



**Northern Lincolnshire
and Goole**
NHS Foundation Trust

The **Green Plan** 2021 / 2022

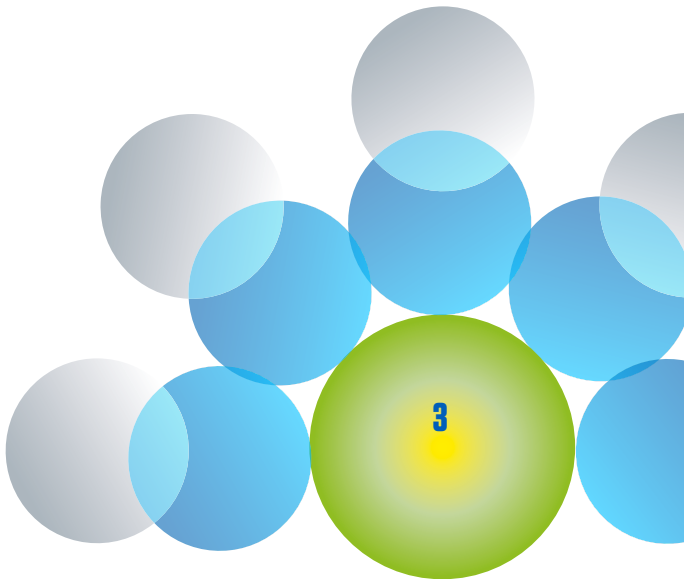


*“Meeting the needs of today,
without compromising the
ability of future generations
to meet their needs”*

NHS Carbon Reduction Strategy for England (2009)

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1. Foreword

The Northern Lincolnshire and Goole NHS Foundation Trust (NLaG) Green Plan, previously titled the Sustainable Development Management Plan (SDMP), is a plan which helps define how our Trust aims to deliver upon the responsibilities within the NHS Green Agenda.

NLaG recognises the importance of a sustainable health economy, and will act as the anchor point within our Integrated Care System to ensure we reduce impact on the environment, working to protect and improve the health of our communities, patients, staff residents and public.

The negative impact on our environment has direct correlation to our health; this impact has been placed under additional burden since the corona virus pandemic. The virus has impacted our social, economic and wider health, placing unprecedented system wide pressure on the NHS. It is under this pressure that we must challenge the climate emergencies with the same level of significance, ensuring our future is safeguarded from the impact of climate change.

This Green Plan outlines the initiatives, projects and activities we will deliver in our address of the sustainable agenda, ensuring the whole Trust receives increased awareness, knowledge of, and understanding of our objectives and responsibilities, sharing our impact in reducing carbon emissions produced by the Trusts activity. Our Green Plan will be actively delivered through the supporting Sustainable Action Plan.

Our Action Plan comprises the internal work, ranging from technical inputs, engineering, capital infrastructure,

policy and wider stakeholder engagement, whilst incorporating National guidance driven by leading documents such as “The NHS Long Term Plan (2019)”, “Delivering a ‘Net Zero’ National Health Service (2020)” and taking evidence based examples, best practice and learning from the “For a Greener NHS” campaign.

The Trust has in place a number of positive actions and projects which are delivering an impact on our sustainable goals, this includes projects scheduled to commence in 2021 which will deliver significant and long term impact on emissions.

The Green Plan has significant links to key strategies within the Trust; these strategies form our objectives within the Estates and Facilities Directorate and include: The Trusts Strategic Plan. The Estates Strategy (2020 – 2025) and the Trust Travel Plan (2019 – 2022). Taking a wider focus on the Green Plan, we must recognise the important role we can all play in reducing our carbon impacting activity, and that as a Trust, we all must work collaboratively to achieve the Net Zero commitment.

It is therefore the primary objective of the Green Plan to embed sustainability into our whole operational system, evaluating the carbon reduction to be considered or implemented into everything we do.



2. Introduction

Northern Lincolnshire and Goole NHS Foundation Trust (NLaG) operates from three hospital sites, including a community based care provision across three regions of the Humber and Yorkshire.

As a healthcare provider we recognise the importance of promoting health and wellbeing, we must ensure all our services are delivered with the highest possible standards, value and effectiveness leading to healthy and sustainable outcomes. Our social and environmental impact must be minimal during the course of our service delivery to ensure maximum levels of funding are prioritised for patient care.

The Green Plan will be developed, monitored, and benchmarked against the wider NHS system and is recognised by the Trust Board as a major contributory plan to enable environmental and social improvements, and affirms the commitments to a sustainable health and care system.

The Sustainability Management Group provide our Green Plan to cover a shorter than anticipated period of 2020 – 2022. This shortened plan allows due consideration of constant environmental, social and care system challenges to recover, currently influenced by the current

pandemic pressures. New national guidance released, coupled with strategic and capital infrastructure and operational changes requires a level of understanding, commitment to, and realisation of our priorities.

The NHS Net Zero commitment identifies two very clear and identifiable targets which help to realise the decarbonisation of the NHS, reducing the emissions we control directly, and the emissions we can influence through. The targets for directly controlled emissions (The NHS Carbon Footprint) are Net Zero by 2040, with an 80% reduction by 2028 – 2032. For the emissions we can influence (Our NHS Carbon Footprint Plus), Net Zero by 2045, with an 80% reduction by 2036 – 2039.

Our Sustainability Management Group will report to the Estates and Facilities Governance Group, through to the Estates and Facilities Senior management Team meeting and intends to address these targets set out above.

3. What is a Green Plan?

The NHS Long Term Plan (2019) began to set out how the NHS would deliver upon its decarbonisation commitments by stipulating all NHS organisations should begin to develop a Green Plan.

The plan should include:

- Reduction of Carbon
- Reduction of Water consumption
- Reduction of Waste including measures of processing to reduce carbon
- Phasing out Coal and Oil as primary fuel sources for heating
- Reducing and phasing out high carbon asthma inhalers
- Reducing anesthetic gases
- Improving Air Quality, with measures linked to reducing business mileage, fleet air pollution emissions, promoting and engaging with staff and public to grow active travel solutions
- Reducing single use plastics

For 2021 onwards, NHS Standards contracts will see the above measure included to enabling and ensuring NHS organisations work to support the Long Term Plan commitments.

NHS Sustainable Development Unit (SDU) build upon the “For a Greener NHS” campaign by sharing documents to help guide NHS Trusts in creating individual plans based on their own scale, type and individual priorities. The National Sustainable Development Strategy of NHS England and Public Health England aligns to the structure of an NHS Green Plan.

The sustainable Development Assessment Tool (SDAT) is an online self-assessment tool to help organisations understand their sustainable development work, measure progress and help make plans for the future. It uses four cross cutting themes ‘Governance & Policy’, ‘Core responsibilities’, ‘Procurement and Supply chain’ and ‘Working with Staff, Patients & Communities’ – and is made up of ten modules:

- Corporate Approach
- Asset Management & Utilities
- Travel and Logistics
- Adaptation
- Capital Projects
- Green Space & Biodiversity
- Sustainable Care Models
- Our People
- Sustainable use of Resources
- Carbon / GHGs

A Green Plan comprises three key elements:

- Organisational Vision and Objectives
- The Green Action Plan
- Tracking of Progress and Reporting.

The Green Plan is a Trust Board approved document, incorporating an annual review with progress reported to the Trust Board. This report should include progress against the key targets set by the Sustainability Management Group, highlighting any significant issues and detailing anticipated or realised benefits to health, carbon, waste or pollution reduction.

Green Plans are typically 3 to 5 year terms at which point they are reviewed, re-evaluated, and used to form succession plans for development and approval.

Our 2020 – 2022 plan will align us with the Trust Travel Plan review to enable a wider capture of progress and revised targets.

4. Drivers for Change

Climate change is recognised as a significant threat to the health of our patients, the public, and the NHS. Over the last decade, the UK has recorded increasing rises in temperatures, noting that almost 900 people died as a result of heatwaves in England during the last year (2019).

Without action, temperatures will increase; water levels will continue to rise creating increased flooding risk, alongside increased risk and spread of infectious diseases.

The NHS has been taking action to reduce its impact on climate change however; it recognises more can be done. The NHS contributes to 4% of England’s total carbon footprint. The NHS challenge is not simply to reduce this impact, but also to become adaptive and resilient to the climate challenge to ensure we remain capable of delivering patient care.

It is a combined response to the climate emergency, and the adaptive capabilities of the NHS which will bring improvements

to patient care and the way it is provided. The drivers for climate change align to the drivers of ill health, and health inequalities. To provide an example of this, deaths in the UK as a result of Air Pollution are solely caused by the combustion of fossil fuels.

The campaign for a greener NHS commenced January 2020, providing a road map and ambitious targets for the NHS to achieve net zero. The routes to achieve this will be shared to NHS organisations via this campaign.

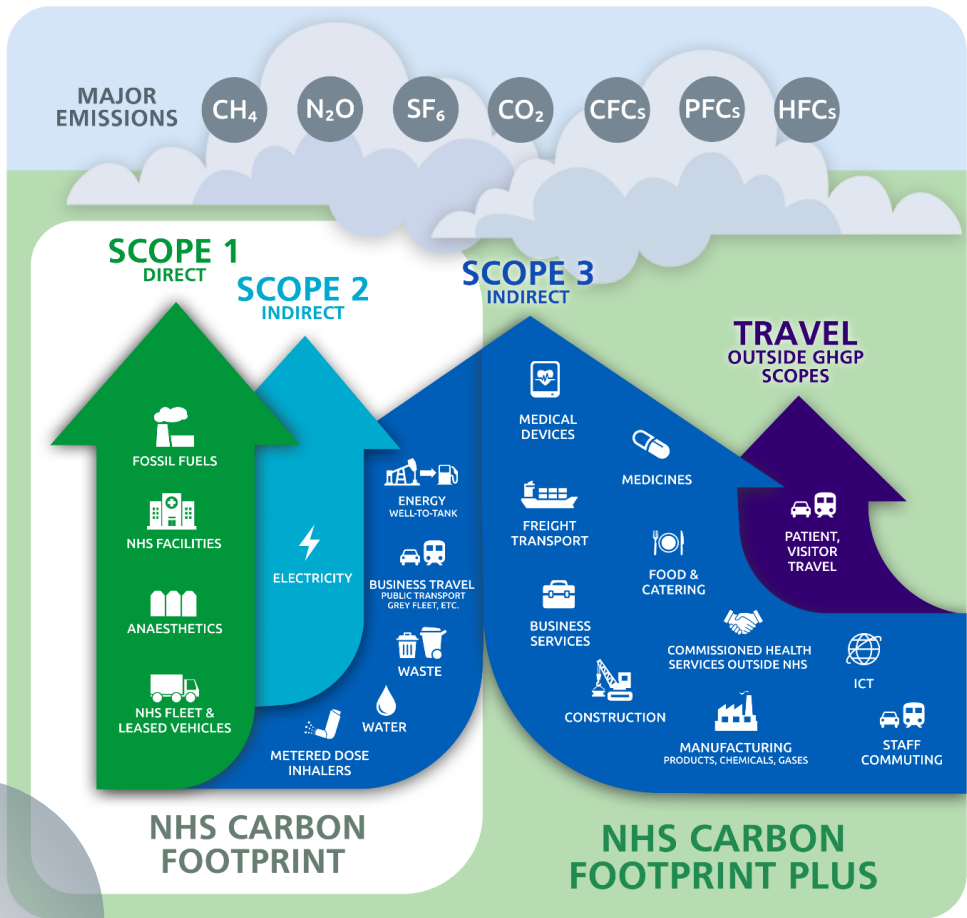
The NHS began tackling its carbon footprint in 2008 against a baseline from 1990, in line with the Climate Change Act (2008); this data has been used to create the trajectory for NHS Net Zero. Reported as the

NHS Carbon Footprint, the data must also include emissions from The Greenhouse Gas Protocol (GHGP)

- 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 electric
- GHGP Scope 3 – All other indirect emissions that occur in producing and transporting goods and services, including the full supply chain

The NHS Carbon Footprint Plus includes these three GHGP scopes, in addition to the emissions from patients, visitors and staff travel to and from the NHS services and medicines used at home.

The GHGP Scopes in the context of the NHS



Utilising this approach for measuring carbon reduction, the NHS reports a 26% reduction (Estimated) of the NHS Carbon Footprint Plus.

To close the gap on the NHS Net Zero challenge, the NHS needs to reduce output by the equivalent emissions profile of Croatia (Delivering an NHS Net Zero, 2020)

Whilst all areas of the NHS will need to act for the net zero challenge to be realised, the figure below highlights that the biggest reductions, challenges, remain

within Estates & Facilities, travel, pharmaceuticals and medical equipment.

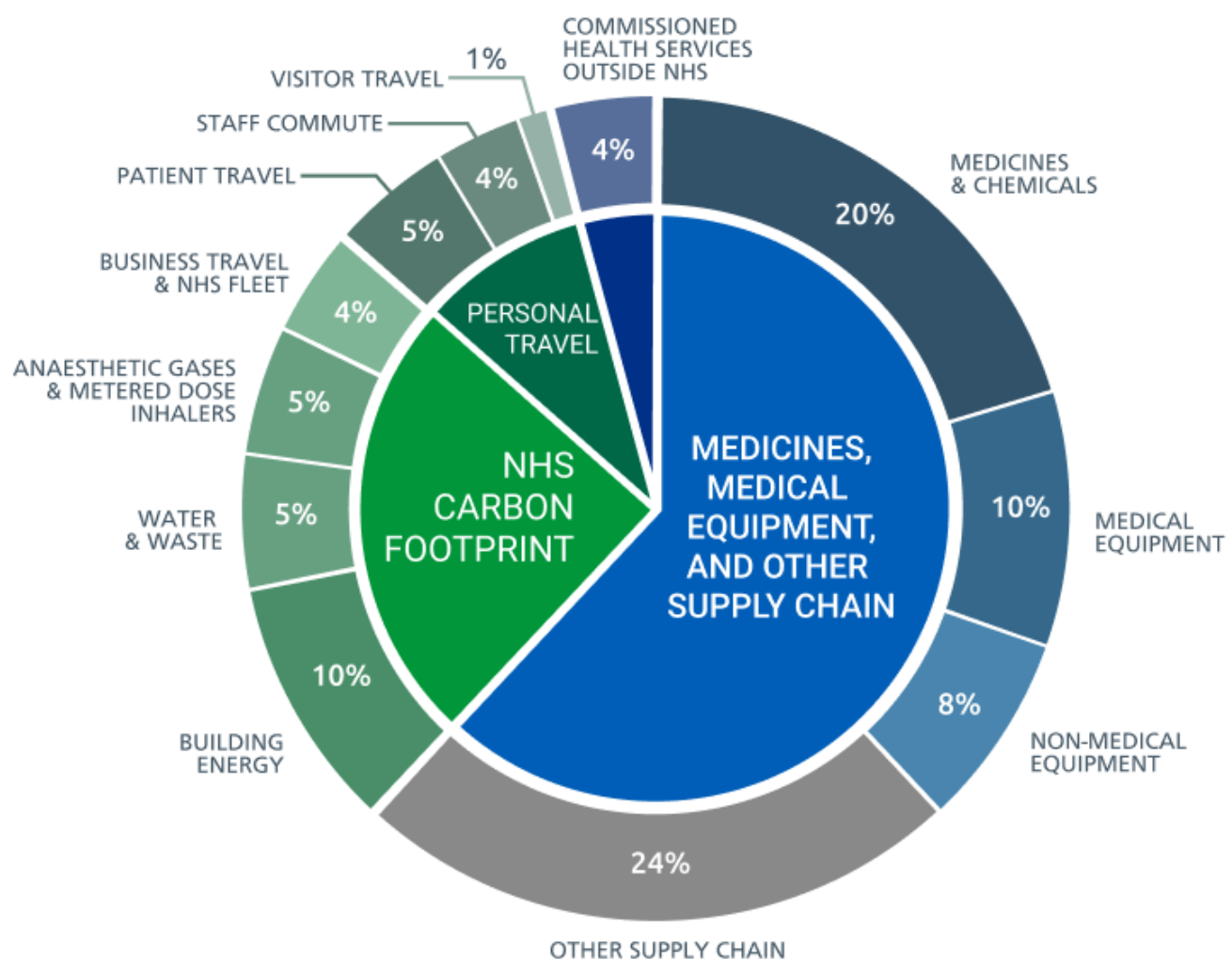
The main actions for the NHS are categorised into:

- Estates and Facilities, including travel, transport, supply chain and medicines.
- Sustainable models of care, workforce, networks and leadership, funding and finance mechanisms

These categories are also supported by National and International government action to decarbonise electricity, alongside a review of travel and transport and manufacture of goods linked to the wider NHS supply chain.

Should the targets be achieved by 2040, the trajectory estimates that 5770 lives could be saved, per year, from reductions in air pollution and 38,400 lives saved from increased levels of physical activity. These projections are under analysis.

Sources of carbon emissions by proportion of NHS Carbon Footprint Plus



5. Legislation

The UK under its obligations of the Paris Climate Change Agreement set out targets for the reduction of carbon emissions under the requirements of the Climate Change Act (2008) and further updated these requirements within the Climate Change Act 2008 (2050 Target Amendment) Order (2019).

Other emissions that contributed to climate change was outlined within the requirements of the Greenhouse Gas Protocol (GHGP) 2015 which covers direct and indirect emissions and which are now included within the NHS Net Zero objectives.

The original targets which are set out in the Climate Change Act are to:

Cut greenhouse gas emissions by 80% by 2050 based on the 1990 emissions as the baseline

To achieve a reduction of 37% by 2020 and 50% by 2025.

These targets remain as legally binding within the requirements of the Act however, the NHS is committed to achieving a more ambitions target of

Net zero by 2040 and an 80% reduction by 2032 for all direct emissions

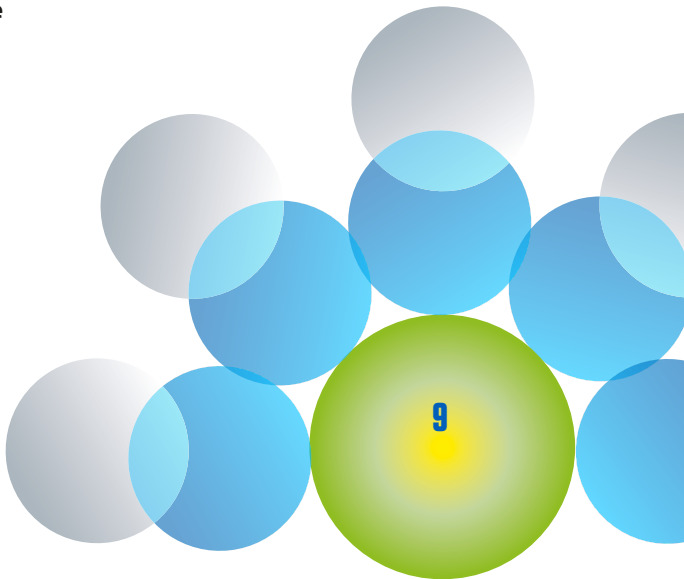
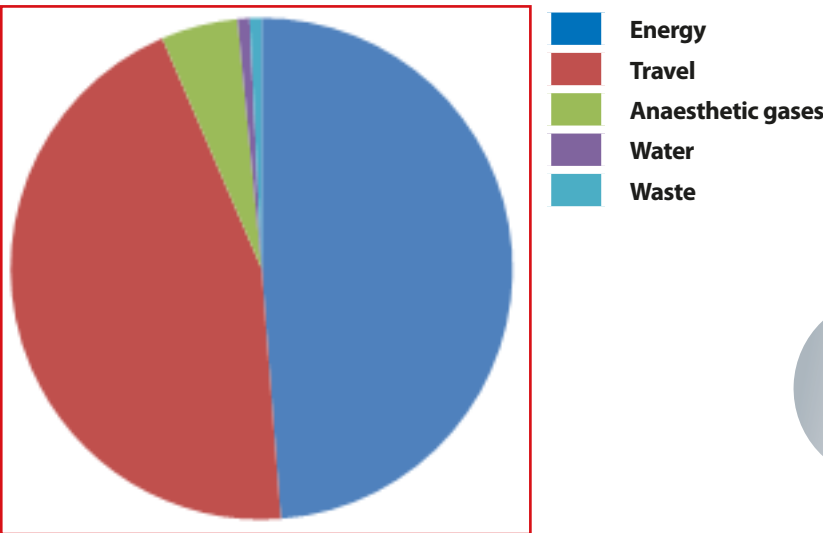
Net zero by 2045 and an 80% reduction by 2039 for all indirect emissions

Whilst the NHS estimates that over 60% over our total emissions will be caused by Supply Chain factors, we cannot control many of these directly. The major components of our direct carbon footprint which we can control fully are from building energy use, travel, anaesthetic gases, waste and water.

NLaG Three Year Carbon Footprint 2017-2020

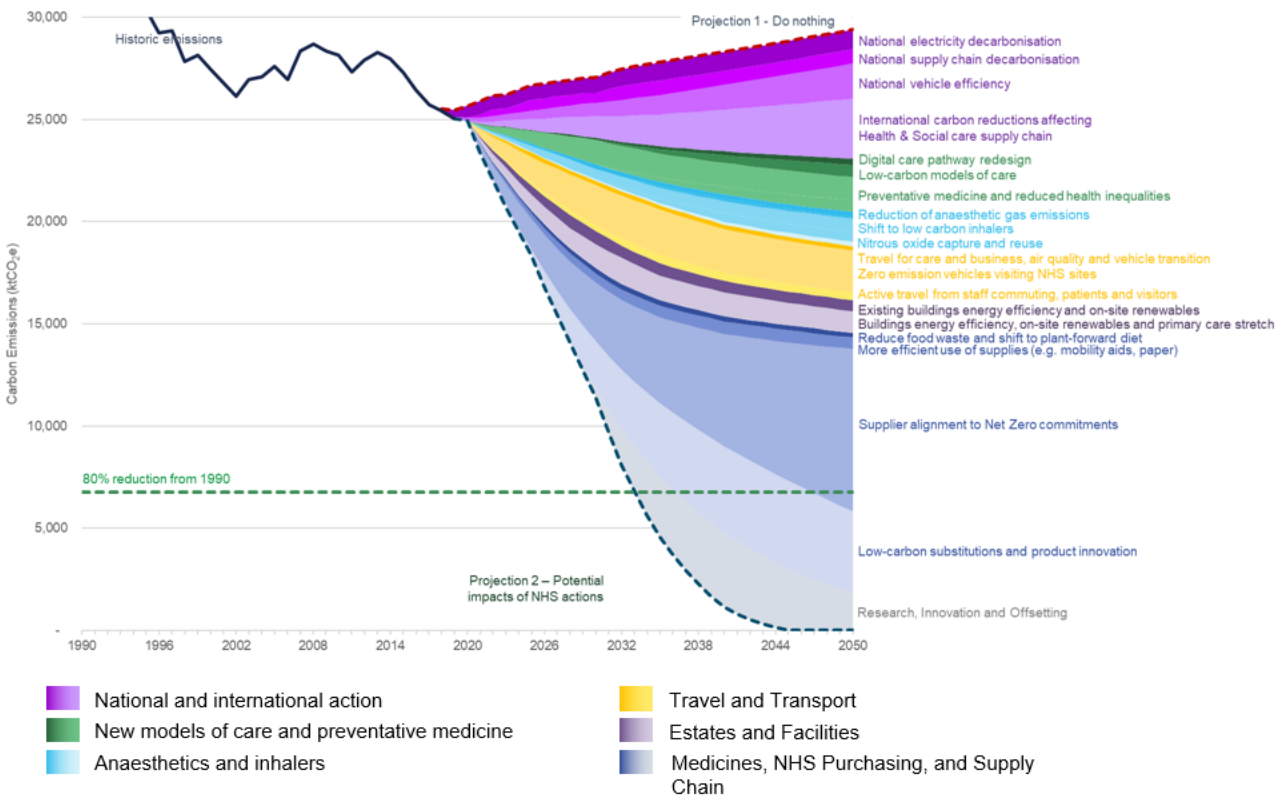
NLaG Direct Emissions (TCO2e)			
Activity	2017-18	2018-19	2019-20
Energy	20,284	18,311	17,340
Travel	13,767	17,874	15,905
Anaesthetic gases	1,416	1,512	1,755
Water	284	177	278
Waste	151	186	268
Total	35,902	38,060	35,546

Our direct carbon footprint by activity



Pathway to Net Zero for NHS Carbon Footprint.

‘Delivering a Net Zero National Health’ maps the following pathway to how the NHS can deliver its direct and indirect carbon emission reductions by 2050.



6. Interventions

The NHS has over a decade of experience in sustainable healthcare, with recent commitments set out in the NHS Long Term Plan, the 2020 NHS Operational Planning and Contracting Guidance and the Standard Contract. NLAG will continue to make direct interventions to tackle climate change while delivering high quality care and improving public health.

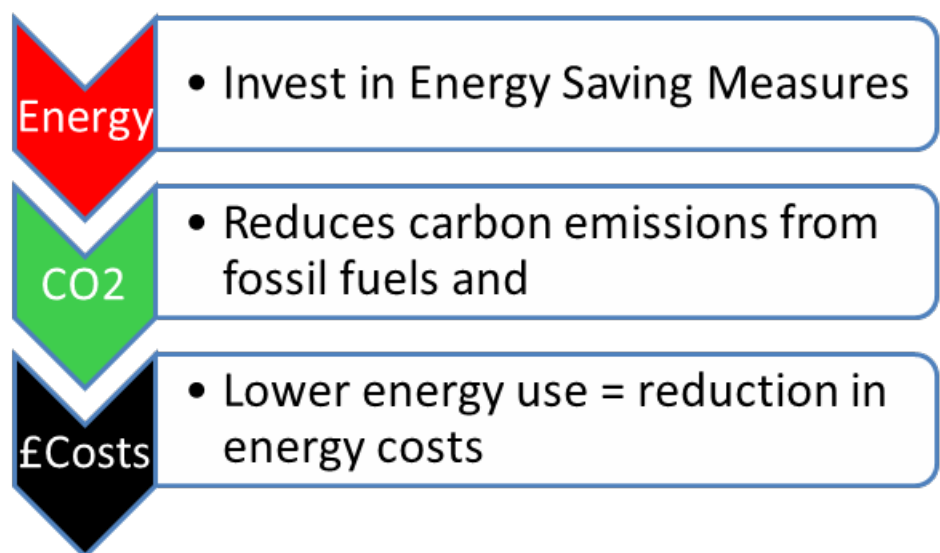
These are detailed in the table below:

Areas for action	What this means	What we are doing at NLAG
Sustainable consumption and production	<ul style="list-style-type: none"> • Achieve more with less • Look at how goods and services are produced and the impacts of products and materials across their lifecycle • Reduce inefficient use of resources 	<ul style="list-style-type: none"> • The Trust is reviewing all tender documentation including Pre- Qualification Questionnaires (PQQs) and Invitations to Tenders (ITTs) to ensure that sustainable issues are considered within future procurement decisions • Consideration of life cycle costing • Increase recycling and review waste segregation • Seek opportunities to improve water efficiency • Reduce single use plastics
Climate change and energy	<ul style="list-style-type: none"> • The effects of climate change can already be seen and scientific evidence points to the release of greenhouse gases into the atmosphere by human activity as a primary cause of this • Decarbonisation of our estates and facilities • Prepare for the climate change that cannot now be avoided 	<ul style="list-style-type: none"> • Further Energy performance contracts across our sites to guarantee meeting of carbon targets and production of savings • New Sustainable Energy Centre at our Goole and District Hospital • Installation of carbon reducing technologies across the sites • Purchase of 100% REGO backed renewable electricity • Increase the implementation of AMR and energy monitoring
Protecting natural resources and the environment	<ul style="list-style-type: none"> • Natural resources are vital to the existence of all • Develop a better understanding of environmental limits, environmental enhancement and recovery 	<ul style="list-style-type: none"> • Maintenance of Green Spaces around the site • Seeking ways to improve the air quality at our sites.
Creating sustainable communities	<ul style="list-style-type: none"> • Create sustainable communities that embody the principles of sustainable development at local level • Working in partnership to get things done 	<ul style="list-style-type: none"> • Working in partnership with Local Authorities, other NHS organisations and the voluntary sector.(e.g. Heat networks and travel plans)

7. Financials

The NHS is constantly asked to do more for less and must meet annual savings targets. Between 2017 and 2020, NLaG has seen a 28% rise in delivered unit energy costs. The rise in energy and water prices is likely to continue for many years and therefore energy efficiency and reduction measures are increasingly vital.

Cost savings are directly linked to reducing energy and therefore, also linked to reducing carbon emissions.



Financial gains can also be made from achieving efficiency savings through environmental and social projects and from embedding carbon reduction in financial mechanisms. Such schemes should be seen as Invest to save projects. The more energy we save now, the lower our costs will be as utility costs continue to rise.

Reducing demand and investing in renewable onsite generation technologies will keep costs down. Money saved by such actions can be either reinvested into further decarbonisation projects or diverted to patient care.

Investing in a net zero NHS aligns with investment in the long-term sustainability of the health service and with the health of the people in our region. The net zero ambitions outlined in this report will need to be appropriately resourced with the right capital investment and will require recurrent investment and an aligned financial policy and decision-making process.

These net zero ambitions will be aligned with existing commitments as far as possible; for example, to ensure that major building works and refurbishments, take into account the need to reduce emissions, and that wherever

possible maintenance or the replacement of equipment is done in a way that improves energy efficiency and reduces emissions. We will work to ensure that these factors are taken into account in investment decisions.

We will actively work with relevant bodies to utilise funds directed towards the UK wide target towards net zero. This potentially includes accessing substantial funding through the Government's Decarbonisation Grant and other Salix Finance opportunities.

8. Corporate Social Responsibility and Reputation

Hospital activities providing services not only impact on patients, visitors and staff. They have a wider impact within the local community in terms of employment, energy usage, transport, consumables etc.

NLAG as an organisation recognizes the impact that it has within the Corporate Social Responsibility (CSR) element and how this can affect sustainability within the geographical area.

The CSR requirement commits the organisation to regularly review its

impact and to look to reduce any negative impact it has within the local communities.

The “Delivering a net zero National Health Service” publication looks to address the impact of the emissions in relation to the local economy, the environment and the health of

the population within the regions it operates its services.

This forms part of this green plan and incorporating the CSR within organisation as a whole.

9. Improving Health – Patients, Staff and the Local Communities

Sustainable actions can have immediate health benefits as well as reducing the risk of climate change in the long-term. Active travel e.g. cycling or walking, can reduce air pollution and by increasing fitness and activity levels, help patients and staff reduce their risks of health problems such as diabetes and obesity.

Delivering a ‘Net Zero’ National Health Service Report gives a very clear message about the need for promoting and improving health: One of the most significant is the climate emergency, which is also a health emergency.

Unabated it will disrupt care, and affect patients and the public at every stage of our lives.

With poor environmental health contributing to major diseases, including cardiac problems, asthma and cancer, our efforts must be accelerated’.

Health promoting initiatives, educating staff, using websites and social media and contributing to national and local awareness campaigns can all help people to stop smoking, tackle obesity and the Trust is committed to supporting its staff by promoting increased awareness, conducting behavioral change programmes, low carbon travel, and the use of Information and Communication Technologies.

Supporting a more healthier and sustainable contribution to the lives of our staff, patients, visitors and the wider community is a fundamental aspect of the Trust’s Green Plan; an indicative but not restrictive pathway of Trust considerations to promote improving health can be seen below:

• Living within Environmental Limits

Respecting the limits of the planet’s environment, resources and biodiversity – to improve our environment and ensure that the natural resources needed for life are unimpaired and remain so for future generations

• Ensuring a Strong, Healthy and Just Society

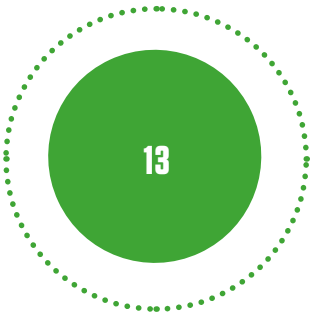
Meeting the diverse needs of all people in existing and future communities, promoting personal wellbeing, social cohesion and inclusion and creating equal opportunity for all

• Achieving a sustainable economy

Building a strong, stable and sustainable economy which provides prosperity and opportunities for all, and in which environmental and social costs fall on those who impose them (polluter pays) and efficient resource use is incentivized

• Using sound science responsibly

Ensuring policy is developed and implemented on the basis of strong scientific evidence, whilst taking into account scientific uncertainty (through the precautionary principle) as well as public attitude and values



• Promoting Good Governance

Actively promoting effective, participative systems of governance in all levels of society – engaging people's creativity, energy, and diversity

• Health Equality and Inequalities

Delivering a net zero NHS has the potential to secure significant benefits across the population, and particularly for vulnerable and marginalized populations, addressing existing health inequalities.

These benefits will only be fully realised through public participation, involvement and engagement with

those communities as this work goes forward, having regard to the need to reduce health inequalities and taking into account the public sector equality duty.

As a key priority, the Trust will work to reduce air pollution and improve local environments, thereby supporting the development of local economies in geographical areas of deprivation.

Air pollution disproportionately affects people in these areas, many of whom are already at risk of poorer health outcomes.

Examples of the links between climate change, sustainable development and health inequalities are seen across the country.

For example:

- Access to green spaces has positive mental and physical health impacts, and these beneficial effects are greatest for those from socioeconomically disadvantaged groups. However, these groups also have the least access to green spaces.
- Black, Asian and minority ethnic groups are disproportionately affected by high pollution levels and children or women exposed to air pollution experience elevated risk of developing health conditions.
- As climate change worsens the demand for energy will increase. This may increase the price of household fuel, which is likely to make it harder for poorer families to maintain good health, particularly in poorly insulated homes.



10. Governance and Reporting

The Green Plan

The Green Plan is the key sustainability document for the Trust and is a Board approved document. Members of the Sustainability Group are responsible for the content of the plan and for ensuring that the action plan is completed.

However sustainability is the responsibility of everyone within the organisation therefore, all staff are encouraged to engage in sustainable activities.

The Trust must ensure compliance with sustainability legislation, regulations and best practice guidelines and must contribute to national sustainability targets.

Therefore the Trust will ensure that its governance and reporting arrangements for sustainability are clear and adhered to.

The Trust uses the Premises Assurance Model (PAM) to provide overall assurance of Estates and Facilities compliance, which encompasses sustainability within its Directorate portfolio.

The NHS PAM is a tool which allows NHS organisations to better understand the efficiency, effectiveness and level of safety with which they manage their estate and how that links to patient experience.

Through a combination of self-assessment and internal auditing, the Premises Assurance Model provides the Estates & Facilities Governance meeting group and the Trust Board levels of assurance with compliance to key national directives with regards to safety, patient experience and sustainability.

If the organisation/site has any inadequate or requires (moderate or minor) improvement ratings as part of their self-assessments, an action log is generated with progress monitored and reported into the E&F Governance meeting group.

Responsibilities

The Director of Estates and Facilities is the Trust lead for sustainability supported by the Deputy Director for Estates and Facilities and the Associate Director for Facilities and Sustainability

Committees/Groups

The Sustainability Group is the group charged with responsibility for developing, promoting and overseeing the Trust's activities in regard to sustainable development.

The group meets monthly and is a sub-group of the Estates and Facilities Governance Group and the Estates and Facilities Senior Management Team, to which it reports directly. It is chaired by the Associate Director of Facilities & Sustainability. The membership has been drawn from the key departments which contribute to this area of work e.g. Estates and Facilities, Procurement, Finance and People.

However representatives from other Directorates especially the clinical and specialist / diagnostic areas which have much to contribute to the wider sustainability agenda may, from time to time, be co-opted on to the Group in order to fulfil its function.

The Sustainability Group is responsible for the review and implementation of the Green Action Plan and for reporting on the Trust's progress as per the NHS Standard Contract obligations to the NHS Sustainable Development Unit which feeds into NHSE/I.

Reporting

The Trust is required to report our emissions annually in order to satisfy a number of legislative, NHS and Department of Health and Social Care requirements.

Sustainability is reported through a number of annual and quarterly reports, both at national and trust levels:

"Sustainability Report" as part of the Trust's annual report to NHS E/I. This includes scope 1 (gas, fuel oil and fleet), scope 2 (supplied electricity) and scope 3 (business travel) emissions, water consumption, waste volumes and the carbon emissions declared under the Carbon Reduction Commitment Energy Efficiency Scheme. The data provided in this report meets the criteria of the HM Treasury sustainability annual report.

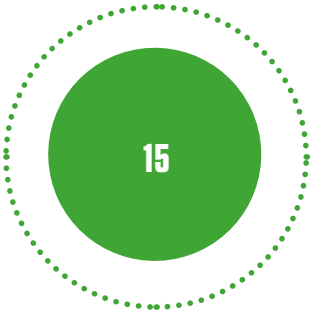
Annual "Estates Return and Information Collection" to the Department of Health.

The minutes of the Sustainability Management Group are presented to the Estates and Facilities Senior management Team.

The Green Action Plan will be updated quarterly and will form part of the regular agenda of the Estates & Facilities Senior Management Team meetings.

The Directorate of Estates & Facilities, via the Sustainability Group, then through the E&F SMT meetings will report annually to the Finance and Performance Committee.

Premises Assurance Model annual data capture which feeds directly to NHSE/I.



11. NLaG Sustainable Actions

The Estates and Facilities Directorate appointed a Trust lead for Sustainability in April 2020, and is representative of the importance the Directorate and Trust hold for the successful delivery it's Green Plan

The unique challenge within NLaG requires a bespoke action plan, which includes short, medium and longer term plans which are yet to be defined. As a Trust operating three hospitals, alongside community care and partnerships with primary, adult and child social care, mental health and local authorities, it is essential that engagement and accountability for senior staff and stakeholders exists.

As NLaG forms stronger links with the Humber Integrated Care System (ICS) and the wider Humber, Coast and Vale (HCAV) services review, the emergence of clinical modelling plans, redefinitions of services, locations and care strategy for the region require acute awareness of the now, and the future platform for care delivery.

This Green Plan for 2020 – 2022 includes the following programmes, with discreet sustainability schemes later in this document:

- Effective leadership, engagement and development of staff to promote sustainability
- Project management and intervention of Net Zero design for Capital Investments
- Infrastructure review of heating and energy centers
- Review of staff travel, parking and site links for logistics of staff and equipment
- Removing single use plastic
- Procurement of carbon free energy (electric)
- Engagement in care model reviews
- Promoting staff health, wellbeing and enabling where possible
- Review of staff lease car arrangements, EV fleet and Infrastructure
- Zero waste to landfill, diversion to alternative treatments
- Reducing, reusing and recycling waste in line with waste hierarchy
- Engagement in developing IT strategy transforming care plans at home
- Use of estate review, agile working and one public estate
- Reduction of the Estate Back Log Maintenance Programme
- Engagement of wider stakeholders within community, commissioning, local authority to shape care services

12. Healthy, sustainable and resilient communities

Strong and healthy communities support people to minimise their impact on the environment and be resilient to changes in the world around us. Local level partnerships can be strengthened so they continue to help neighbourhoods flourish.

Connected communities will be better prepared for environmental and climatic changes including the effects of severe weather events such as heat waves, cold snaps and flooding.

The following resilience plans have been produced with partners to deal with projected changes in climate and extreme weather events:

- Major Incident Plan
- Significant Incident Plan
- Incident Coordination Centre Manual
- Adverse Weather Manual
- Heatwave Plan

13. Energy Schemes

As a critical member within the community, NLaG is looking to lead by example in reducing its carbon emissions. We are in the process of extending Energy Performance Contract arrangements across all 3 main hospital sites. Over the next two years we intend to deliver the following decarbonisation measures:

- A new Sustainable Energy Centre at Goole and District Hospital, replacing Coal Fired Boilers with a CHP unit and high efficiency gas boilers.
- Developing a Decarbonisation Plan, primarily looking at improving the energy efficiency of the Scunthorpe General Hospital heating and hot water system.
- Full LED internal lighting refurbishments in all our buildings.
- A programme of building fabric improvements.
- Increasing the coverage of renewable energy generation at our sites e.g. PV Panels
- Deploy various site wide energy, water and carbon saving technologies where feasible.
- The site Automatic Meter Reading (AMR) system will be continually increased to rigorously monitor consumption and help produce accurate carbon reporting. We will also upgrade our Building Management System (BMS) to include Smart Energy Optimisation tools and future proof for improvements in Building Information Modelling (BIM)
- The Trust is also working with our Local Authority partners to develop regional wide Heat Networks at Grimsby and Goole.

14. Travel Plan

Our Green Travel initiative is designed to encourage and support staff to reduce their car use and consider alternative active and sustainable modes of travel, some of the schemes we have already established are:

- Cycle to work scheme
 - Bike Library & Doctor Bike Events
 - Staff cycle parking
 - Cross site bus shuttle service
 - Smart commute Card scheme
 - Park and Ride at SGH
 - Courtesy car service
 - Introduction of electric, hybrid and plug-in hybrid vehicles
 - Trust Car Scheme
 - EV Charge points at all sites for business use vehicles
- Encourage and incentivise staff to consider these vehicle types as a viable alternative to diesel and petrol vehicles.
- Introducing measures to promote healthier, active forms of travel such as cycling, walking and public transport, could contribute to decrease air pollution by around 461 ktCo2e per year. This also improves physical activity and increases access to care for patients.
- The NLaG travel plan 2019- 2022 focuses on staff, business, patient and visitor travel with the emphasis on providing details on sustainable travel modes which include:
- Streamline and improve travel arrangements
 - Improve transport accessibility to NLAG sites in order to reduce Did Not Attend (DNA) instances
 - Contribute towards reducing carbon footprint

Cars and vans contribute 19% of all greenhouse gas emissions. As part of the Green Plan we will work towards the NHS Long Term Plan commitment of 90% of replacing our leased or purchased fleet with low, ultra-low and zero emission vehicles by 2029.

- Reducing the number of outpatients visiting each site by car and encourage the use of sustainable travel
- Encourage more sustainable and healthier forms of travel among staff

The trust has recently introduced Skype and Microsoft Teams, which enables meetings to take place virtually negating the need for colleagues to travel across sites for meetings saving the trust time and money on travel and helping us to reduce our carbon emissions.

15. Waste Schemes

Following the new contract award the Trust has moved to a system using alternative treatment technologies as well as High Temperature Incineration.

This has enabled waste to be disposed of by using more efficient, environmentally sound processes. Offensive and infectious waste is shredded and sterilised off site by our contractor and sent to be used for Refuse Derived Fuel.

Incineration only wastes are segregated and bulked on site and then sent to waste to energy recovery incinerators that produce electricity which is fed back to the National Grid or they produce heat used in city heating schemes.

The waste management team work within the framework of the Waste Hierarchy which is shown below:

Prevention – Using less material in design and manufacture. Keeping products for longer; re use.

Reuse – (and preparation for reuse) – Checking, cleaning, repairing, refurbishing, whole items or spare parts

Recycle – Turning waste into a new substance or product.

Energy Recovery - Includes anaerobic digestion, incineration with energy recovery, gasification and pyrolysis which produce energy (fuels, heat and power) and materials from waste;

Treatment and Disposal – Landfill and incineration without energy recovery

We will continue to introduce recycling schemes such as the ones we currently have in place i.e. paper, cardboard plastics and cans and remove, where practical, all single use plastic streams as part of the NHS Plastic Pledge.

It is our intention to provide an income to the trust through rebates on waste such as scrap metal, aluminum drinks cans and HDPE plastic.

Education is key in relation to increasing our reuse and recycling .

These waste streams as well as the domestic waste streams are zero landfill due to the use of Energy from Waste (EfW), Materials Recycling and Refuse Derived Fuel (RDF) facilities.

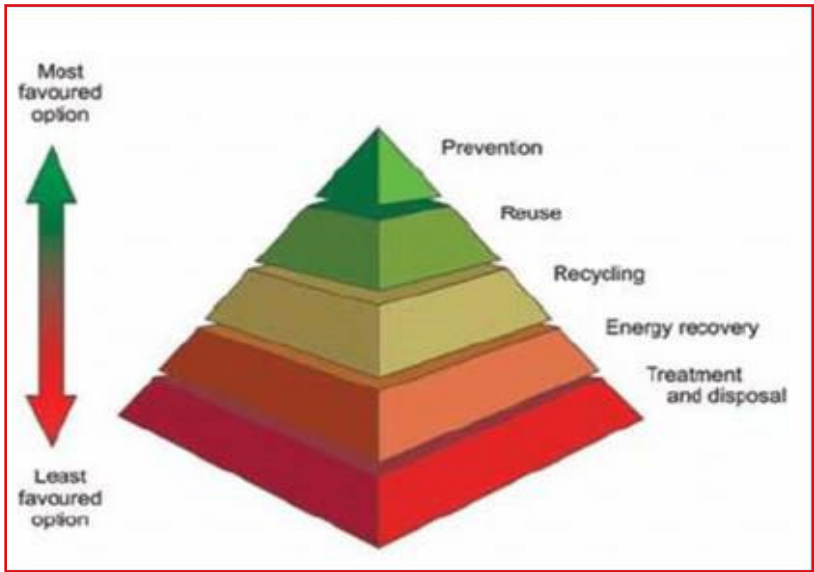
Food waste from wards is disposed in an aerobic digester at Diana Princess of Wales and Scunthorpe General Hospital and use of the ReFood system at Goole District Hospital.

Introduction of the aerobic digesters allow us to dispose of our food waste in the kitchens and the process uses an inoculant which contains friendly bacteria which “eats” the waste resulting in an end product of grey water which is discharged into the drains.

The aim is to dispose of all food waste produced by the sites via this disposal method.

The Trusts domestic waste contract now stipulates all domestic waste must be treated no more than 80 km’s from the hospital and recyclables must be processed within the UK which minimises our carbon footprint and prevents our waste / recyclables being illegally processed abroad.

Waste Hierarchy



16. Procurement EM

NLAG is committed to seeking sustainable procurement options. NHS Supply Chain is a major supplier of products to the Trust and it benefits from the sustainability programme which they are following. This involves the following activities:

- Reducing waste, saving money and minimising environmental impacts
- Sustainable and ethical food Procurement, factoring in economic and social considerations when Procuring food for the NHS.
- Build supply chain resilience
- Improve delivery efficiencies, ensuring continuity of supply

Within our 3 Trust sites our fresh food produce is all locally sourced, all suppliers we work with are reviewed in full based on their sustainable procurement policies to ensure that we share the same approach.

We ensure our suppliers and produce meet all requirements when it comes to ethical farming, waste and nutritional content including meeting all of the national and food safety standards.

We will continue to do this and adopt this approach in other areas of food procurement.

A Task and Finish Food Wastage Group has also been established whose aim is to reduce food waste through the Trust

The Procurement team at NLAG is committed to delivering sustainable procurement.

This involves reviewing current processes and ensuring we adapt, factoring in the economic, environmental and social considerations when procuring Goods and Services.

This involves looking beyond the short-term and looking at the longer-term impacts when conducting Procurement processes. Life Cycle costing is an efficient tool used that enables the review of all elements of the cycle including but not limited to:

- Purchase price and associated costs including delivery, transportation etc
- Operating and maintenance costs including maintenance, utilities etc
- End of life costs including disposal etc

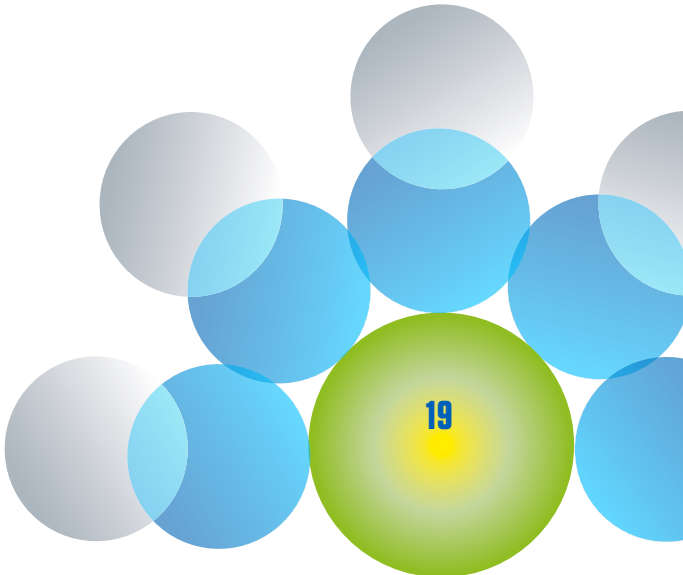
As a Trust we endeavor to seek out opportunities for collaborative procurement with other Trusts in our locality and nationally in order to increase our purchasing power and develop a more shared approach to sustainable procurement.

With any large procurement process we discuss with other Trusts in our locality the potential to collaborate and the long term goal is to collaborate on all high value tender processes.

This can add value in all areas in financial but in particular:

- Transportation – reduction of carbon footprint by reducing frequency of travel both by Trust Representatives and suppliers, deliveries, vehicles on the road etc..
- Reduction of duplication of Procurement processes

Locally we do try to reduce office wastage by keeping all electronic files where possible, and do aim to be paperless. We are working towards paperless requisitioning to reduce paper usage across the Trust so all requisitions and ordering will turn to digital. This is in the planning process and we aim to deliver this in the near future



17. Promoting Sustainability

A realisation of the importance and significance of sustainability needs to be strengthened within the operating divisions and directorates.

The topic of sustainability has been misused in the past, and is often linked a term used within finance, or cost savings programmes.

Operating within the NHS requires a considerable level of standardisation, process and governance.

This can range from the operational front line of patient care, through to the back office functions completing requisitions for equipment, consumables or furniture.

To embed sustainability successfully, it must become part of all processes and things, it must be a consideration of all activity, behaviours, change management and strategy, and it must fall within all remits, planning and operation. Sustainability must be all things NHS.

The Estates and Facilities Directorate are improving the measuring and reporting of data, and have established a baseline of information for us to build from as a target for reduction.

The Communications Team along with the Associate Director of Facilities & Sustainability and the Logistics and Waste Manager, Energy Manager and Energy and Information Officer will inform staff on the Trust's Green agenda.

This will involve highlighting the achievements, reporting on progress and encouraging staff to become involved in sustainable activities, thereby helping the Trust to reduce its carbon footprint.

Future projects and business cases will include an analysis of their

sustainability impact. This will ask project managers to consider areas such as transport, green spaces and flexibility of design, use of utilities; so that they factor in the impact their scheme will have on the wider environment.

All architects and contractors are Building Research Establishment Environmental Assessment Methodology (BREEAM) aware and where cost effective these practices are followed.

This will link in with Procurement Department contracting and evaluations for the future.

We will work with suppliers to encourage them to be more sustainable, helping to raise their awareness and consider their practices to improve efficiency and reduce carbon emissions.

The Trust's Directorate of People and Organisational Effectiveness supports the Trust's continuing commitment to improving the health and wellbeing of patients, staff and the wider community, which in turns helps build a sustainable and healthy community.

Activities include health promotion initiatives, educating staff, using websites, social media platforms and contributing to national and local awareness campaigns.

The overall purpose of such activities is for example to promote the positive health benefits of stopping smoking and monitoring alcohol intake, eating healthily to tackle obesity and ill health conditions likes to poor eating habits.

The Trust is committed to supporting its staff by promoting increased awareness, conducting behavioural change programmes, low carbon travel, and the use of Information and Communication Technologies. This is demonstrated by the reduction of travel time and costs for the majority of mandatory training which can now be completed on line.

Trust policies and procedures are accessible to staff on the Trust intranet as well as dedicated staff wellbeing groups, workforce policies, organisational development and workforce strategies which focus on developing staff, advancing the Trust and improving the patient experience.

Additionally recruitment and retention is collated and monitored at Board level.

The Trust is committed to continuous quality improvements throughout bespoke networks and endeavouring to drive quality, innovation and safety into all it does.

18. Risk

The UK Climate Change Risk Assessment (2017) Evidence Report identified 6 priority risks from climate change within the United Kingdom:

- | | |
|--|---|
| <ul style="list-style-type: none">• Flooding and Coastal change risks to communities, business and infrastructure• Risk to health, well-being and productivity from high temperatures• Risks of shortages of public water supply• Risks to natural capita (ecosystems, soil and biodiversity)• Risks to domestic and international food production | <ul style="list-style-type: none">• New and emerging pests and diseases (public and animal health threats) <p>As we experience more frequent and rapid change of severe weather, the risk to health increases.</p> <p>We experience hotter summers, colder winters, and more significant levels of rain which our drains, rivers and sewerage infrastructure fail to cope with.</p> <p>These events become more likely to impact on the quality of life and health and wellbeing of a majority of</p> |
|--|---|

the communities we aim to provide care to.

Our Green plan is part of a wider solution to improve resilience to climate change.

Sustainability from a design, build or innovation perspective can also provide a risk when evaluated against a cost benefit scenario, funding can be compromised resulting in a risk to sustainable methods being chosen, so organisations need funding and strict guidance to mandate all sustainable options into healthcare.

19. Conclusion

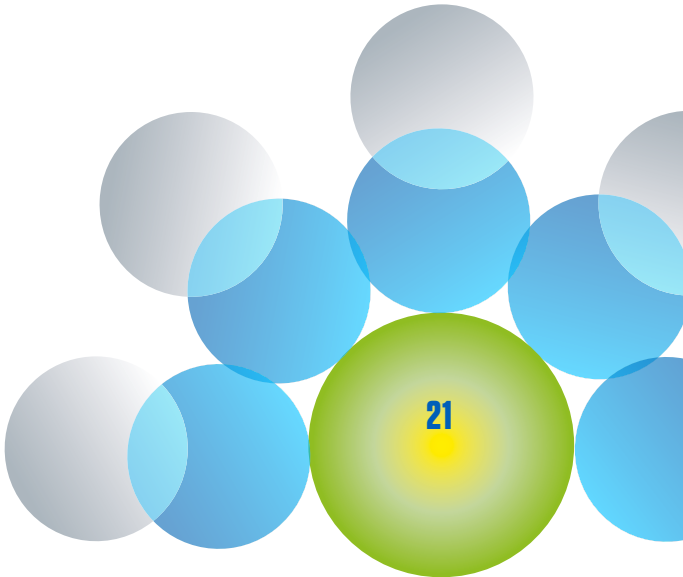
Our two year Green Plan focuses on all the current initiatives, legislation and NHS E/I documentation and campaigns. Our Green Plan provides the role of sustainability in the context of both the national and local agendas and upon delivery will ensure NLaG makes substantial contribution in meeting future targets and thus reducing our carbon emissions.

Our Green Plan contains a programme of principles to reduce carbon and details specific energy conservation measures that will reduce our energy consumption, lessen our production of waste and promote more sustainable modes of travel.

Our reporting and governance structure through the E&F directorate will provide assurance via the Finance & Performance committee and then to Trust Board, with the decision making forums of Trust Management Board and Capital Investment Board approving

energy conservation schemes and associated funding.

The Sustainability Management Group will produce an action plan to enable the E&F directorate to monitor progress against our Green Plan.



20. Appendix

Action Plan Number	Source	Requirement	Progress	Operational Lead	Timescale	Risk Rating	Implementation of Actions Progress (RAG Rate)
17		Purchase of 100% REGO Electricity		Energy	Apr-21		
18		Ensure all meters have AMR capability		Energy	Sep-21		
19		Ensure all recharge meters are on our AM&T system		Energy	Sep-21		
20		Move onto water framework		Energy	Dec-21		
21		Consolidate all accounts onto the Trusts utility framework		Energy	Dec-21		
22		Replace Coal fired boilers with new energy centre at GDH		Energy	Sep-21		
23		Explore options for SGH Energy Centre		Energy	Mar-22		
24		Upgrade LED lighting across the Trust to 100%		Energy	Sep-21		
25		Upgrade insulation across the Trust		Energy	Sep-21		
26		Optimisation of BMS across the Trust		Energy	Sep-21		
27		Upgrade of domestic hot water plant at GDH		Energy	Sep-21		
28		Maximise benefits of EPC 1		Energy	On Going		
29		Work with Capital team to ensure energy guidelines on new builds (Net Zero)		Energy	Sep-21		
30		Complete DEC for the Trust		Energy	Jun-21		
31		Complete CHPQA for EPC 1		Energy	Mar-21		
32		Extraction licence renewal for borehole at DPOW		Energy	Oct-21		
33		Deliver pedestrian friendly site walking environments ensuring end of walking routes are safe for pedestrians.		Travel	Nov-21		
34		Regular walkers breakfast for staff & residents (where applicable)		Travel	Nov-21		
35		Installation of showering/changing facilities for staff across remaining sites		Travel	Nov-21		
36		Installation of Storage lockers across remaining sites		Travel	Nov-21		
37		Improve bus stop waiting facilities at all sites		Travel	Nov-21		
38		Ensure that all sites benefit from RTI screens displaying bus time information.		Travel	Nov-21		
39		Investigate the provision of car sharing spaces		Travel	Nov-21		
40		Review Car parking charges for people car sharing and allocated car share bays at all three sites		Travel	Nov-21		
41		Identify and reduce single use plastic waste streams		Waste	Ongoing		
42		Educate and encourage staff to increase recycling in all departments		Waste	Ongoing		
43		Educate and engage with clinical staff to ensure correct segregation and reduce contamination of clinical waste		Waste	Ongoing		
44		Develop waste yard at SGH to mirror the DPOW operation including on-site supervision to ensure correct segregation to maximise income to the trust		Waste	Ongoing		
45		Reduce furniture disposal and increase re-use, working with procurement, HTF and LOF		Waste	Ongoing		
46		Create Trustwide Waste Strategy		Waste	Dec-21		
47		Review waste porter's and incorporate into Logistics and Waste Team	BC completed and submitted to AD of Facilities and Sustainability	Waste	Apr-21		
48		Waste Operatives (once brought under L&W) to complete specific waste training		Waste	Jun-21		

