East Suffolk and North Essex NHS Foundation Trust

ESNEFT Green Plan

2024 - 2027

Foreword

Thank you for reading our updated Green Plan!

A robust ESNEFT Green Plan has the potential to support our strategy of improving health outcomes/reducing inequalities, reduce costs by being more efficient, and increase our attractiveness as a place to work for the next generation of talent.

Most notably, this document makes the connection that we are not trying to achieve Net Zero solely because there is an environmental need to do so, nor because there is legislation that requires us to do so, but because there is evidence that doing so will help improve health outcomes. This Green Plan therefore provides us with a key component of enabling the Trust to achieve its Clinical Strategy.

This document has been written to reconfirm what we are trying to achieve, consider where we have made progress so far and then to re-establish the overarching plan for the next three years.

This latest Green Plan will be embedded into all that we do and recognises that sustainable healthcare is only achievable if the values of sustainability are entrenched throughout our organisation. It is our ambition that every person within the Trust recognises the part that they play, regardless of the size, in helping the Trust achieve its Net Zero goals.

ESNEFT values the importance of protecting our natural environment for the benefit of the physical and mental health and well-being of our community, patients and staff, both now and in the future.

The global drivers for change are immense, the challenges well documented, and the passion widely publicised in recent times to secure a world for future generations. As detailed in this document, the NHS, and indeed our own Trust, has a large carbon footprint and a responsibility to address its corporate and social obligations.

Whilst the document sets out our targets and strategic aims to meet the objectives specified, it will also be incumbent upon all of our staff and stakeholders in delivering the actions specified within each category, and in securing a sustainable future for all.

I look forward to working with you on this important agenda.

Nick Sammons
Director of Estates and Facilities
ESNEFT Accountable Lead for Sustainability

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Chapter 1 – Issue, Background and Context

NHS Net Zero

In October 2020, the NHS became the world's first health service to commit to reaching carbon net zero in response to the profound and growing threat to health posed by climate change.

In October 2021 the Chief Executive of the NHS, Amanda Prichard, stated that climate change is a health emergency, as well as an environmental emergency and how important activities were to make a difference to patients, staff, communities and to save lives.

As the largest public sector emitter of carbon emissions, producing approximately 20 million tonnes of carbon a year (5.4% of the UK's total carbon emissions), the NHS has a duty to respond to the government targets which are entrenched in law.

The 'Delivering a Net Zero Health Service' report sets out a clear ambition and two evidence-based targets (and associated interim targets) against 1990 levels:

1. For our "**NHS Carbon Footprint"** (the emissions we control directly – Scope 1)
    a. **Net Zero by 2040**
    b. 80% reduction from a baseline of 59,871 tCO_2e by 2028-2032

2. For our **"NHS Carbon Footprint Plus"** (the emissions we control directly AND the emissions we can influence – Scope 1, 2 and 3)
    a. **Net Zero by 2045**
    b. 80% reduction from a baseline of 212,204 tCO_2e by 2036-2039

The greenhouse gas protocol (GHGP) scopes cover a wide set of emissions, and supports international comparison and transparency, however it does not cover the full scope of emissions from the NHS. The NHS Net Zero expert panel has therefore agreed that the NHS will also work towards Net Zero for an NHS Carbon Footprint Plus, which includes all three scopes listed below, as well as emissions from patient and visitor travel and medicines used within the patient home.

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

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

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

To reach Net Zero, the NHS will need to remove 6.1 $MtCO_2e$ from the NHS Carbon Footprint and 24.9 $MtCO_2e$ from the NHS Carbon Footprint Plus. Every area of the NHS will need to act if Net Zero is to be achieved. The greatest areas of opportunity for change are in the supply chain, estates and facilities, pharmaceuticals, medical devices and travel.

The elements that comprise the NHS Carbon Footprint/Plus along with the specific emissions components are illustrated as follows:

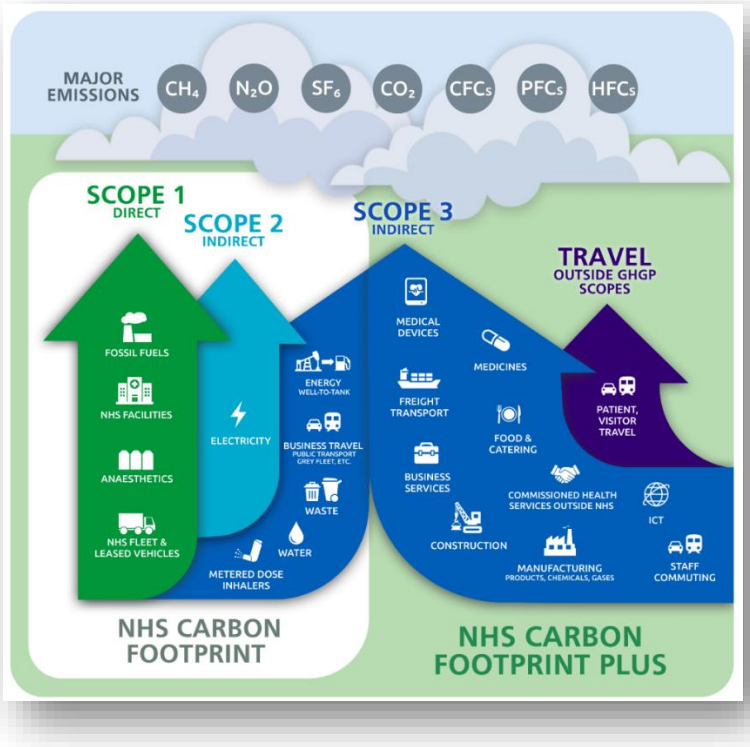


Figure 1: Graphic from Delivering a 'Net Zero' National Health Service

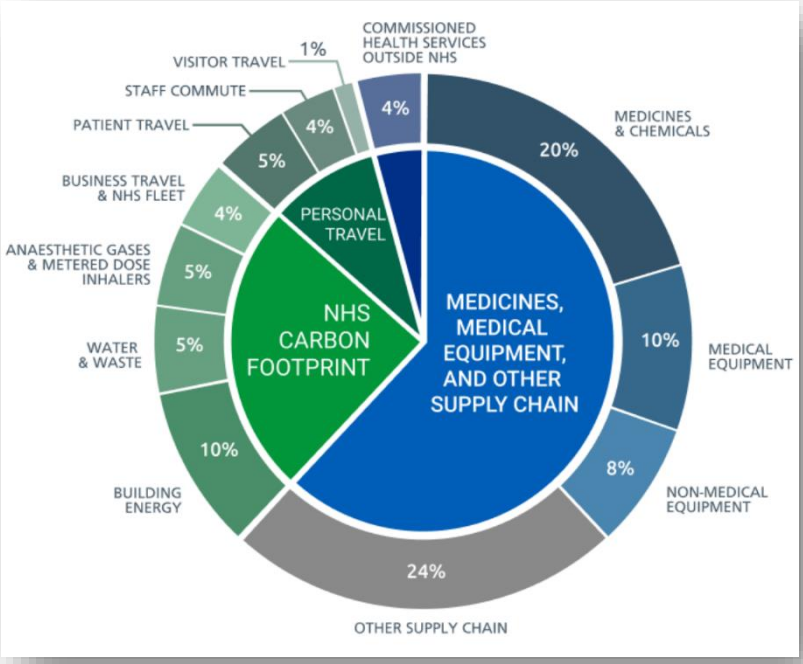


Figure 2: Graphic from Delivering a 'Net Zero' National Health Service

Drivers for Change

Legislative:

The **Civil Contingencies Act 2004** compels particular organisations to prepare for adverse events and/or incidents. Climate change is a major driver of many of the emergencies and extreme events that the UK needs to prepare for. Heatwaves, flooding and cold weather can have direct negative impacts on health, as well as disrupting the operation of the NHS.

The **Climate Change Act (2008)** was introduced to ensure the UK cuts its carbon emissions by 80% by 2050 to become a low carbon economy. The Act sets in place a legally binding framework allowing the government to introduce measures which will achieve carbon reduction and mitigate and adapt to climate change. As the largest public sector emitter of carbon emissions, the NHS has a duty to respond to meet these targets.

The **Public Services (Social Value) Act (2012)** requires all public bodies in England and Wales to consider how the services they commission and procure might improve the economic, social and environmental wellbeing of the area. The legislation affects a range of organisations including those in the NHS, public health, local authorities, government departments and housing associations.

NHS Mandatory Drivers:

The **Sustainable Development Strategy for the Health, Public Health and Social Care System 2014-2020** (gateway No 01011) was launched in January 2014. It describes the vision for a sustainable health and care system by reducing carbon emissions, protecting natural resources, preparing communities for extreme weather events and promoting healthy lifestyles and environments.

The **NHS Carbon Reduction Strategy for England (CRS)** sets an ambition for the NHS to help drive change towards a low carbon society. The strategy shows the scale of reduction in carbon required for the NHS to meet its legal targets set out in the Climate Change Act. It also recommends key actions for the NHS to become a leading sustainable and low carbon organisation.

The **NHS England Long Term Plan**, launched in 2019, committed to reducing the NHS carbon footprint by 51 per cent (against a 1990 baseline) by 2025, and reducing it to 80 per cent of 1990 levels by 2050. Other commitments include rolling out the use of low emission vehicles and eliminating heating fuels such as coal and oil, as well as minimising usage of single-use plastics.

Greener NHS Campaign

In October 2020, the NHS became the world's first health service to commit to reaching carbon net zero, in response to the profound and growing threat to health posed by climate change. The "*Delivering a Net Zero Health Service*" report sets out a clear ambition and two evidence-based targets. Net zero by 2040 for the NHS Carbon Footprint, with 80% reduction by 2028 to 2032. Net Zero by 2045 for the NHS Carbon Footprint 'Plus', with an ambition for an 80% reduction by 2036 to 2039.

ESNEFT Green Plan

This Green Plan covers the period January 2024 to March 2027 and is the second plan produced by East Suffolk and North Essex NHS Foundation Trust (ESNEFT). It outlines and reaffirms our commitment to a Carbon Net Zero future, provides an update on what we've achieved so far and our strategy for reaching that goal. This strategy sets out the approach and aims to take ESNEFT towards Net Zero whilst also recognising opportunities to maximise environmental benefit, improve health outcomes, reduce costs and ultimately make our Trust an exemplar for sustainable healthcare, making it an attractive place to work and receive treatment. The strategy will be supported by associated action plans covering each of the key themes outlined further on.

At ESNEFT we provide hospital and community health care services for Colchester, Ipswich and local areas. Formed on 1 July 2018, ESNEFT is the largest NHS organisation in the region.

We provide services from Colchester and Ipswich hospitals, Aldeburgh, Clacton, Halstead, Harwich and Felixstowe community hospitals and Bluebird Lodge in Ipswich. We also provide community services in Suffolk and North Essex. With the Office for National Statistics projecting growth in the East of England at 7% between 2018 and 2028, the demand on our services and the associated impact of delivering them will become even greater if action is not taken.

We aim to provide exceptional quality of care, with the right level of clinical expertise, improved buildings and facilities, and safe systems and processes. To achieve this vision, we rely upon the availability of natural resources such as energy, food and water, alongside other man-made products such as pharmaceuticals, anaesthetic gases and medical equipment, all of which contribute to our carbon footprint.

In providing care to our community, the Trust consumes a large quantity of natural resources through the consumption of significant volumes of energy, fuel, food, paper, clinical goods, pharmaceuticals and single-use plastics. These all contribute to ESNEFT's carbon footprint, influencing the effects of climate change and its related impacts, both locally and globally.

Anchor Institutions Working Together

Our green plan is aligned with our local public sector partners in Suffolk and Essex to drive Net Zero targets that deliver real health benefits as quickly as possible. We also recognise that we need to utilise our influence on those partners as an exemplar organisation to improve health outcomes and reduce the burden on Healthcare Services, such as by reducing Local Air Pollution in more densely populated areas.

Suffolk and North East Essex Integrated Care System

The Suffolk and North East Essex Integrated Care System (SNEE ICS) is a partnership of health, local government and voluntary sector organisations.

Its primary ambition is 'health equality for everyone'.

Tackling climate change in health and social care provides not only an opportunity to think differently together, but also an opportunity to do things differently together. A system-wide approach can deliver benefits in terms of partnership working, collaboration and efficiency, ensuring we tackle the challenges of the climate emergency and improve the wider determinants of health.

Chapter 2 – What We are Working to Achieve

Sustainability in Healthcare

Sustainability is meeting the needs of today without compromising the ability of future generations to meet their own needs. Simply, it's about living within the resources of our planet, achieved by ensuring the lowest environmental impact at an affordable price with acceptable impacts on society.

The World Health Organisation (WHO) estimates that there are more than 13 million avoidable deaths globally every year from environmental causes with climate change frequently being described as "*the single biggest health threat facing humanity. The climate crisis is also a health crisis*". Without doubt the climate is changing, the change is accelerating, and this change has direct and immediate consequences for our patients, the public and the NHS. The devastating impacts of COVID-19 and other emerging infectious diseases, of which climate change and species exploitation are major drivers, could prove to be just the tip of the iceberg if we continue on our current unsustainable path.

The effects of climate change will inevitably have the greatest impact on those who are most vulnerable, exacerbating existing health inequalities. Direct impacts on health from extreme weather events include heat stress, water shortages, increased UV exposure and poor air quality, resulting in injuries, fatalities, increased incidence of skin cancers and exacerbations of respiratory diseases, for example, asthma and COPD. Indirect impacts include increased infectious diseases from contaminated food and water following extreme weather events such as droughts and floods as well as changes in vector distribution and ecology such as malaria. Increasing heat, CO_2 and droughts will cause food insecurity, likely leading to malnutrition. We are already seeing deterioration in mental health, particularly amongst children and young people, due to climate change as well as socioeconomic impacts from loss of homes and livelihoods. As a result of these health impacts, the demand on our health services will significantly escalate. In addition to this, climate change risks disruption to NHS supply chains and infrastructure, limiting the NHS's capacity to treat patients.

With over 1.2 million employees in England, the NHS is well placed to influence staff in terms of energy awareness and sustainability, with the potential to have considerable and far-reaching impacts in the wider community. Put simply, reducing emissions will save admissions. Tackling the causes, and mitigating the impacts of climate change, will provide us with an opportunity to improve health outcomes on numerous fronts.

At ESNEFT we recognise the circular connection between caring for our patients and that our subsequent effects on the environment are affecting our local population and therefore adding to the demand on our services, which sits uncomfortably with the principal of 'first do no harm'. We are therefore committed to taking action at all levels by implementing effective strategies that will mitigate our own contribution to climate change, facilitating the delivery of a truly sustainable healthcare service fit for the future.

Subsequently, many of the actions that can be taken to reduce carbon emissions have potential benefits for healthcare and help to address inequalities and therefore naturally support our Trust Clinical Strategy. The graphic below from the Centre for Sustainable Healthcare shows how interventions interact with each other and produce positive outcomes, reducing prevalence rates of most of the chronic non-communicable diseases causing long-term ill health and impacting capacity in health services. With an increasingly elderly population is it more important than ever to increase years of healthy life and reduce complex co-morbidities.

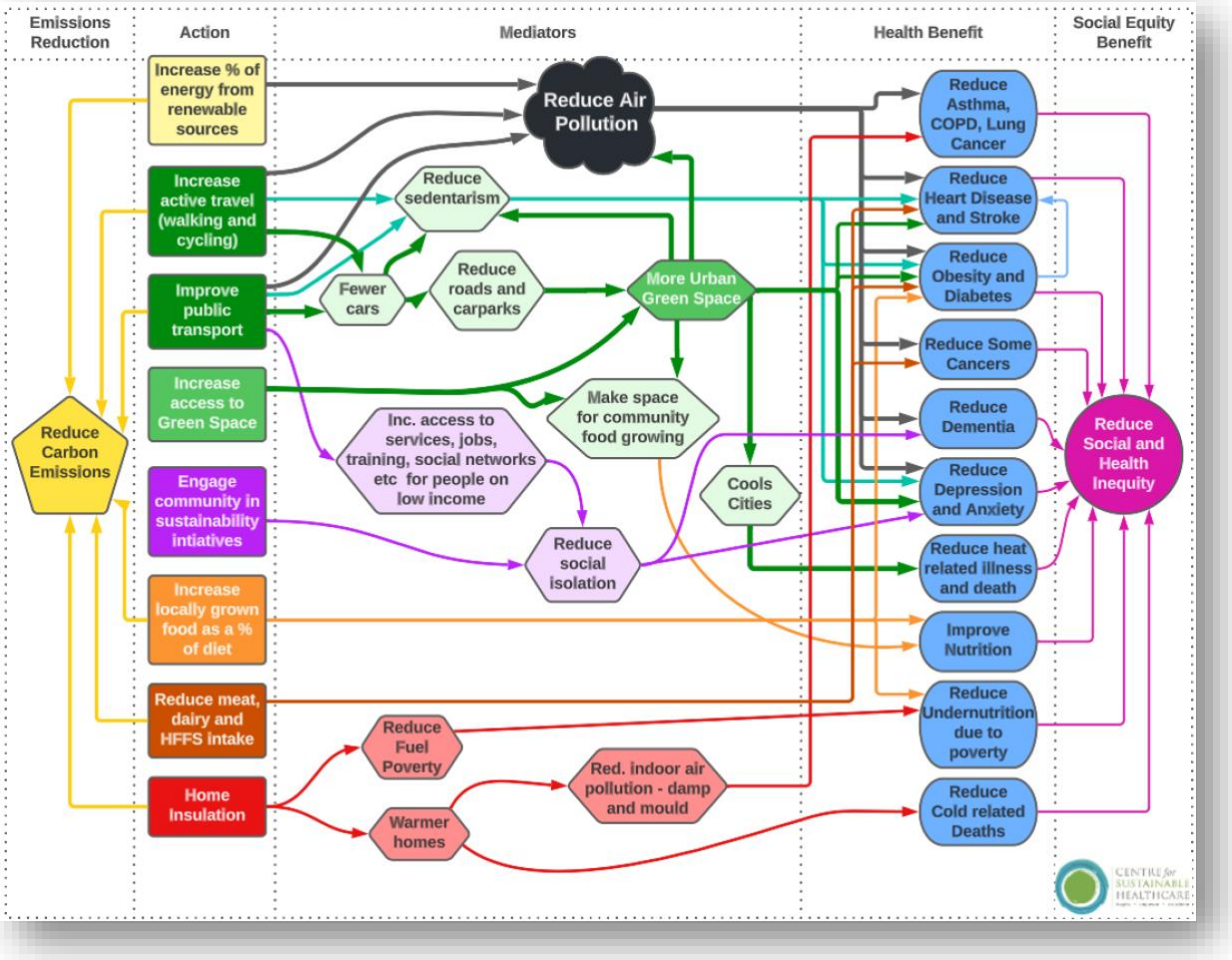


Figure 3: Graphic by Centre for Sustainable Healthcare 2022

Guiding Principles

The vision of the Green Plan supports our organisational vision "*to provide the communities we serve with excellent healthcare and build a better future for east Suffolk and north Essex".* Our philosophy of Time Matters will also help in identifying areas of improvement where resources are potentially wasted. Furthermore, the Principles of Sustainable Healthcare support the ESNEFT Clinical Strategy's objectives.

Figure 4: Graphic from Suffolk and North East Essex Integrated Care System Green Plan

These principles underpin the '3 up/3 down' desired outcomes for the ICB, our partners, our suppliers and our communities.

To drive 3 things up:

↑ Increasing Green Spaces & Nature
↑ Increased Climate Resilience
↑ Additional Social Value

And driving 3 things down:

↓ Carbon Emissions
↓ Air Pollution
↓ Waste

As a system we are focused on the following:

- tackling the causes and effects of health inequalities and poverty
- reducing the impacts of air pollution on health
- reducing and mitigating the impacts of climate change on the system and population health
- delivering the NHS Long Term Plan (value for money, staff development, embracing digital and doing things differently)
- providing leadership through actions, partnerships, engagement, and transparency to deliver a net zero NHS.

To take action in these areas, the Trust will assist with the Suffolk and North East Essex ICS (SNEE) Guiding Principles:

- To inspire and educate our workforce, system partners and communities to be more sustainable in their work and home lives.
- To equip, upskill and provide the right tools for an inspired system workforce to drive the behaviour and system changes required to deliver a net zero system.
- Ensuring SNEE is a climate resilient health system capable of anticipating, responding to, coping with, recovering from and adapting to climate-related shocks and stress, so as to bring about sustained improvements in population health, despite an unstable climate.
- To be an ICS that embraces the principles of sustainable models of care, namely prevention, patient self-care, lean service delivery and providing low carbon alternatives.
- To commence the transition from a linear consumption model of 'reduce, reuse, recycle, dispose' to a circular economy that minimises waste, carbon and consumption.
- To inspire and equip our people to adopt low carbon travel options, maximising active travel, digital and hybrid ways of working opportunities wherever possible.
- To embed the eight principles of our ICS Digital Strategy into our sustainability programme, ensuring our staff recognise and embrace digital transformation as an enabler to reduce carbon emissions, improve patient care and optimise system working.
- To embed the principles of the NHS 'make every kilowatt hour count' approach to decarbonising our estate as we transition to a low carbon estate and renewable energy sources.
- To establish our carbon footprint and a carbon budget providing visibility and measurement to drive positive outcomes, ultimately achieving the NHS carbon reduction target by halving emissions from 2019 levels by 2030.
- To be data driven in order to provide transparency, show leadership and underpin a culture of continuous improvement and accountability.
- To reduce health inequalities within our communities using our position as a key anchor organisation to drive positive social change that improves health and wellbeing outcomes.
- To think big and act locally, ensuring a targeted local focus accelerates progress and inspires specific communities where key activity is focused.

Chapter 3 - Progress Made Since the Last Plan

Our last Green Plan and Net Zero Update outlined a number of aims and actions through which we have introduced changes and achieved outcomes across the Trust. In keeping with the 'Key Areas of Focus' outlined in the latter of those documents, the key highlights of these are outlined below:

Workforce and System Leadership

- E-Learning Module 'Building a Net Zero NHS' introduced as role essential for Band 8b and above. Links to the same training have been provided on our intranet for all staff to access.
- Trust Business Cases now include a section to give an outline impact assessment on Net Zero as standard.
- Responsibility for Sustainability is included in all Job Descriptions throughout the Trust.
- Board level training provided by the Centre for Sustainable Healthcare introduced.

Communications and Engagement

- We created the Sustainability "X" (formerly Twitter) account (@GreenerESNEFT)
- A dedicated email address (Sustainability@esneft.nhs.uk) for staff queries and suggestions was introduced.
- Regular references to sustainability and the work around the Green Plan included in corporate communications such as the public website, intranet, Team ESNEFT News and main social media accounts.
- Building momentum and awareness through celebrating our successes through colleagues' stories internally and externally.
- Proactively promoting our achievements to the media through press releases.
- Introduced a Green Champions network which creates a two-way interaction on issues surrounding sustainability within the Trust.

Clinical Practice & Medicines

Reduced our Carbon Footprint by 1,243.96 tCO_2e annually from the 2019-20 figure, which is ahead on the trajectory through the following changes.

- Removal of desflurane, a potent greenhouse gas with safer, greener alternatives, from all anaesthetic machines at Colchester Hospital.
- Removal of piped nitrous oxide from all theatre suites at Colchester Hospital with an ongoing audit of current use at Ipswich Hospital.
- Guidance has been produced for prescribing low carbon inhalers across our system.

Estates and Facilities

Reduced our Carbon footprint by 2,838.67tCO_2e on Building Energy and 131.40tCO_2e on Water annually from the 2019-20 benchmark. Both of which are ahead of the target figure for 2022-23 with Water almost at our 80% reduction target.

- General Waste from Aldeburgh, Colchester, Felixstowe & Ipswich Hospitals and Bluebird Lodge is diverted from landfill to alternative disposal routes.
- EV Chargers introduced at Ipswich Hospital, other sites are in the pipeline.
- Warp It, a furniture reuse programme launched.
- Reverse vending machine being trialled at Ipswich Hospital.

- Additional 35kWp Solar PV introduced at Ipswich Hospital.
- 100% renewable electricity purchased for all sites owned or wholly operated by ESNEFT.
- Alternative Steam Traps introduced at Ipswich Hospital (streamlined with Colchester Hospital), reducing our Steam consumption by 11% and saving 104.48tCO_2e per annum.

Travel and Transport

- Enabling more active travel through 50% discounts for all ESNEFT staff on First Bus and Ipswich Buses services and 10% discount on certain season tickets with Greater Anglia.
- Promotion of 'last mile' alternative travel through the provision of free park and ride services.
- No idling signage installed at major pick-up/drop off points across both sites.
- Cycle shelters installed at Community sites.
- Lockable bike boxes installed at Ipswich and Colchester Hospitals.
- Weekly bike maintenance sessions offered.
- Motorcycle shelter installed near the GAC at Ipswich Hospital.
- 12 e-bikes purchased.
- Access offered to the Cyclescheme, whereby staff can save up to 40% off the cost of a new bike.

Food and Nutrition

- Meat free day in our restaurants.
- Food waste machine.

Green Space and Biodiversity

- We include biodiversity in our new build projects to ensure a net-positive solution is provided within any construction/major development scheme.
- We have introduced no mow periods to some areas of the Hospital Grounds.
- We have full time in-house Groundskeepers, promoting in-house expertise.

Supply chain and Procurement

- Carbon Literacy Training introduced for category managers and key procurement staff.
- All tenders include a minimum 10% Social Value Score, which is used to encourage our suppliers to support the local community and enhance their environmental performance when carrying out works on our behalf.

Clinical Transformation

- Creating a new Community Diagnostic Centre at Clacton - In the first 6 months of operation, it has already supported the delivery of 61,000 tests and scans for the local population, facilitating care closer to home and therefore reducing visitor and patient travel by 211,225 Miles.
- Delivering digitally enabled personalised cancer care and pre-habilitation to improve outcomes and reduce carbon emissions.
- Virtual Wards - The implementation of ESNEFT virtual wards contributes to improving patient care, reducing the environmental impact of healthcare operations and embed sustainability into the heart of our clinical pathways.

Digital Transformation

- Enabled a reduction in paper use by improving printing services and standardising across the Trust (equivalent to 78 trees saved / 6808Kg Co2 saved in a year), whilst also completing the switch to recycled unbleached paper
- Trust adopting Cloud First policy - currently 25 % data centres cloud-based
- Further enhanced the network capabilities to enable remote care opportunities including using virtual monitoring of patients via wearable technologies
- Trust encourages remote/agile working practices (e.g. staff meetings, multi-disciplinary meetings) resulting in more than 20% of staff having the necessary access and devices to regularly work from home
- Old equipment that is still serviceable to others but beyond its life with ESNEFT is reused within SNEE ICB.

Adaptation

- Adaptation group established with representation from clinical services, IPC, transformation alongside Estates & Facilities' capital and operational teams.
- ESNEFT are standing members of Local Resilience Forums and feed into multiagency risk assessment, planning and testing for extreme weather events.
- ESNEFT Business Continuity Plans (BCPs) include loss or denial of access to premises along with loss or impact of critical resources and staffing levels which align with the reasonable worst-case scenario associated with extreme weather events.
- ESNEFT has in place an inclement weather plan covering all current extreme weather threats and incorporating the UKHSA heat and cold weather plans up to an including level 4 alerts (national emergencies).

Chapter 4 – Current Status

ESNEFT Net Zero

By the end of the period for this iteration of the strategy, ESNEFT will need to have reduced its carbon footprint by 78,355.43 tonnes to be on track for meeting these ambitions and must therefore avoid adding to our existing Footprint and Footprint Plus wherever possible. As of 2022-23, we had reduced our Footprint by 19% (4,200t) from our 2019-20 emissions. With another 4,200t to go, we are on target for the 2028 Footprint reduction but are not yet able to fully quantify our Footprint Plus and as such, will focus on setting out metrics to monitor and measure this going forward.

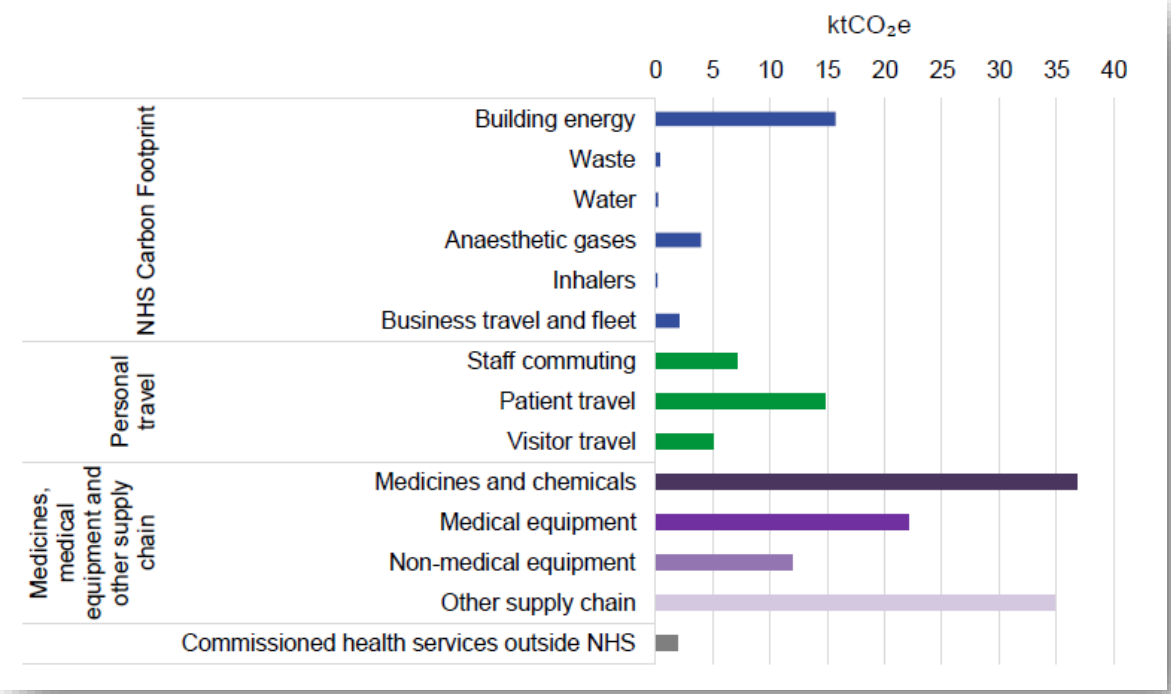
The following table shows ESNEFT's estimated contribution to the national NHS Carbon Footprint Plus (which includes the NHS Carbon Footprint) for the financial year 2019/20. Our biggest and most immediate opportunity to impact our footprint lies with building energy and travel, so these will continue to be focus areas in the coming years and will require significant investment which will support our financial sustainability once complete. With the progress made over the last few years on our previous Carbon Reduction Plans and plant replacements, it is now surprising to find that our Carbon Emissions from Patient Travel are estimated to be almost equal with those associated with Building energy.

Medicines, Medical Equipment and Supply Chain (our Scope 3 emissions) far outweigh the Scope 1 & 2 and we therefore need to implement additional interventions in these areas to ensure the long-term targets are achieved.

Trust contributions to the NHS Carbon Footprint Plus

Region	EAST OF ENGLAND
ICS	NHS SUFFOLK AND NORTH EAST ESSEX ICB
ICS code	QJG
Trust	EAST SUFFOLK AND NORTH ESSEX NHS FOUNDATION TRUST
Trust code	RDE

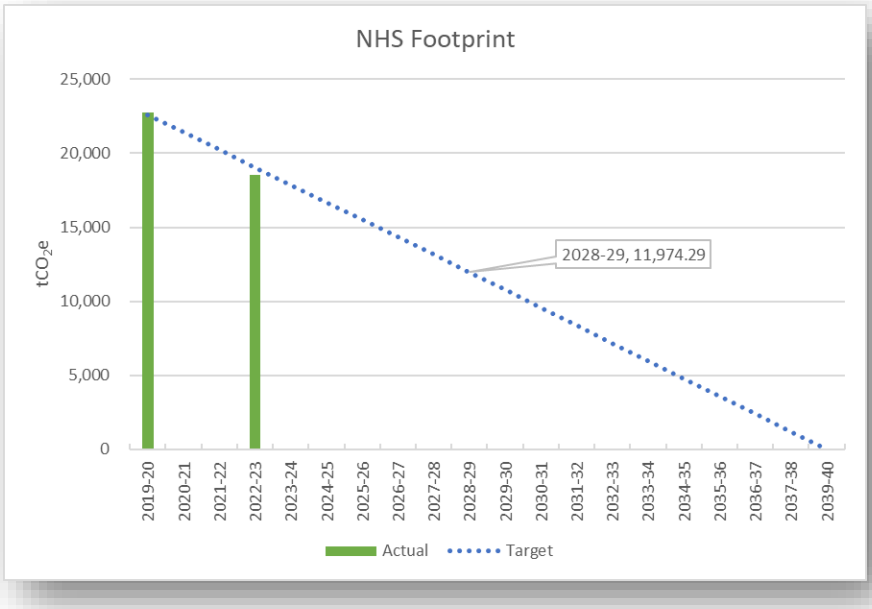
NHS Carbon Footprint	**22,593**	**tCO_2e**
Building energy	*15,722*	tCO_2e
Waste	*420*	tCO_2e
Water	*236*	tCO_2e
Anaesthetic gases	*3,962*	tCO_2e
Inhalers	*166*	tCO_2e
Business travel and fleet	*2,086*	tCO_2e
Personal travel	**27,003**	**tCO_2e**
Staff commuting	*7,121*	tCO_2e
Patient travel	*14,808*	tCO_2e
Visitor travel	*5,074*	tCO_2e
Medicines, medical equipment and other supply chain	**105,668**	**tCO_2e**
Medicines and chemicals	*36,834*	tCO_2e
Medical equipment	*22,058*	tCO_2e
Non-medical equipment	*11,994*	tCO_2e
Other supply chain	*34,782*	tCO_2e
Commissioned health services outside NHS	**1,925**	**tCO_2e**
NHS Carbon Footprint Plus	**157,188**	**tCO_2e**



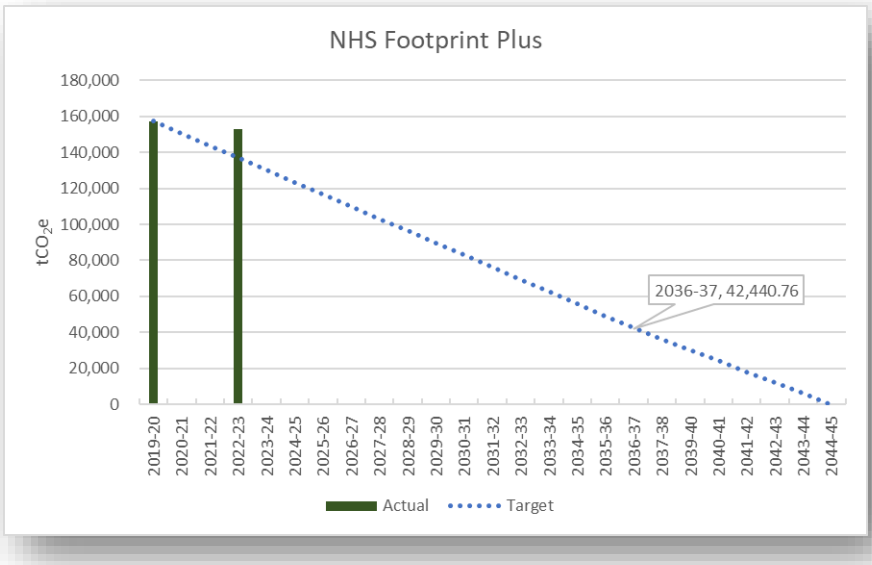
The basis of Net Zero is to reduce our emissions wherever and whenever possible, leaving the final emissions to be offset by the final target date and to further reduce as and when the technologies become available through continuous improvement programmes. If it was currently 2039 and we where looking to offset by planting trees then on the basis that a mature oak tree absorbs an average of 18.87kg CO_2 from the atmosphere, our annual footprint would require an offset of 8,330,048 trees, planting them 6 meters apart would require approximately 19 square miles of space. We therefore need to take action on reducing our footprint through the way we go about providing our services and not to rely on offsetting and the potential issues of Greenwashing.

The graphs below demonstrate the trajectory required to meet our targets by 2040 and 2045, along with the interim targets for 2028 and 2036 as detailed above.

Our Footprint graph shows that we are on target to meet the Net Zero target but will need to maintain the momentum and focus more on the innovative and ‘hard to do’ areas such as removing Natural Gas from our sites.



The trajectory of our NHS Footprint Plus shows that we are falling behind the target, this is partly due to the lack of measurement and quantitative data available at Trust level but also shows that more activity and focus needs to take place in this area to ensure the target is not missed.



Chapter 5 - Our Plan to Break into Subgroups and Why

Key Themes

In order to reach these ambitious targets, we have broken down our Footprint Plus into Key Themes which are aligned to the main drivers of change and sources of carbon emissions across the NHS.

At ESNEFT we have assigned each of these Key Themes a Lead, this being the person within that theme that is best positioned for localised and focused delivery of the associated actions, although in many instances it will require the collective effort of multiple Theme Leads to deliver the aims outlined within each section.

The aim is that the ambitions from this strategy will become an integral part of each of the associated divisional strategies / action plans creating a more embedded culture, and making sustainability a part of everything we do.

It is further acknowledged that many of our services and divisions do not fully align with these subgroups and in many instances the aims set out within them will require cross-division relationships to be maintained to achieve these common goals. As our levels of measurement and verification develop, it is likely additional key themes will emerge and develop.

Chapter 6 – Subgroup Summaries

Workforce and System Leadership

Leads: Associate Director of People, Performance and Workforce Transformation
Director of Human Resources and Organisational Development

Why it Matters: Climate change impacts are about people and will impact how we as individuals will live, it is therefore imperative that our staff are involved in this journey as without them our targets cannot be achieved.

As a large local employer, our impact can reach far beyond the boundaries of our sites. More than half of the emissions reductions necessary require changes in people's behaviour, therefore raising awareness of health benefits and climate mitigation together may increase public support and action in response to climate change.

Areas of Influence/Control: All of Carbon Footprint and Footprint Plus

Strategic 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.
- Ensure members of the Board and Senior Staff are carbon literate and numerate.

Communications and Engagement

Our ambition to become an exemplar organisation requires system-wide engagement and development through a considered, structured and inclusive approach to communication. By communicating what we are doing, both within and outside of the Trust, we can directly engage staff and stakeholders to assist with the conception and commencement of important projects. This will be executed through adopting various channels to openly interact with staff and patients, such as:

- Engagement events throughout the year (e.g. NHS Sustainability Day, Clean Air Day, Cycle to work day)
- A Sustainability "X" account (@GreenerESNEFT)
- A dedicated email address (Sustainability@esneft.nhs.uk) for staff queries and suggestions
- Regular references to sustainability and the work around the Green Plan included in corporate communications such as the public website, intranet, staff newsletter Team ESNEFT News and main social media accounts.
- Frequently updating our Intranet page with current projects, successes and tips
- Having our own page on the official ESNEFT website, including a link to our Green Plan
- A Green Champions network which creates a two-way interaction on issues surrounding sustainability within the Trust
- Various behavioural change campaigns (e.g. Energy Saving Campaign) which helps to inspire staff to take action
- Celebrating our successes through colleagues' stories internally and externally
- Proactively promoting our achievements to the media through press releases.

Moving forward, we aspire to deliver and maintain high quality, and regular communication across all our channels, whilst continually assessing and gaining direct feedback from staff, in order to enable the most effective communication strategy possible.

Clinical Practice & Medicines

Lead: Clinical Sustainability Lead

Why it Matters: Medicines contribute to a quarter of the NHS's total annual carbon emissions and are therefore the biggest contributor to Scope 3 emissions.

Some medicines have a higher carbon impact upon use than others, with volatile anaesthetic gases and metered dose inhalers accounting for two greenhouse gas emission hotspots, making up 5% of total carbon emissions. Other medicines make up another 20% of the total carbon footprint of the NHS, with these emissions primarily associated with the supply chain, arising from the manufacturing, packaging, transportation and disposal of medicines.

Clinical practice is why we are here, it's embedded into everything we do and involves the greatest number of staff employed by our Trust. It therefore offers the greatest opportunity to reduce all 3 scopes of carbon emissions through behaviour change, education/training and cultural change.

Areas of Influence/Control: All of Carbon Footprint and Footprint Plus

Subcategories:

- Surgery & Theatres
- Anaesthetics & Critical Care
- Medicine
- Women's Services
- Paediatrics
- Nursing
- Diagnostics
- Pharmacy
- AHPs

Strategic Aims:

- Reduce medicines waste, clinical waste and unnecessary interventions.
- Encourage use of low carbon alternatives including reusable equipment and textiles, medications and inhalers, and reduce use of single use items.
- Embed susQI into the trust's quality improvement work.
- Reduce unnecessary PPE use.
- Encourage patients to live a healthy, active, low carbon lifestyle.
- Reduce nitrous oxide use including Entonox and increase the use of more sustainable anaesthetic techniques.
- Encourage use of tablets over liquid medications where appropriate.

Estates and Facilities

Lead: Energy and Sustainability Manager

Why it Matters: Emissions associated with the operation of our estates and facilities is the biggest contributor of our Scope 1 'Carbon Footprint' so, decarbonising our estate offers a significant and crucial opportunity in meeting the net-zero 2040 target. As these emissions are under our direct control and we have a clear understanding of how these emissions can be reduced, the key challenges are around financial investment and the disruption involved in delivering the changes. Our Heat Decarbonisation Strategy will need to involve moving away from Natural Gas towards other sources of energy whilst considering the future of Hydrogen technologies and the opportunities that represents for our acute sites.

Whether we are investing in new buildings and grounds, undertaking major refurbishments of existing facilities or replacing legacy equipment, sustainability needs to be at the heart of our approach. Additionally, alongside our efforts to decarbonise we must also integrate climate resilience interventions as well as those that have enhance broader sustainable outcomes, such as seeking to use local suppliers that create local social value benefit(s), Integrating/preserving biodiversity infrastructure, especially within estate masterplans and by assessing climate risk and resilience of our estates, and prioritising those interventions that have dual benefit, such as increasing tree coverage/reducing the built environment to increase passive shading benefits.

Areas of Influence/Control: Building Energy, Water & Waste, Fleet, Travel, Chemicals, Medical Equipment, Non-Medical Equipment, Other Supply Chain.

Subcategories and Leads:

- Facilities – Associate Director of Facilities
    - Waste Manger
    - Travel Coordinator
    - Food and Nutrition Lead
- EBME – Head of EBME Operations
- Capital Projects – Associate Director of Estates and Capital Development
- Estates Operations – Associate Director of Estates and Capital Development
- Green Space and Biodiversity – Sustainability Manager and Grounds Manager

Strategic Aims:

- Behaviour management and culture change to a low carbon, reduce reuse philosophy.
- To deploy more renewable energy across all our sites.
- Ensure our processes for Capital Projects, New Works and Backlog activities are adapted to Net Zero standards, maximising opportunities to reduce carbon emissions.
- Improve our energy and water use efficiency by making every kWh and m^3 count.
- Continue to review our asset holding, optimising its use and reducing associated waste.
- To measure contractors environmental / Social Value performance through dedicated KPI's.
- Monitor our Waste volumes to identify opportunities for education, diversion, elimination, or alternative low carbon treatment.
- Ensure that where New Build is necessary, we build Sustainably by design.
- Review our procurement assessment for additional/replacement Medical Equipment.

Travel and Transport

Lead: Travel Plan Coordinator

Why it Matters: Travel and Transport is the biggest Scope 2 contributor to our carbon footprint**.** Poor air quality can cause and worsen a range of heart and respiratory illnesses such as asthma and impact lung development in children. It is estimated that over 36,000 people die each year from illnesses related to long term exposure to air pollution. The NHS is responsible for an estimated 5% of all road traffic in the UK, resulting from colleague, patient, visitor and supplier travel. Road travel from the NHS therefore contributes significantly to air pollution and carbon emissions which in turn negatively affects our environment and population health. As a large employer in East Suffolk and North Essex, ESNEFT has an opportunity to minimise our contribution to air pollution and improve the health outcomes in our area.

Disadvantaged communities are often the most vulnerable to the impacts of poor air quality and therefore it is vital that we address our impact in order to contribute to a reduction in health inequalities. The adoption of active travel such as walking and cycling, encouraging the use of public transport and low-emissions vehicles has the opportunity of improving cardiovascular health, mental wellbeing and will reduce air pollution; improving community health and the associated demand on our services.

Areas of Influence/Control: Business Travel & Fleet and Personal Travel

Strategic Aims:

- Monitor and Report on our footprint.
- Establish and produce a Sustainable Travel Strategy as per the 'NHS Net Zero Travel and Transport Strategy'.
- Enable Active Travel.
- Encourage the use of ULEVs or ZEVs through the car salary sacrifice scheme.
- All new purchases and lease arrangements for our fleet 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 anti-idling cleaner air hospital framework.
- Maximising efficiencies in our fleet and the transport of goods and services commissioned by the organisation, such as patient transport, courier services and deliveries.
- Engagement with Staff/Visitor/Contractors for Training and Awareness.

Food and Nutrition

Lead: Associate Director of Facilities

Why it Matters: There is a clear link between improving the sustainability of food and the health and wellbeing outcomes for patients. Food is estimated to produce 6% of the NHS' total Carbon Footprint Plus each year, resulting from the way food is grown or made, processed, transported, prepared, served and finally disposed of where wasted or uneaten. The NHS recommends a diet that is low in heavily processed foods that are high in sugar, salt and fats. When diets include seasonal and locally produced fruit and vegetables, this is a low carbon diet which can improve health outcomes for patients and limit our environmental impact. Nutritious food has been seen to improve clinical outcomes for hospitalised patients, such as reducing complications, lengths of hospital stays and re-admission rates through preventing malnutrition.

Areas of Influence/Control: Building Energy, Water & Waste, Other Supply Chain

Strategic Aims:

- 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.
- Provide sustainably grown local food and ensure healthy food choices by reducing sodas and highly processed and packaged food on our sites where possible.
- Promote and support breastfeeding. Breastfeeding is healthy and sustainable food for babies.
- Minimising food and packaging waste.

Green Space and Biodiversity

Leads: Energy and Sustainability Manager
Grounds Manager

Why it Matters: There is a wealth of good quality evidence demonstrating the positive impact that contact with nature can have on physical and mental health. Access to high quality greenspace can provide health-enhancing opportunities for patients, staff, and communities and have a positive impact on biodiversity through, for example, planting native woodland, natural flood management, and managing grass and flower beds to support pollinators. It also contributes to carbon capture whilst mitigating the negative effects of air pollution, excessive noise, heat and flooding.
We are committed to working with our local communities and other partners to develop and manage this public asset in a way which improves public health, reduces health inequalities and helps to address biodiversity loss and the climate emergency.

Areas of Influence/Control: Waste, Chemicals, Other Supply Chain

Strategic Aims:

- To reboot our relationship with nature recognising it can be a positive and visual enabler to overcome inequality and provide economic, food, environmental, estates and health and wellbeing benefits.
- Create long term biodiversity plans; linking these to our social prescribers and staff wellbeing to improve patient and staff mental, physical and digital health.
- Explore opportunities to build skills and experience (e.g., work placements, volunteering and apprenticeships).
- Maintain and protect healthy habitats across our estates.

Supply Chain and Procurement

Leads: Head of Procurement and Contracting
Head of Clinical Procurement

Why it Matters: Procurement has a pivotal role to play and procurement professionals and clinical staff working together can review and help shape contracts in the future, reducing the requirement for single use items and putting in place support systems required to support reprocessing, take-back and high-quality recycling.

Through using our purchasing power effectively, we can reduce the negative environmental and social impacts of our supply chain and increase the positive impacts.

Areas of Influence/Control: Non-Medical Equipment, Other Supply Chain

Strategic Aims:

- Increase the number of local suppliers from which we purchase goods and services.
- 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 more suppliers that share our vision on sustainability and are committed to Net Zero.
- To take action to address single use plastics.
- Develop a regional programme seeking to support sustainable PPE procurement and use wherever possible.
- Develop our measurement and verification of Social Value commitments made by our suppliers.

Clinical Transformation

Lead: Director of Strategy, Research and Innovation

Why it Matters: To deliver truly sustainable care we must adopt a sustainable lifecycle approach to care, firstly focusing on prevention by ensuring we are keeping people healthy over the course of their lives. We will aim to ensure that we provide the right care at the right time and in the right place, in line with NHS E&I ambitions.

Reviewing our existing models of care, including promoting social prescribing to aid prevention and improve population health. Will in many areas be able to directly reduce the carbon intensity associated with the delivery of our services, in a number of cases it will require a system wide, life cycle approach to drive efficiency, improve quality of care and reduce environmental impacts by ensuring a joined-up approach across commissioning, primary, secondary and community care.

Subcategories and Leads:

- Clinical Strategy Lead
- Innovation Lead
- Transformation Lead

Areas of Influence/Control: All of Footprint and Footprint Plus

Strategic Aims:

- Embed carbon reduction principles into 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.
- Reduce patient and visitor transport emissions by enabling provision of care closer to home.
- Develop visibility on the key environmental measures and impacts at service-by-service level.

Digital Transformation

Lead: Assistant Director for Digitisation & Business Intelligence

Why it Matters: Digital technologies have the opportunity to drive efficiency in our services and enable continuous improvement in patient care while reducing our carbon footprint and resource consumption. Digital transformation therefore has a crucial role to play in supporting our transition to becoming a net-zero organisation as the use of technology can minimise or possibly remove the requirement for colleagues, patients and visitors to travel to our sites which creates an immediate reduction in carbon emissions and local air pollution.

It is important to recognise that as there is a significant carbon footprint associated with the production and disposal of electric equipment, as well as the storage of digital information in data centres, that adopting digital approaches does not always provide the lowest carbon solution. ESNEFT therefore need to consider the whole life impact when procuring and commissioning new digital technologies and services.

Areas of Influence/Control: Building Energy, Business Travel, Personal Travel, Non-Medical Equipment and Other Supply Chain.

Strategic Aims:

- To continue investing 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)

Adaptation

Lead: Associate Director of Patient Flow & EPRR / COIO

Why it Matters: Climate change is already starting to lead to an increase in temperatures, sea levels and extreme weather events such as floods, droughts and storms which is starting to impact our ecosystems and population health. We recognise the significant risks that climate change presents in our region and expect to see a change in the types of illness treated. It is expected that there will also be a negative impact on mental health. These will most likely occur due to infectious diseases and the number of patients due to increased climate related impacts such as heatwaves and flooding.

In addition to the changes to clinical care, climate change could also threaten our ability to deliver our services as many of the effects of climate change may also impact our supply chain and colleagues.

While taking mitigation measures to limit our impact to climate change, it is also vital that as an anchor organisation, ESNEFT adapts to the potential impacts of climate change. Building resilience into our buildings, services and systems is essential to ensure we are equipped to provide an exceptional quality of care, with the right level of clinical expertise, improved buildings and facilities, and safe systems and processes.

Strategic Aims:

- Ensure that we maintain security of supply for our services and that it is resilient to extreme weather now and in the future.
- Ensure new buildings and updates to existing buildings are compliant with Healthcare Building Notes (HBN 00-07) and adaptable to climate change.
- To ensure our emergency plans and those of partners and other agencies support vulnerable communities during extreme weather events.
- Ensure Climate change adaptation planning is referenced and considered in all new service delivery design and Business Continuity Plans.

Chapter 7 – Governance, Monitoring and Reporting

Governance

Good governance is crucial for the effective implementation and oversight of initiatives like the Green Plan. This importance is underscored in the various roles and structures outlined for its execution.

The structure and roles of the various groups involved in implementing and overseeing the Green Plan are as follows:

Trust Board - The Board of Directors maintains responsibility for reviewing and approving the 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 transposed into detailed action plans which are maintained, implemented and reported against, and that all projects are on track. It includes a range of stakeholders associated with the net zero categories detailed in this document.

Net Zero Category Delivery 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, provide measurement KPIs and feed back to the main steering group.

Green Champions – Our Green Champions Group consists of staff members who are passionate about climate change and transforming the NHS into a sustainable healthcare system. We meet via Teams on a monthly basis, with a different theme discussed each time. This network enables staff to have their say and to be directly involved in ESNEFT's journey to becoming a more sustainable Trust.

Sustainability sub-groups - These groups represent staff interests in relation to specific work areas and have no formal reporting lines, for example the Bicycle User Group (BUG).

Monitoring and Reporting

East Suffolk and North Essex Foundation Trust have a responsibility to report advancement in sustainable development in line with national reporting requirements. The NHS Standard Contract requires the Trust to take all reasonable steps to minimise adverse impacts on the environment. The contract specifies that East Suffolk and North Essex NHS Foundation Trust must demonstrate progress on climate change adaptation, mitigation, and sustainable development, and must provide a summary of that progress in the annual report. Having started to assess Tenderers on Social Value, ESNEFT now aims to make this a formal monitoring and reporting function of the associated contracts, thereby capturing our positive impact on our supply chain and local population.

In addition to the Standard Contract requirements, NHS Trusts have an obligation to complete the HM Treasury sustainability reporting template on behalf of NHS England and Public Health England.

The Department of Health also requires Trusts to report Estates Return Information Collection (ERIC) data. ERIC data comprises essential statistics on waste, energy and water from Estates and Facilities. Finally, the national Sustainability Strategy requires Trusts to report on progress against sustainable development in a Trust Board approved Green Plan. Progress against the Green Plan will be reported quarterly to the Steering Group and 6 monthly to Trust Board.