

Environmental policy			
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1. Introduction

We all value our health and the places where we live and recognise that enabling individuals and communities to lead healthy lives also means acknowledging the value of our environment as a social asset. Environmental sustainability objectives, such as reducing carbon emissions and preparing for extreme weather events, must be achieved whilst protecting natural resources and strengthening social systems. These, in turn, can provide significant short term and long term benefits for our health and wellbeing (including Mental Health) and others in the communities we serve.

When considering demographics and our use of resources it is widely accepted that the current health and care system is unsustainable without radical transformation. For the first time the public sector is developing an approach to sustainability that embraces the entire health and care system. As a result AWP needs to work in partnership on sustainability issues not only across our Trust but also within the wider communities via coordinating across our partnerships with STP members and with other associated stakeholder groups.

2. Purpose or aim

Over the next five years current policy direction will lead to integrated care closer to home. The Trust therefore demonstrates responsibility and commitment to a broader and more global perspective of health and wellbeing within this new sustainability direction.

This can be achieved by the Trust in assisting to develop strong and healthy communities that support people to minimise their impact on the environment and be resilient to changes in the world around us. Therefore at a local level the Trust should manage its resources and develop partnerships that strengthen/ help neighbourhoods to flourish and annually report its progress.

The following areas reflect areas of broader environmental policy direction:

2.1 Promote healthier environments

A healthier environment can contribute to better outcomes for all. This involves valuing and enhancing the use of natural resources (whilst reducing harmful health effects of pollution and significantly reducing carbon emissions).

2.2 Assist communities/services to be ready and resilient for changing times and climates

Periods of heat, cold, flooding and other extreme events disproportionately affect vulnerable people. It is a Trust responsibility to address the consequences of these events via multi-agency planning and organisational collaboration, multi- agency working will be underpinned by local plans and assurance.

3. Scope of sustainable principles

Sustainable development principles aim to ensure the basic needs and quality of life for everyone are met now and for future generations. The guiding principles are:

- ensuring a strong, healthy and just society
- living within environmental limits
- achieving a sustainable economy
- promoting good governance
- using sound science responsibly

(taken from Sustainable Development in Government3).

Note The term sustainability refers to the wider concept as described above and should not be confused with the notion of financial affordability.

4. Content of policy (incorporating Carbon Reduction Plan)

4.1 Carbon reduction

Carbon emissions are probably the most obvious and important indicator of environmental impacts. The Trust achieved just over 25% carbon reduction since 2007/8 reflecting the success of previous 5 year plans (up to 2017/8) Appendix 1 shows detailed analysis of out-turn figures.

4.2 Future target to reduce carbon emissions by 10% by 2022/3

How will the target be achieved ? The National health and care system carbon footprint has identified carbon hotspots that can be targeted to achieve significant reductions via concentrating on the following areas of activity to further reduce our energy use.

- **Pharmaceuticals**

The Trust should continue to engage with partners in the supply chain to seek to reduce carbon impacts as part of the procurement process for pharmaceutical products

- **Energy**

The Trust is to continue to invest in differing technologies and building solutions and building fabric with a view that performance management activity can be used to establish KPIs to consistently measure the Trust carbon footprint.

Seek support from our Service users and Staff in reducing demand for energy within our sites

- **Travel and transport**

By carefully considering the location of the Trust service sites and introducing new ways of working (mobile working and sharing other space via co-location etc) seek to reduce the Trust business mileage.

The continued selection of lower emission vehicles for transport fleet both directly owned pool cars and grey fleet (vehicles owned/used by others on Trust business ie leased) to have a beneficial impact by limiting carbon production in transport.

5. Roles and responsibilities

5.1 Leadership

Sustainable and resilient services will only emerge from a culture that understands and values environmental and social resources alongside financial ones. Therefore engagement at all levels with the public, service users, Trade Unions and staff can provide the basis for positive action at every level.

Trust Actions to meet these Leadership expectations will be achieved by Identifying at Executive level a lead member to champion and support environmental issues and continue to provide support for staff representatives (including Unions and volunteer).

5.2 Develop sustainable clinical and care models

Trust Actions in developing new models of service delivery encompassing new ways of working with service users in their own homes or locality to reduce travelling and via locating services in appropriate locations reduce travelling along with maximizing the adoption of new technology. Therefore the Trust to devise sustainable models of care which can deliver better health and

wellbeing by enhancing enabling and integrated approaches to care, building resilience and reducing environmental impacts.

5.3 Healthy, sustainable resilient communities/ new service models

To be better prepared for environmental and climatic changes, including the impacts of severe weather events such as heat waves, cold snaps and flooding, the Trust will need to engage in planning processes with commissioners and other stakeholders involved via :

- planning of long term delivery of services in appropriate locations
- and
- management of limited and shared resources at a local level to meet the demand when a crises arises.

5.4 Trust commissioning and procurement

The Trust will encourage NHS commissioners to evaluate (via Health and Wellbeing Boards) our service tenders to include locally based sustainable development plans as part of their Health and Wellbeing Strategies.

6. National standards and reporting

The Trust Carbon reduction plans were initiated in response to Government environmental and carbon reduction agenda (Kyoto Protocol) and binding European legislation under the Climate Change Act with a National Target of 34% reduction in carbon emissions by 2020.

6.1 Reporting

The Trust adopted a carbon reduction strategy in 2007/8 with a target to reduce emissions by 18% by 2013/14 eventually achieving an out turn of just over 25% by 2016/7 (Appendix1). Environmental Performance reporting is now a Treasury reporting requirement within the Trust Annual Accounts and annual carbon foot-printing to be reviewed by the Trust Board on an annual basis

7. Audit via corporate social responsibility assessments annual carbon foot-printing

In order to review the Trust performance as regards sustainability the Trust should undertake annual reviews of Good Corporate Citizenship assessments and report progress annually to the Board against progress. Outputs to be incorporated with local communities and partner organisations to prepare for the impact of climate change and have plans in place to deal with events such as heatwave, flooding and cold snaps as set out in the National Adaptation Program (July, 2013)

8. Carbon reduction phase 3 plan 2013/4 to 2018/2023

In recognising the Trust actions and commitment too date The Trust commits to a carbon reduction plan that seek to achieve 35 % reduction in carbon generated by committing to reduction in the following areas of activity

Summary of Carbon reduction plan for 2018/19- 2022/3 (from 2006/7 baseline)	
Electricity	4.0
Gas	4.0
Waste	2.0
Procurement	1.0
Renewable energy target	(-1%)
Cumulative savings 2007/08-2017/8	25 %
Total Carbon reduction target from 20018/19 to 2020/2023 = 35 %	

9. Appendix 1:-Carbon reduction plan and progress review 2014/15

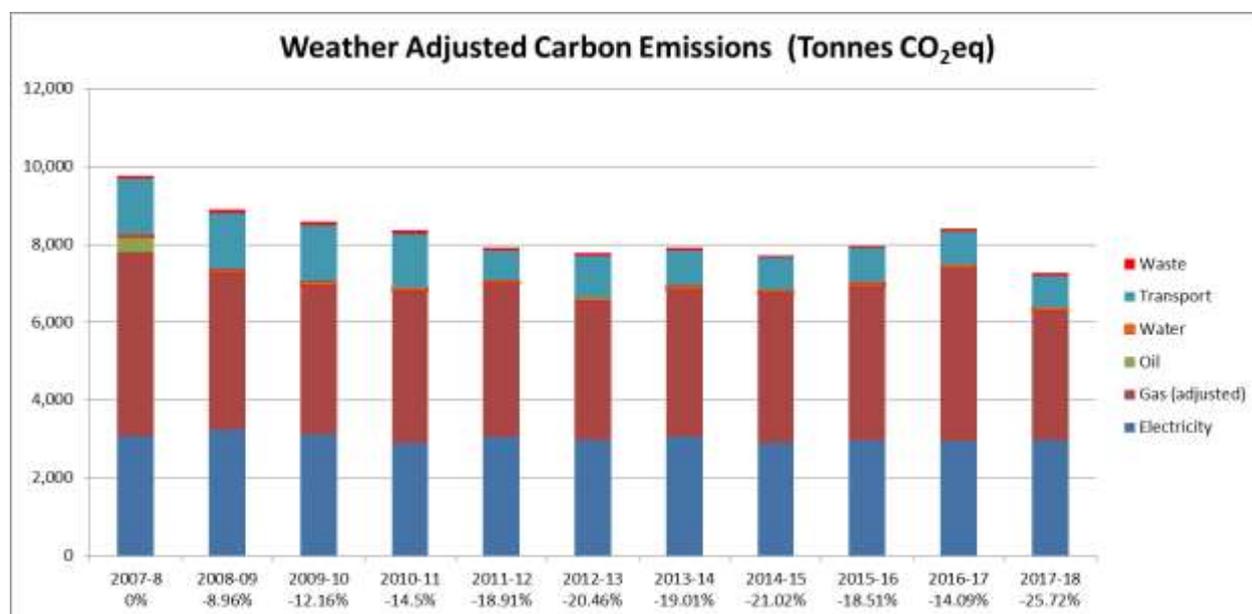
9.1 Carbon footprint calculation methodology

Due to changes in carbon foot-printing assessment methods the Trust has undertaken a full review of historic data appointing specialist external environmental consultants. The reported figures provided by the consultants Eunomia Research & Consulting are based on current site management data. Data in this report is based on current Defra Factors (hukconversionfactorscarbonsmart.co.uk)

All years have been re-baselined using updated factors as at 2013, according to Defra guidelines. Conventions for calculation are guided by British Standard PAS2015 and GHG protocol standards.

Organic growth has not been used to recalculate environmental impact accordance with the GH protocol.

9.2 Carbon reduction trends

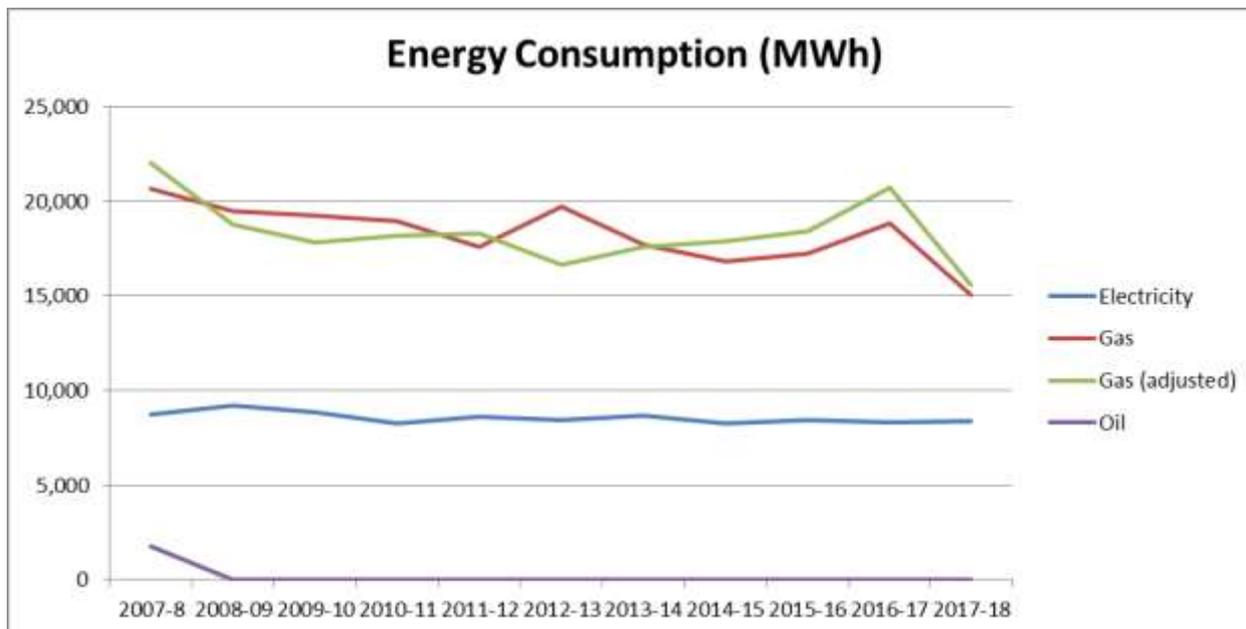


Graph 2 Carbon Reduction Trend 2007/8 to 2017/18 Post weather adjustment

9.3 Energy consumption by source

The table below Graph 3 shows trend in consumption of each energy type for the trust over the period since the adoption of a carbon reduction plan. The trend analysis suggests that electricity consumption is constant and gas more volatile (possibly reflecting gas use for space heating and electricity consumption is used for powering equipment).

As the Trust has reduced poorer insulated estate (by floor area) trends of on going demand for electricity consumption will reflect increased service operating hours/increased use of IT by staff and service users who also increasingly depend on personal electronic devices whilst in our care.

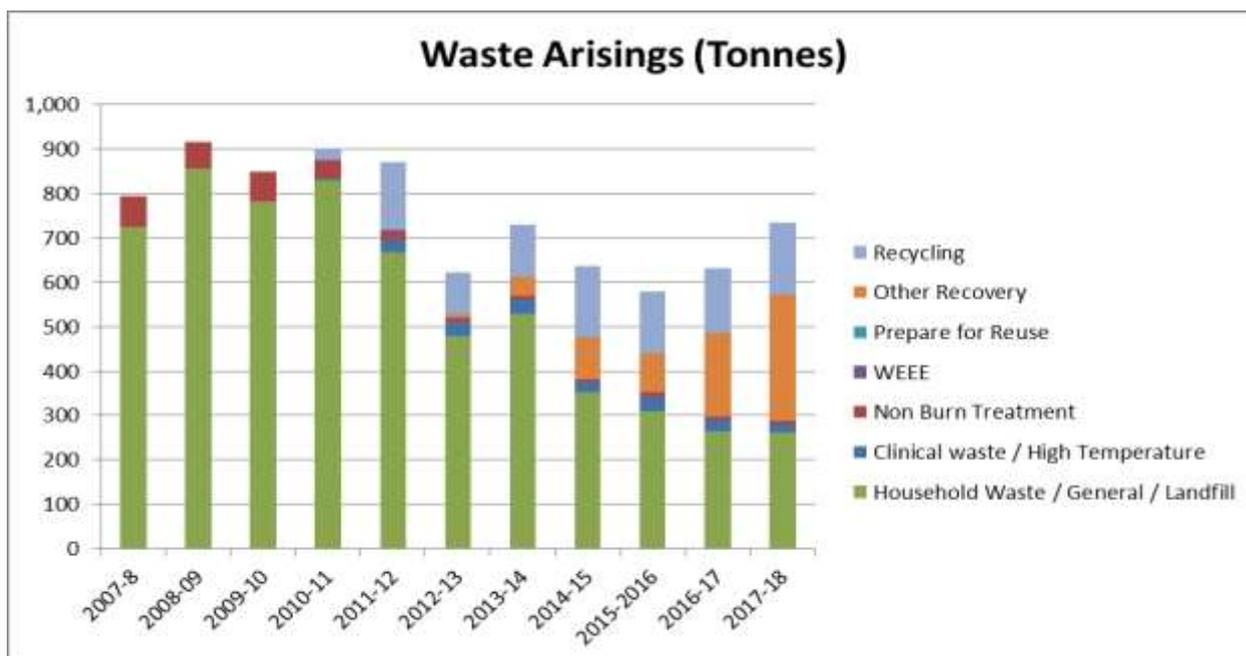


Graph 3 Energy Consumption by fuel type 2007/08 – 2017/8

Note: Adjusted gas consumption is adjusted according to the 'degree days' method. This adjusts the consumption figures to allow for variations in external ambient temperature and is based on a constant internal temperature of 18.5 degrees and demonstrates the affect of recent cold winters on gas usage.

9.4 Waste production

Trust Waste management is contracted out during the course of the reduction plan increased waste produced (see graph 4) shows generally improved segregation (Graph 4) and steady recycling rates (Graph 5) The reduced use of high impact hazardous waste treatment has significantly improved. Further training is to be considered to further increase recycling rates (Recycling rate is based on the numerator (% tonnes sent for reuse through formal collection, composting, and recycling) divided by the denominator (all waste arising except rubble)*100.



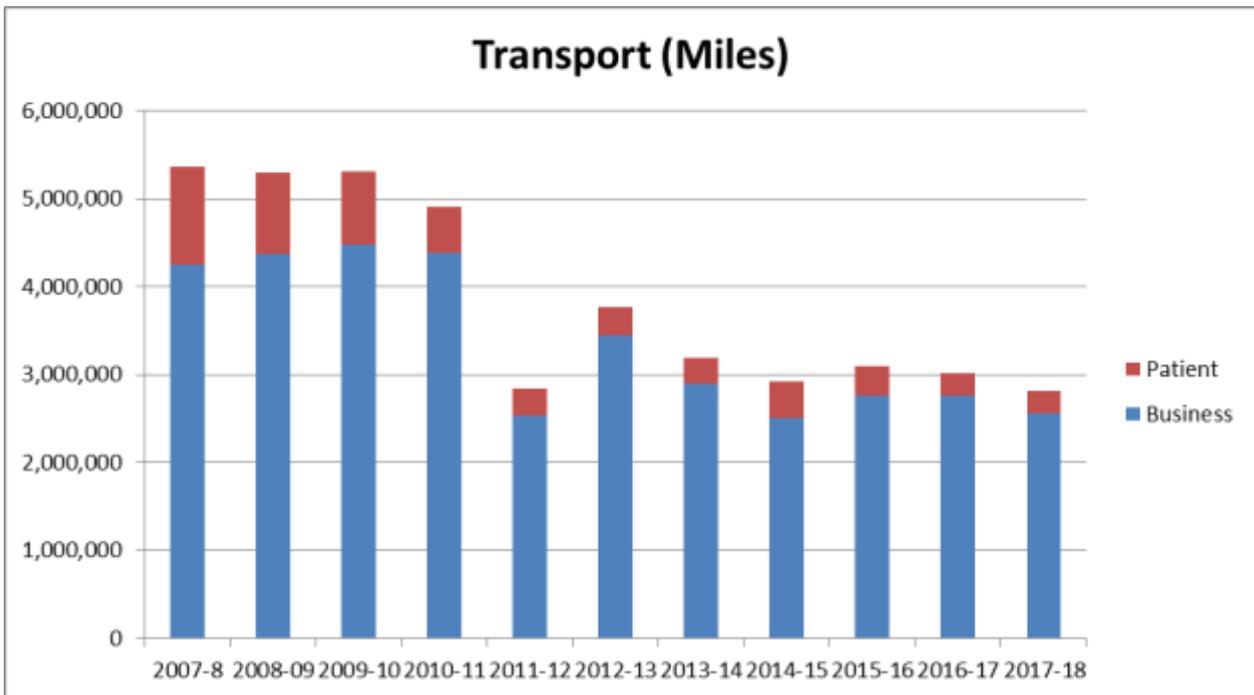


Graph 4 & 5 Waste and Recycling Rates 2007/08 – 2017/18

9.5 Transport

Since the start of the first 5 year carbon reduction plan the quality of data collection and awareness on transport has significantly increased reflected in the downward long term trend (Graph 6 below)..The increase in mobile working as part of service redesign is likely to have the effect of negating previous saving moving forward.

Note: The area of poorest data collation is in defining patient controlled travel i.e. how service users get to our services as this is currently NOT measured managed.



Graph 6 Transport Carbon calculations

9.6 AWP carbon reduction plan 2014/15 - 2020/21

The NHS target of 50% carbon reduction is ambitious, to date AWP has only achieved just over 25% therefore looking to establish future carbon reduction targets needs be achievable reflecting where the Trust has come from its Carbon journey . It is therefore appropriate to look at building up carbon reduction strategy from the current sources of production to define an overall target reflecting the limited capital available and carbon savings too date (compared to baseline date of 2007/8).

9.7 Carbon source

- Oil no longer considered due to the minimus figures for standby generators.
- Electricity seek to achieve a 4% reduction via the introduction of modern server “blade technologies” expansion of Led lighting and lighting control program plus introduction of a more effective environmental management system.
- Gas Plan an 4% reduction via the introduction of more effective hot water management control and ongoing boiler replacements with more efficient equipment.
- Renewable energy, reduce energy demand by 1%,via photovoltaic panels on more Trust estate.
- Waste - reduce carbon by further increasing off site recycling by 2%.
- Transport - no change reflecting increase in travel required for community based services.
- Procurement - overall reduction of 1% based on more effective combined purchasing power and demands across NHS purchasing clubs.

Version History				
Version	Date	Revision description	Editor	Status
1.0	06 July 2010	Ratified by Quality and Healthcare Governance Committee	JW	Approved
2.00	02 May 2017	Administrative review Approved by Director of Operations	Estates Manager	Approved
3.0	30 August 2018	Administrative review Approved by Director of Operations	Estates Manager	Approved
3.1	6 September 2019	Extended until 31 March 2020	COO	Approved