest single emitters of carbon dioxide in the UK. Its operations account for 5.4% of the UK's total carbon emissions and 40% of all public sector emissions.

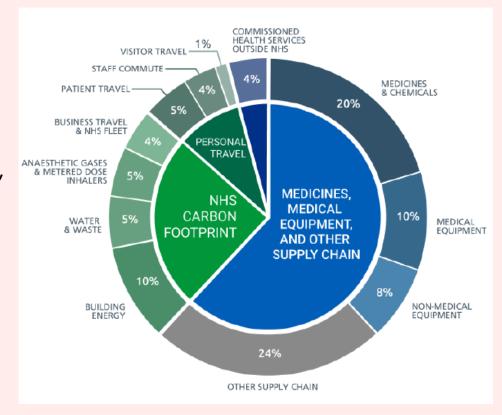


Figure 2: Sources of carbon emissions by proportion of NHS Carbon Footprint Plus

As a result of the publication of the 'Delivering a Net Zero National Health Service' report, the format of the Green Plan has altered to accommodate the Net Zero commitments. Firstly, the Sustainable Development Assessment Tool (SDAT) which has historically been utilised to create and measure progression of the SDMP/Green Plan has been removed from service. However, the Greener NHS team are currently working on an updated measurement tool which will aid the quantification of our progress in line with the NHS Net Zero targets. This tool is set to be published in the new year and will be ready for deployment in our next Green Plan due in 2023.

Although the SDAT has been removed, we have continued to track our progress with a local version of the tool. Since our Green Plan was published, we have advanced from a score of 38% to 57%, signifying that good progress has been made so far. Secondly, the core chapters of the Green Plan have been altered to align with the main drivers of change and sources of carbon emissions across the NHS. This document serves to demonstrate the progress made to date, as well as setting out what we want to achieve in the remaining term and beyond, ready to inform our new Net Zero Green Plan to be published in 2023.



Figure 3: SDAT tool progress

Progress Update



Purchasing 100% renewable electricity tariff from April 2021



Green Plan made widely available to all Staff, Visitors and Patients



Board level Net Zero lead appointed



Active travel facilities improved



Continued rollout of LED lighting



Installation of first
Solar Panels at
Ipswich

Key Areas of Focus

As detailed in the introduction of this document, the primary chapters of the Carbon Net Zero Green Plan have been adapted to accommodate the main drivers of change and sources of carbon emissions across the NHS. In each new section, we have sought to specify the lead, the carbon hotspot, the aims and actions we seek to input. This is to ensure we continue making progress on our 2020-23 Green Plan, are ready for the 2023-26 Green Plan, and are on track to reach NHS Net Zero by 2040. These categories are listed below:

Estates and Facilities

Sustainable Models of Care

Digital Transformation

Travel and Transport

Medicines

Supply Chain and Procurement

Food and Nutrition

Adaptation

Workforce and System Leadership

Estates & Facilities

Lead:

• Director of Estates & Facilities

Carbon Hotspot:

- Building Energy use
- Waste Streams (segregation of waste, furniture and equipment re-use etc.)

Aims:

- Train our E&F staff on Carbon Literacy for Band 5 and up, for Band 4 and below an E-module will be circulated (currently being created by Greener NHS)
- Behaviour management and culture change to a low carbon, reduce reuse philosophy
- Deploy more renewable energy across all our sites
- Work with our supply chain by setting guidelines to certify they comply with our Net Zero ambitions, ensuring compliance by April 2027
- Ensure our processes for Capital Projects, New Works and Backlog activities are adapted to Net Zero standards as and when released

- Monitor and record use of E&F pool cars/vans
- Update the BMS system and ensure energy reporting is built in
- Carry out audit of building services and fabric to all ESNEFT buildings
- Review our procured items
- Improve waste segregation at Ipswich Hospital
- Install LED lighting in all non-clinical areas

Sustainable Models of Care

Lead:

• Director of Strategy, Research and Innovation

Carbon Hotspot:

Patient <u>services</u> and travel

Aims:

- To have plans for embedding carbon reduction principles in the way that all care is delivered, including digitally enabled care, default preference for lower carbon interventions where clinically equivalent, and reducing unwarranted variation in care delivery & outcomes resulting in unnecessary carbon emissions
- Enable provision of care closer to home
- Visibility on the key environmental measures and impacts at service-byservice level.
- Reduce patient travel to for outpatient and diagnostic services.

- Work with clinicians locally to consider pathways or clinical specialities that could be decarbonised, and share best practice
- Promote and support the uptake of non-face-to-face clinical contacts including video and telephone consultation
- Develop diagnostic and outpatient treatment services based in the community, closer to patients' homes
- Repatriate out of area clinical services
- Transform service delivery models to reduce the total number of visits required
- Increase the use of remote monitoring and self-care through the use of technology

Digital Transformation

Lead:

• Assistant Director for Digitisation & Business Intelligence

Carbon Hotspot:

IT Equipment and usage

Aims:

- To invest in digital transformation, and deploy technology wherever possible to reduce our carbon footprint
- To increase/allow patients to access virtual outpatient and primary care appointments, where clinically appropriate

- Baseline ICT footprint in line with published materials by HMG Sustainable Technology Advice & Reporting (STAR)
- Adopt Green IT measures and decarbonise the digital use from the Trust through data centre efficiency and renewably-charged servers
- Expanding the use of telemedicine to deliver some care remotely
- Using digital systems to reduce the use of paper records, printing and postage

Travel and Transport

Lead:

Associate Director of Facilities

Carbon Hotspot:

- Vehicle Emissions from Trust Vehicles & Commissioned Services
- Grey / Staff Fleet

Aims:

- Increase the levels of active travel and use of public transport
- Ensuring that only ULEVs or ZEVs are available to staff through the car salary sacrifice scheme
- All new purchases and lease arrangements are for cars that are ultra-low emissions vehicles (ULEVs) or zero emissions vehicles (ZEVs)
- Establish a plan detailing the organisation's approach to improving air quality, e.g. through supporting active travel and participating in the antiidling cleaner air hospital framework
- Maximising efficiencies in the transport of goods and services commissioned by the organisation, such as patient transport, courier services and deliveries.
- Staff/Visitor/Contractor Training and awareness

- Capture information on Grey Fleet
- Obtain information on services commissioned by the organisation
- Align with any local ultra-low emission or clean air zones
- Work with the national Greener NHS team to undertake a review of the existing Fleet within the region

Medicines

Lead:

Consultant Anaesthetist

Carbon Hotspot:

Medical Gases

Aims:

- To reduce the use on inhalational anaesthetic agents
- To reduce the percentage of desflurane use to less than 10% of total inhaled anaesthetic gases by April 2022 and continue to challenge usage.
- Develop plans for clinically appropriate prescribing of lower carbon inhalers, in line with the commitment of a 50% reduction by 2028 and a 6% reduction in 2021/22 on a 2019/20 baseline. (IIF)
- Increase alternate methods of anaesthetic for example TIVA, central neuraxial block or regional anaesthesia
- Reduce nitrous oxide waste

- Education of the anaesthetic department of the global warming potential and the CO2e of the inhalational agents
- Setting out plans to reduce the use of desflurane in surgery to as little as practically possible.
 Current usage of desflurane is 12.9% of volatile gases used at ESNEFT which is above the regional and national average. This means it is likely that sevoflurane usage will increase slightly
- Capture of the inhalational agents to prevent them entering the atmosphere
- Implementing approaches to optimise use of medical gases, including reducing nitrous oxide waste
 - Work with the ESNEFT Medical Gas Committee look at Nitrous Oxide use and see whether there are leaks in the pipeline system or if there are other parts of the system where wastage is occurring. Look at what is procured and what is used to identify if there is a discrepancy.
- Entonox use look at Methoxyflurane as an alternative in Emergency Department as the device captures the waste.
- Continue to replace Metered Dose Inhalers with dry powder alternatives and if unavoidable, ensure disease treatment and patient education minimise environmental impact.
- Promote the use of other anaesthetic techniques such as Total Intravenous Anaesthesia and ensure that adequate guidelines and SOPs are in place for this.
- Use low flow anaesthesia (max 1.5 l/min) during maintenance in all cases

Supply Chain and Procurement

Lead:

- Head of Procurement and Contracting
- Head of Clinical Procurement

Carbon Hotspot:

- Purchased goods and suppliers
- Medical Devices

Aims:

- Reduce scope 3 emissions from procurement
- To build Sustainable Procurement & Social Value into Procurement activity at ESNEFT
- Increase the number of local suppliers from which we purchase.
- To work collaboratively across the ICS & Region to review impact from Medical Devices and develop a work plan of change to include reducing plastic & adopting multi-use devices where there is evidence to support a change
- To work with NHS Supply Chain to reduce the numbers of commercial deliveries to ESNEFT sites and consolidate where possible into fewer deliveries
- Ensure ESNEFT utilises suppliers that have a similar sustainability ethos to us.
- To take action to address single use plastics, and specifically eliminate unnecessary catering plastics
- Develop a regional programme seeking to support sustainable PPE procurement and use wherever possible.

- Review and implement the new Procurement Policy Notes (PPN's) for sustainable procurement and social value in 2022
- To deliver carbon literacy training for all procurement staff by the end of 2022/23
- Include sustainability in tender evaluation criteria.
- Remove barriers and ensure budgetary mechanisms enable and support sustainable procurement by demonstrating and documenting long-term benefit
- Run programmes or projects to reduce use of clinical single use plastics.
- Adopt programmes looking to reuse items, such as reusable gowns.
- Only purchase 100% recycled paper, and reduce paper usage
- To review the NHSEI sustainable procurement guides for walking aids and medical device remanufacturing and adopt into ESNEFT by end of 2022/23
- To review all direct spend and move to transact through NHS Supply Chain where achievable
- To review the supplier roadmap for Net Zero and engage with our suppliers to collate and report on their carbon reduction plans.

Food and Nutrition

Lead:

• Associate Director of Facilities

Carbon Hotspot:

- Emissions from food production and transport
- Food waste

Aims:

- Measure and reduce food waste
- Achievement of the NHS Plastics Pledge.
- Exceeding government guidelines (e.g., Government Buying Standards through external accreditation such as Food for Life, red tractor, dolphin friendly, sustainable fish cities mark).
- Communicate the health and carbon benefits of diets with fewer processed foods.

- Review and adapt menus to offer healthier lower carbon options for patients, staff and visitors
- Provide space for growth and cultivation of food.
- Review products available locally and increase use where possible.
- Assess all catering contracts and work closely with the Procurement Department.
- Review food disposal systems appropriate for each site.
- Introduce Meat Free days.

Adaptation

Lead:

• Associate Director of EPRR, EFM Contracts and Community Property

Carbon Hotspot:

N/A

Aims:

- Ensure new buildings and updates to existing buildings are compliant with HBN 00-07 and adaptable to climate change.
- Adhere to Trust policies and NHS guidelines regarding adaptability and climate resilience.
- To guarantee our emergency plans consider support to vulnerable communities during extreme weather events.

- Put our plans to mitigate the impact of climate change on the organisation's risk register
- Climate change adaptation planning referenced and considered in all new service delivery design and Business Continuity Plans.
- Invest in mitigation and adaptation technologies.
- Ensure there are established governance links between Capital planning, EPRR steering groups and Sustainability groups.

Workforce and System Leadership

Lead:

- Kate Read Director of HR and OD
- Associate director of People, Performance and Workforce Transformation

Carbon Hotspot:

Emissions from staff day-to-day activities

Aims:

- Empower staff to become advocates for sustainability in both professional and personal lives.
- Encourage staff with training, support and incentives to engage with active travel.
- Support agile and flexible working arrangements.
- Develop a network of ESNEFT Green Champions to facilitate communication and actions.
- Ensure members of the Board and Senior Staff are carbon literate and numerate.

- Encourage staff to undertake climate change awareness training e.g.
 'Delivering a Net Zero NHS' E-learning module
- Include sustainability in ESNEFT Induction Programme and further training.
- Reflection of approach to sustainability to be included in staff appraisal.

Amended Governance

Since the publication of our original Green Plan we have made some amendments to our governance structure, in order to guarantee clear leadership, strategic direction and the support of senior staff, stakeholders and other decision makers. Ensuring we successfully deliver the actions outlined within the Green Plan.

Trust Board

The Board of Directors will retain responsibility for reviewing and approving the produced and submitted Green Plan, along with providing strategic oversight and support where necessary.

Sustainability Steering Group

This group meets on a quarterly basis and is responsible for ensuring that the Green Plan is maintained, implemented and reported against, and that all projects are on track. It includes a range of stakeholders associated with the new net zero categories detailed in this document.

Net Zero Category Groups

Each stakeholder responsible for one of the categories in this document will be encouraged to establish their own sub-group or to integrate Sustainability into an existing one. These groups will further explore the actions recorded in each dedicated section, which will then feed back to the main steering group.

Staff Networks

Within each category, leads will also be encouraged to establish a staff network, where staff from all levels can share their ideas and concerns regarding sustainability in their department and the wider Hospital. This will then feed back up through the groups.