

Sustainability Policy

(Amalgamates previous FM01 Energy and Water Policy and ESF001 Sustainability Policy)

Solent NHS Trust policies can only be considered to be valid and up-to-date if viewed on the intranet. Please visit the intranet for the latest version.

Purpose of Agreement	Summary of government targets to achieve net carbon zero by 2040. This policy highlights what areas are applicable to the trust and the order in which we will undertake measures to reduce our carbon footprint in line with NHS Greener guidance.	
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Review and amendment log

Version Number	Review date	Amendment section no.	Page	Amendment made / summary	Changes approved by	
1	December 2013			New policy	Sustainability Sub committee	
2	January 2014			Drafting revisions Estates and Facilities Committee		
3	February 2014			Content and drafting revisions	Policy Steering Group Membership	
4	February 2018			Update review	Estates, Facilities and Sustainability Group	
4	August 2018			Update review including comments from PSG	Assurance Committee	
5	July 2021			Chairs action taken to extend policy review date to December 2021	, , , , ,	
6	December 2021			Chairs action taken to extend policy review date to May 2022 to allow time to gain approval via local governance groups	, , ,	
New (rewrite) – version 1	May 2022			Complete policy re-write to include Energy and Water policy (FM01) and changes to guidance from NHS Greener	Policy Steering Group,	

SUMMARY OF POLICY

NHS England's Sustainability Strategy 2020 "**Greening the NHS**" outlines the vision for a sustainable healthcare system. This will reduce carbon emissions and air pollutants, minimise waste, be more efficient with scarce resources and build climate resilience within our communities.

This policy focusses on key areas of sustainability and sets the strategic direction for the Trust regarding the reduction of carbon emissions in accordance with the UK government statutory targets.

There is clear evidence from the size and breakdown of the carbon footprint of the NHS that there are key areas where action needs to be taken by the Trust. This strategy document identifies our commitment to delivering action on each of the following key areas:

- Care
- Estates
- Supplies
- Travel
- Communities and Our people

These areas are the basis for our Green Plan, which is a board approved commitment setting out our approach to minimising, measuring and monitoring our carbon impact. A Green Action Plan has also been established with clear actions that will be monitored by the Sustainability Action Group (SAG). This group meets bimonthly and its members represent most clinical and corporate teams, though more members are always welcome.

Greener NHS have set two targets:

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

Solent NHS Trust's NHS Carbon Footprint (emissions we can control) for 2020/21 was 4,069 tonnes CO_2e based on the sites that we control. Our Carbon footprint plus (emissions we can influence) for the same period was 14,878 tonnes CO_2e .

Our green action plan sets out several items that will reduce our carbon footprint and we will prioritise these in accordance to national and local authorities, within the Hampshire and Isle of Wight (IOW) Integrated Care System (ICS)

For this financial year (2022/23), we will address:

- 1. Medicines
- 2. Travel and Transport
- 3. Supply Chain and Procurement
- 4. Estates and Facilities
- 5. Digital Models of Care

Sustainability Guidance is changing rapidly, the trust will endeavour to follow the latest guidance documents released from NHS Greener which can be found at https://www.england.nhs.uk/greenernhs/. These documents may go beyond the commitments outlined within this policy; however, this will always be reviewed following significant updates from NHS Greener.

Whilst identifying that the overall responsibility for the implementation of this strategy rests with the Chief Executive and the Board of Directors, in practice the management of it is devolved to the Associate Director of Estates. It is however expected that all directorates, managers, and staff will play an active role in making the Trust a low carbon organisation, and sustainability will infiltrate every part of the core business.

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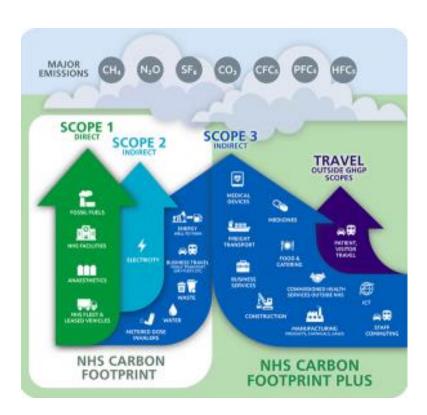
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SUSTAINABILITY POLICY

1. INTRODUCTION & PURPOSE

- 1.1. It is now widely recognised that climate change, population, and exhausting the world's resources, is a serious threat to life, our health, and our wellbeing. Unless we all take effective action now, millions of people around the world will suffer hunger, water shortages and coastal flooding. As one of the UK's largest organisations, the NHS has a responsibility to act in order to make a real difference and to set an important example.
- 1.2. In June 2019, in recognition of the urgency surrounding climate change, the UK Government committed to take action by becoming the first major economy in the world to pass laws to end its contribution to global warming by 2050. This exceeds the previous Climate change act target of 80% reduction from 1990 levels.
- 1.3. In October 2020 NHS Chief Executive Sir Simon Steven declared that the NHS would be Net Carbon Zero by 2040. NHS Contributes to 4% of the country's emissions and over 7% of the economy, henceforth, has an essential role in meeting the net zero targets.
- 1.4. Greener NHS have set two targets:
 - For the emissions we control directly (the NHS Carbon Footprint), we will reach net zero by 2040, with an ambition to reach an 80% reduction by 2028 to 2032.
 - For the emissions we can influence (our NHS Carbon Footprint Plus), we will reach net zero by 2045, with an ambition to reach an 80% reduction by 2036 to 2039.

1.5.



- 1.6. Solent NHS Trust have met the requirement to have a board approved Green Plan setting out our aims, objectives, and delivery plans for carbon reduction. It is focused on the next 3 years and is aligned with the national and regional priorities
 - 1. Medicines
 - 2. Travel and Transport
 - 3. Supply Chain and Procurement
 - 4. Estates and Facilities
 - 5. Digital Models of Care
- 1.7. We have established the carbon footprint for 2020/21 as our baseline, which was measured to be 4,069 tonnes CO_2e based on the sites that we control. Our Carbon footprint plus for the same period was 14,878 tonnes CO_2e .

Targets below are from the Memorandum of Understanding for Regional Leadership and Delivery 2022/23.

1.7.1. Medicines:

- Reducing the proportion of desflurane used in surgery to less than 5% of overall volatile anaesthetic gases volume in all trusts, in line with the proposed 2022/23 NHS Standard Contract.
- Reducing the emissions associated with the use of nitrous oxide, in line with the 2022/2023 Standard Contract.
- Reducing the carbon impact of inhalers, in line with the commitment of a 50% reduction by 2028 and a 13% reduction in 2022/23 in relation to the 2019/20 baseline, by:
 - supporting the achievement of the four inhaler indicators as part of the Investment and Impact Fund (IIF). This ensures that national resources accessible on Future NHS are promoted, respiratory best practice are followed and change in inhalers are undertaken in consultation with patients, with appropriate inhaler technique training.
 - Decreasing the proportion of metered dose inhalers prescribed to 25% of all non-salbutamol inhalers prescribed. This reduces the mean life-cycle carbon intensity of all prescribed salbutamol inhalers to 13.4kg CO₂e by March 2024.

1.7.2. Travel and Transport:

- Ensuring that the region's fleet is made up of at least 90% Low Emission Vehicles (LEV) by March 2023. This should include a target of 10% Ultra-Low Emissions (ULEV) and Zero Emission Vehicles (ZEV) by March 2023, ensuring that all vehicles (under 3.5 tonne) purchased or leased are ULEVs and ZEVs.
- Ensuring that only ULEVs or ZEVs are available to staff through car salary sacrifice schemes.
- Ensuring all ICSs have a salary sacrifice cycle-to-work scheme in place for staff; as well
 as facilities available to encourage staff and visitors to cycle-to-work where
 appropriate.

1.7.3. Supply Chain and Procurement (supporting regional procurement teams):

- Supporting implementation of the NHS Net Zero Supplier Roadmap, by:
 - Supporting Trusts and ICSs to place a minimum 10% weighting on net zero and social value for all NHS tenders from April 2022, as is required.
 - Gaining assurance from procurement teams that NHS suppliers requiring a carbon reduction plan to qualify for NHS contracts from April 2023 (contract over £5M annually) have been identified, and are prepared for this new requirement
 - Reducing reliance on office paper in line with a 50% reduction use by 2025 compared to baseline and ensuring ICSs and constituent NHS organisations only purchase 100% recycled content paper for all office-based functions and all non-office-based functions by 2025.
 - To have walking aid refurbishment schemes implemented in all trusts by end of April 2024

1.7.4. Estates and Facilities (supporting regional estates teams):

- All electricity purchased by NHS trusts is REGO-certified as soon as practically possible.
- Supporting the Long-Term Plan (LTP) ambition to phase out coal and oil fuel as primary heat sources in NHS Secondary Care sites
- Supporting the implementation of the Net Zero Hospital Buildings Standards (due to be published in Q1 22/23).
- Support regional estates teams to monitor projects receiving funding through the Public Sector Decarbonisation Scheme.

1.7.5. Digital Ways of Working/Models of Care:

- Build from our 2021/2022 target to articulate the case for sustaining the digital transformation of activity triggered during the pandemic response in 2020.
- Continue to measure and map changes to digital models of care to identify carbon savings and aid decision making for service delivery transition.
- Align the sustainability agenda with the Digital Transformation targets including Virtual Wards/Virtual Care, Electronic Patient Records, PIFU and outpatient virtual care, electronic teleconference, and primary care.
- Exploit geospatial analysis to further aid digital transformation and travel habits via technology innovations
- 1.8 **Greener NHS** are issuing new guidance and revising documentation rapidly as new evidence and greater advances in technologies become apparent, we will work collectively with HIOW ISC to ensure that latest guidance is followed at all times.

2. SCOPE & DEFINITIONS

2.1 This policy applies to locum, permanent, and fixed term contract employees (including apprentices) who hold a contract of employment or engagement with the Trust, and secondees (including students), volunteers (including Associate Hospital Managers), bank staff, Non-Executive Directors and those undertaking research working within Solent NHS

Trust, in line with Solent NHS Trust's Equality, Diversity and Human Rights Policy. It also applies to external contractors, agency workers, and other workers who are assigned to Solent NHS Trust

2.2 Definitions

Long Term Plan (LTP)

The NHS Long Term Plan will ensure that the NHS is future proof, adaptable in meeting the needs of patients and their families and implement bold vision across many areas.

NHS Carbon Footprint

Emissions we control directly, including Scope 1, 2 and some Scope 3 emissions.

NHS Carbon Footprint Plus

Emissions we can influence, including the remaining scope 3 emissions

Scope 1 Emissions

This one covers the Green House Gas (GHG) emissions that a company produces directly — for example, the emissions produced as a consequence of running their boilers and vehicles

Scope 2 Emissions

These are the GHG emissions produced indirectly – For example, procuring energy for company owned buildings that produces GHG emissions, such as electricity produced by fossil fuels.

Scope 3 Emissions

All GHG emissions associated with not the company itself, but what the company is indirectly responsible for, up and down its value chain. For example, GHG emissions produced during the manufacturing process of products that your company buys, as well as any GHGs that may be emitted when using those purchased products.

Net Carbon Zero (NCZ)

Net zero is achieved when the same amount of carbon dioxide / carbon dioxide equivalent is taken from the atmosphere as it is released. This includes scope 1, 2 and 3 emissions.

Carbon Dioxide Equivalent

A metric measure used to compare emissions from various greenhouse gases based on their Global Warming Potential (GWP), by converting amounts of other gases to the equivalent amount of carbon dioxide.

Global Warming Potential

A measure assigned to each greenhouse gas to indicate the amount of warming a gas causes over a given period of time (normally 100 years).

Kilograms (kg)

Metric unit of weight.

Low Emission Vehicles

A vehicle that produces less than 100 grams of Carbon Dioxide (CO2) per kilometre from the tail pipe. Limits are subject to change by UK vehicle certification agency as vehicle efficiency improves.

Ultra-Low Emissions Vehicles

A vehicle that produces less than 75 grams of Carbon Dioxide (CO2) per kilometre from the tail pipe. Limits are subject to change by UK vehicle certification agency as vehicle efficiency improves.

Zero Emission Vehicles

A vehicle that produces no carbon dioxide (CO2) from the tailpipe.

3 ROLES & RESPONSIBILITIES

- 3.1 **The Chief Executive** has overall responsibility for ensuring compliance with statutory regulations, guidance and good corporate citizenship related to environmental and sustainability within the Trust. Ensures that the organisation has processes and systems in place to guarantee the implementation of the policy.
- 3.2 **The Trust Board** will ensure that sustainability becomes integrated into all the Trust's business activities, as well as support and promote the policy throughout the organisation.
- 3.3 **Chief Finance Officer** is the Trusts Executive lead on sustainability and carbon reduction in addition to chairing the Trust's Sustainability Committee.
- 3.4 **The Associate Director of Estates and Facilities** is responsible for the development and communication of the policy, alongside the shaping of the Sustainability Strategy
- 3.5 **Trust Sustainability Lead** is responsible for implementation and delivery of the Trusts Policy and Strategy, particularly the measurement, reporting and reduction of carbon and associated action plans.
- 3.6 **All Managers and Team Leaders** should make staff aware of the policy and their contribution to sustainable issues.
- 3.7 **All staff** have a responsibility to protect the environment and to work sustainably.
- 3.8 **Sustainability Action Group** will drive and shape the delivery of the policy objectives and Work Plan, as set out in the Strategy and Management plan

4 TRAINING

4.1 Training in Sustainability is not currently mandatory or required, however, NHS Greener and HIOW ICS are developing national and regional training tools.

In the interim, the trust Sustainability Lead will provide awareness and guidance for employees, partners, and contractors regarding sustainability, climate change and carbon literacy.

An active communications initiative will be pursued to engage all staff, patients, visitors, and others who visit or use our facilities.

5 EQUALITY IMPACT ASSESSMENT

An Equality and Diversity Impact Assessment (EDIA) has been carried out on this document using the Trust approved Equality Impact Assessment (EIA) as Appendix A.

6 SUCCESS CRITERIA / MONITORING EFFECTIVENESS

- 6.1 Sustainability Action Group will monitor the completion of actions arising from the Green Plan Action Plan.
- 6.2 Estates, Facilities and Sustainability Group will regularly review progress, conduct reviews and updates of the policy.
- 6.3 Updates and Escalations will be provided to
- Finance and Commercial Group
- Finance & Infrastructure Committee
- Senior Leadership Team
- Trust Board
- 6.4 The trust annual report includes a report on our current carbon footprint and energy consumption.
- 6.5 Good Corporate Citizen was superseded by Sustainable Development Assessment Tool (SDAT) which discontinued in 2021. NHS Greener are preparing a new measuring tool which is expected to be released in the first quarter of 2022/23 and will be adopted by the Trust upon launch.
- 6.6 The Trust will benchmark its performance annually against other Trusts, Public Bodies and Businesses, through Model Hospital and the completion of Estates Return Information Collection system (ERIC).
- 6.7 Non-compliance will be reported via the risk register and through appropriate governance routes to trust board.

7 REVIEW

7.1 This document may be reviewed at any time at the request of either staff side or management but will automatically be reviewed 3 years from initial approval and thereafter on a triennial basis unless organisational changes, legislation, guidance or non-compliance prompt an earlier review.

8 REFERENCES AND LINKS TO OTHER DOCUMENTS

NHS Long Term Plan – https://www.longtermplan.nhs.uk/

Delivering a 'Net Zero' National Health Service – https://www.england.nhs.uk/greenernhs/wp-content/uploads/sites/51/2020/10/delivering-a-net-zero-national-health-service.pdf

Solent Green Plan – <u>approved-solent-nhs-green-plan-v1.pdf</u>

9 GLOSSARY

CO2e	Carbon Dioxide Equivalent
HIOW ICS	Hampshire and Isle of Wight Intergrated Care System
IIF	Investment and Impact Fund
kg	Kilograms
LEV	Low Emission Vehicles
LTP	Long term Plan
NCZ	Net Carbon Zero
ULEV	Ultra-Low Emissions Vehicles
ZEV	Zero Emission Vehicles

Equality Analysis and Equality Impact Assessment



Equality Analysis is a way of considering the potential impact on different groups protected from discrimination by the Equality Act 2010. It is a legal requirement that places a duty on public sector organisations (The Public Sector Equality Duty) to integrate consideration of Equality, Diversity, and Inclusion into their day-to-day business. The Equality Duty has 3 aims, it requires public bodies to have due regard to the need to:

- **eliminate unlawful discrimination**, harassment, victimisation, and other conduct prohibited by the Equality Act of 2010.
- advance equality of opportunity between people who share a protected characteristic and people who do not.
- **foster good relations** between people who share a protected characteristic and people who do not.

Equality Impact Assessment (EIA) is a tool for examining the main functions and policies of an organisation to see whether they have the potential to affect people differently. Their purpose is to identify and address existing or potential inequalities, resulting from policy and practice development. Ideally, EIAs should cover all the strands of diversity and Inclusion. It will help us better understand its functions and the way decisions are made by:

- considering the current situation
- deciding the aims and intended outcomes of a function or policy
- considering what evidence there is to support the decision and identifying any gaps
- ensuring it is an informed decision

You can find further information via the Solent e-learning module:

https://mylearning.solent.nhs.uk/course/view.php?id=170

Equality Impact Assessment (EIA)

Step 1: Scoping and Identifying the Aims

Service Line / Department	Asset Management / Estates and Facilities			
Title of Change:	Sustainability Policy			
What are you completing this EIA for? (Please select):	Policy (If other please specify here)			
What are the main aims / objectives of the changes	Combination of Sustainability Policy and Energy and Water Policy, to incorporate latest guidance from NHS Greener and legislation changes			

Step 2: Assessing the Impact

Please use the drop-down feature to detail any positive or negative impacts of this document /policy on patients in the drop-down box below. If there is no impact, please select "not applicable":

Protected Characteristic	Positive	Negative	Not	Action to address negative impact:
	Impact(s)	Impact(s)	applicable	(e.g. adjustment to the policy)
Sex			X	
Gender reassignment			X	
Disability			Х	
Age			X	
Sexual Orientation			X	
Pregnancy and			Χ	
maternity				
Marriage and civil			Х	
partnership				
Religion or belief			X	
Race			Χ	

If you answer yes to any of the following, you MUST complete the evidence column explaining what information you have considered which has led you to reach this decision.

Assessment Questions	Yes / No	Please document evidence / any mitigations			
In consideration of your document		Internal:			
development, did you consult with		Sustainability Action Group Estates, Facilities and Sustainability Group			
others, for example, external					
organisations, service users, carers, or	Yes	Colleagues with A	Colleagues with Asset Management and wider E&F		
other voluntary sector groups?)		team			
		External: Guidance from HIOW ICS			
Have you taken into consideration any	Yes	Environmental and sustainability regulations have			
regulations, professional standards?	163	been considered and incorporated in this policy			
Step 3: Review, Risk and Action Plans					
How would you rate the overall level of	Low	Medium	High		
risk to the organisation if no action taken?					
What action needs to be taken to reduce or		N/A			
eliminate the negative impact?					
Who will be responsible for monitoring and regular		Jo Warwick, Building and Environmental Compliance			
review of the document / policy?	Manager				

Step 4: Authorisation and sign off

I am satisfied that all available evidence has been accurately assessed for any potential impact on patients and groups with protected characteristics in the scope of this project / change / policy / procedure / practice / activity. Mitigation, where appropriate has been identified and dealt with accordingly.

Equality
Assessor:

Date: 12.09.2022

Prote	ected characteristic	Who to Consider	Example issues to consider	Further guidance
1.	Disability	A person has a disability if they have a physical or mental impairment which has a substantial and long-term effect on that person's ability to carry out normal day today activities. Includes mobility, sight, speech and language, mental health, HIV, multiple sclerosis, cancer	 Accessibility Communication formats (visual & auditory) Reasonable adjustments. Vulnerable to harassment and hate crime. 	Further guidance can be sought from: Solent Disability Resource Group
2.	Sex	A man or woman	 Caring responsibilities Domestic Violence Equal pay Under (over) representation 	Further guidance can be sought from: Solent HR Team
3	Race	Refers to an individual or group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.	 Communication Language Cultural traditions Customs Harassment and hate crime "Romany Gypsies and Irish Travellers", are protected from discrimination under the 'Race' protected characteristic 	Further guidance can be sought from: BAME Resource Group
4	Age	Refers to a person belonging to a particular age range of ages (e.g., 18-30 year olds) Equality Act legislation defines age as 18 years and above	Assumptions based on the age range Capabilities & experience Access to services technology skills/knowledge	Further guidance can be sought from: Solent HR Team
5	Gender Reassignment	"The expression of gender characteristics that are not stereotypically associated with ones sex at birth" World Professional Association Transgender Health 2011	Tran's people should be accommodated according to their presentation, the way they dress, the name or pronouns that they currently use.	Further guidance can be sought from: Solent LGBT+ Resource Group
6	Sexual Orientation	Whether a person's attraction is towards their own sex, the opposite sex or both sexes.	 Lifestyle Family Partners Vulnerable to harassment and hate crime 	Further guidance can be sought from: Solent LGBT+ Resource Group
7	Religion and/or belief	Religion has the meaning usually given to it, but belief includes religious and philosophical beliefs, including lack of belief (e.g. Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition. (Excludes political beliefs)	 Disrespect and lack of awareness Religious significance dates/events Space for worship or reflection 	Further guidance can be sought from: Solent Multi-Faith Resource Group Solent Chaplain
8	Marriage	Marriage has the same effect in relation to same sex couples as it has in relation to opposite sex couples under English law.	PensionsChildcareFlexible workingAdoption leave	Further guidance can be sought from: Solent HR Team
9	Pregnancy and Maternity	Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In non-work context, protection against maternity discrimination is for 26 weeks after giving birth.	 Employment rights during pregnancy and post pregnancy Treating a woman unfavourably because she is breastfeeding Childcare responsibilities Flexibility 	Further guidance can be sought from: Solent HR team