

***Saving Carbon,
Improving Health***



**SUSTAINABLE DEVELOPMENT
MANAGEMENT PLAN**

June 2013

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GLOSSARY

BREEAM	Building Research Establishment Environmental Assessment Method
CCG	Clinical Commissioning Group
CCL	Climate Change Levy
CO ₂	Carbon Dioxide
CO ₂ e	Carbon Dioxide Equivalent
CRC	Carbon Reduction Commitment Energy Efficiency Scheme
CRS	NHS Carbon Reduction Strategy
DH	Department of Health
EnCO ₂ de	NHS energy efficiency guidance on healthcare facilities
EA	Environment Agency
EPBD	Energy Performance of Buildings Directive
ERIC	Estates Returns Information Collection
GCC	NHS Good Corporate Citizenship Assessment Model
GEH	George Eliot Hospital NHS Trust
HTM	Health Technical Memorandum
KPI	Key Performance Indicator
KWh	Kilowatt hours
NHS	National Health Service
SDAG	Sustainable Development Action Group
SDMP	Sustainable Development Management Plan
SDU	NHS Sustainable Development Unit
VAS	Value-at-Stake

EXECUTIVE SUMMARY

This Sustainable Development Management Plan has been developed in response to the NHS Carbon Reduction Strategy (2009) which reinforced the urgent need for all NHS organisations to take action to reduce carbon emissions arising from their operations and embed sustainability within their strategies and cultures.

George Eliot Hospital NHS Trust consumes significant quantities of energy, fuel and water, produces large volumes of waste and spends £millions on procuring materials and equipment to deliver a broad range of high quality healthcare services. These contributed to an overall carbon footprint of 8,216 Tonnes CO₂e in 2011/2012.

The Trust recognises the importance of taking action to reduce its carbon footprint and other environmental impacts, as well as the link between sustainability and public health, the potential for financial savings and the role of the NHS to lead by example. Pursuing sustainable development as a corporate goal will also directly support the Trust's *Securing a Sustainable Future* project and business plan.

The Trust is committed to demonstrating leadership in sustainability and this comprehensive plan represents a route map for it to deliver significant improvements by 2015, with the help of its staff, key partners and other stakeholders.

The plan establishes a number of key targets for the Trust, including a 10% reduction in CO₂ emissions by 2015 and zero waste to landfill, and highlights areas of focus including: responsibility and accountability; energy and carbon management; procurement and food; travel and transport; water and waste management; key partnerships; finance, and; organisational and workforce development. It also considers the design and operation of buildings and the need to adapt to a changing climate. Key actions include:

- The establishment of a **Sustainable Development Action Group** with a clear mandate and the appointment of a Sustainability Manager so that the Trust is able to effectively deliver and report on progress;
- A comprehensive **Communications Strategy** so that Trust staff, patients, visitors and suppliers are fully engaged with and able to contribute to the Trust's plans, including the use of an effective network of staff Champions.
- Enhanced **Management of Data** relating to all sources of transport emissions, underlying emissions from procurement and coordination of waste data. This will support regular reporting of progress, both internally and externally;
- A fully-costed **Spend-to-Save Programme**, setting out a range of carbon and cost saving initiatives. The plan demonstrates that the difference between taking action to reduce emissions and a business-as-usual approach is worth around £715,000 to the Trust between 2012 and 2015.

Essential to the success of this Plan will be the engagement with and support of Trust staff, patients, visitors, suppliers and contractors, and the wider public and Local Strategic Partnership.

Through a clear management structure the Trust will ensure that sufficient focus is placed on this important initiative, as the link between sustainability and high quality public health care is clear.

1. THE NEED FOR SUSTAINABLE, LOW CARBON HEALTHCARE

1.1 Introduction

The global consensus on the need for prompt and coordinated action to address the worst effects of Climate Change and the sustainable management of finite resources has prompted action by organisations, individuals and Governments. The publication of the NHS Carbon Reduction Strategy (CRS) for England in January 2009 set a mandatory framework for NHS organisations to embed sustainability into their culture and operations, contributing to national carbon emission reduction targets.

The CRS was driven by the UK Climate Change Act 2008 which set out, for the first time, statutory emission cuts. Challenging targets, such as an 80% reduction by 2050, have been set and the NHS, as one of the World's largest organisations accounting for over 3% of the UK's total emissions, has an important role to play in meeting these targets.

In addition to the CRS, the NHS Sustainable Development Unit's document 'Fit for the Future' reiterates that the NHS is "*in a prime position to take a leadership role in showing that low carbon lifestyles can have a positive impact on our health*".

The CRS sets an initial target for NHS organisations to reduce emissions by 10% by 2015, in the context of the overall NHS carbon footprint arising from buildings (20%), transport (18%) and procurement (60%).

1.2 Why is sustainable development important for the NHS?

Sustainable development is fundamentally about managing resources in order to meet current needs, in a way that does not compromise the ability of future generations to meet their own needs. There are many reasons why the NHS should embrace sustainable development:

Reducing carbon dioxide emissions is the law in the UK

The Climate Change Act 2008 sets legally binding targets for the UK to reduce its CO₂ emissions by 80% by 2050. All public sector organisations in the UK have a responsibility to put in place plans to meet this target. In addition, the Government's Carbon Reduction Commitment Energy Efficiency Scheme (CRC) has introduced public reporting of CO₂ emissions and a requirement to purchase carbon allowances to cover annual emissions for large organisations, including many NHS Trusts. The Department of Health and NHS Sustainable Development Unit have recently introduced mandatory annual reporting on sustainability metrics for all Trusts.

The NHS is a large consumer of energy and producer of waste and CO₂e

The NHS is one of the largest employers in the world and is the largest public sector contributor to Climate Change in Europe. Each year it emits 21 million tonnes of carbon dioxide equivalent (CO₂e¹), representing 3.2% of the UK's total emissions. As

¹ CO₂e refers to six greenhouse gases: Carbon dioxide; Hydrofluorocarbons; Methane; Nitrous oxide; Perfluorocarbons and Sulphur hexafluoride. The NHS measures its carbon footprint in CO₂e which is in line with national and international

a consequence the NHS has the potential to make a huge contribution to sustainability in the UK. Reducing emissions across the NHS will aid the UK in meeting its legally binding targets under the Climate Change Act.

There is a strong business case for taking action to become more sustainable

The business of running an NHS organisation results in a host of environmental impacts that are becoming increasingly expensive to manage: fossil fuels are finite and are becoming more costly to produce, landfill is subject to a tax escalator and now CO₂ itself is subject to taxation in the UK. By reducing energy and water consumption, reducing waste and recycling more and finding alternatives to motorised travel NHS organisations can realise significant financial savings, which can be reinvested into frontline care.

There is also a wider financial incentive to address Climate Change. The Stern Review (2006) concluded that the benefits of strong, early and coordinated action against Climate Change far outweigh the economic costs of doing nothing.

The NHS must help to mitigate the negative impact of climate change on health

According to the Lancet Climate Change is the "*biggest global health threat of the 21st Century*". Climate Change is already impacting on lives and human health through extreme periods of heat and cold, storms and deteriorating air quality. The World Health Organisation has estimated that 150,000 deaths are caused annually as a result of Climate Change. In the August heat wave of 2003, at least 35,000 people died across Europe. Unless swift and decisive action is taken now, millions of people around the world will suffer hunger, water shortages and coastal flooding as the climate changes. As one of the world's largest organisations the NHS has a national and international duty to act and to set an important example to the business community and to the public.

The NHS must set an example as a leading public sector organisation

The NHS has a duty to become a public sector exemplar in sustainable development and carbon reduction. To do this the NHS needs to operate both economically and ethically. It needs to be conscious of delivering safe and cost effective healthcare while recognising the negative impact that it has on the environment. As an employer, service provider and procurer of goods and services, the NHS can use its position and buying power to influence the public, partners and suppliers to adopt similar attitudes towards sustainability.

Taking action to become more sustainable can also deliver important reputational benefits. In the first independent survey of its kind 92% of the public questioned said it is important that the NHS works in a more sustainable way with 19% feeling sustainability should be a top priority (Ipsos MORI, 2012).

1.3 The "Virtuous Circle"

conventions. Using CO₂e allows all six greenhouse gases to be measured on a like-for-like basis. This is important as some of the gases have a greater warming effect than CO₂.

How the NHS behaves can make a big difference to people's health and to the wellbeing of society, the economy and the environment. The CRS calls on NHS organisations to use their corporate powers and resources in ways that benefit rather than damage the social, economic, and physical environment in which we all live. Becoming more sustainable can save money, benefit population health and can help reduce health inequalities. Many measures that improve health also contribute to sustainable development and vice versa. This is best illustrated as a virtuous circle:

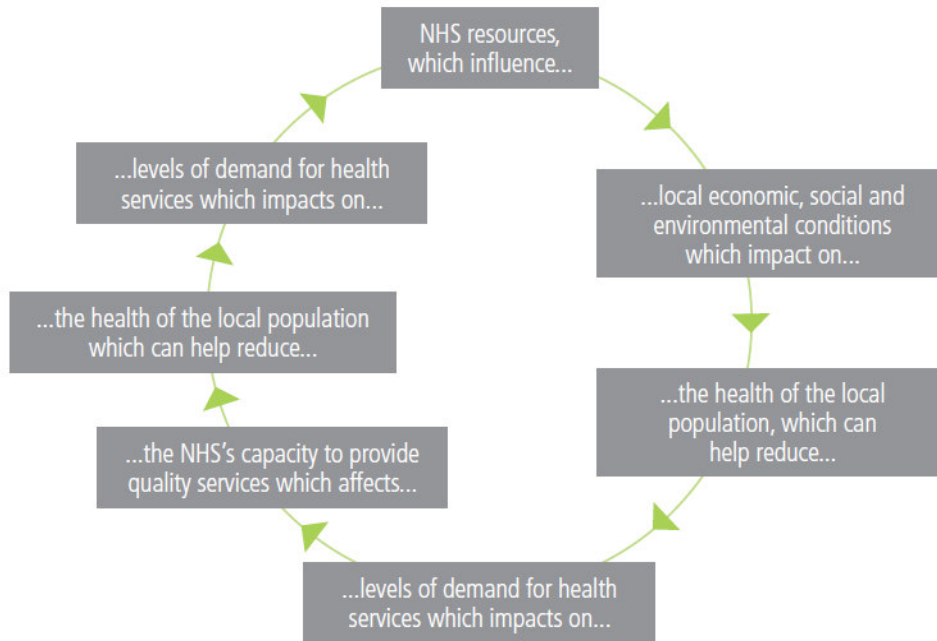


Figure 1: The virtuous circle of sustainability in the NHS (Source: NHS Carbon Reduction Strategy, 2009)

1.4 Immediate actions for NHS Trusts

To deliver its objectives, the CRS introduces four key priority actions for individual NHS Trusts:

1. Establish a Board-approved Sustainable Development Management Plan (SDMP);
2. Sign up to the NHS Good Corporate Citizenship Assessment Model;
3. Monitor, review and report on carbon emissions;
4. Actively raise carbon awareness at every level of the organisation.

Ultimately the CRS seeks to ensure that NHS organisations establish a fully integrated strategy that addresses all of the Trust's sources of carbon emissions, raises carbon literacy and numeracy and embeds the wider principles of sustainability throughout the organisation.

This SDMP sets out the George Eliot Hospital NHS Trust's commitment to the meeting the objectives of the CRS and presents the key actions the Trust will undertake based on requirements and the opportunities available.

2. SUSTAINABILITY AT GEORGE ELIOT: WHERE ARE WE NOW?

2.1 Sustainability in context

George Eliot Hospital NHS Trust (GEH) provides a range of hospital and community based care across Warwickshire and South West Leicestershire. The Trust's primary site, George Eliot Hospital, is a 352 bed district general hospital providing a full range of general hospital services for inpatients, outpatients and day cases. The Trust employs 2,000 staff and delivers services to around 290,000 people annually.

In order to deliver healthcare services the Trust is a significant user of energy and water and producer of waste. It also undertakes transport of Trust staff and patients and purchases a large range of medical and other equipment and services. As outlined in Section 1, the Trust has both a legal and moral obligation to manage the environmental consequences of its activities: doing so will deliver a range of benefits, not least financial savings for the Trust.

Through its "Securing a Sustainable Future" project the Trust is seeking a strategic partner to secure a sustainable future for its services and the care it provides to local people. The Trust's Board believes that this offers the best solution to achieving clinical and financial sustainability, rather than pursuing Foundation Trust status as a standalone organisation.

This SDMP and the objectives and actions contained within it directly support the Trust's ambition to achieve long-term sustainability as a healthcare provider. The SDMP also supports the Trust's strategic objectives including the development of partnership arrangements, the empowerment of staff and maintaining financial stability.

2.2 Responsibility for management

Carbon reduction and sustainable development are corporate responsibilities and should be an inherent part of each organisation's performance and governance mechanisms. The Operations Directorate takes overall responsibility for the development of the Trust's sustainability strategy, under the Executive leadership of Julie Whittaker. Julie chairs the Trust's Sustainable Development Action Group and assumes day-to-day responsibility for delivery of the programme. This includes interaction with clinical leads, who have a vital role in the delivery of sustainable healthcare.

The Trust has formed a multifunctional Sustainable Development Action Group (SDAG) which draws together representatives from across the Trust with the aim of ensuring a continual focus on opportunities for improvement in sustainable development and carbon reduction. It will also review and report on progress against the requirements of the Trust's SDMP. Terms of Reference for this Group are included in Appendix B.

The SDMP action plan recommends appointment of a Sustainability Manager to drive forward implementation of the SDMP. The Sustainability Manager will coordinate efforts to integrate sustainability through major projects and day-to-day operations.

This will require liaison with relevant staff representatives, such as those responsible for energy, waste, water, transport and procurement, along with engagement with staff, patients, visitors, the local community and key stakeholders. It is proposed that the post will be financed through revenue savings made through implementation of the SDMP.

The action plan also recommends the establishment of a Sustainability Champions network, made up of staff representatives, which will be overseen by the Sustainability Manager. The Trust will need to ensure that this network is able to effectively contribute to sustainability and carbon management solutions.

In summary, the Trust has established the following sustainable development structure:

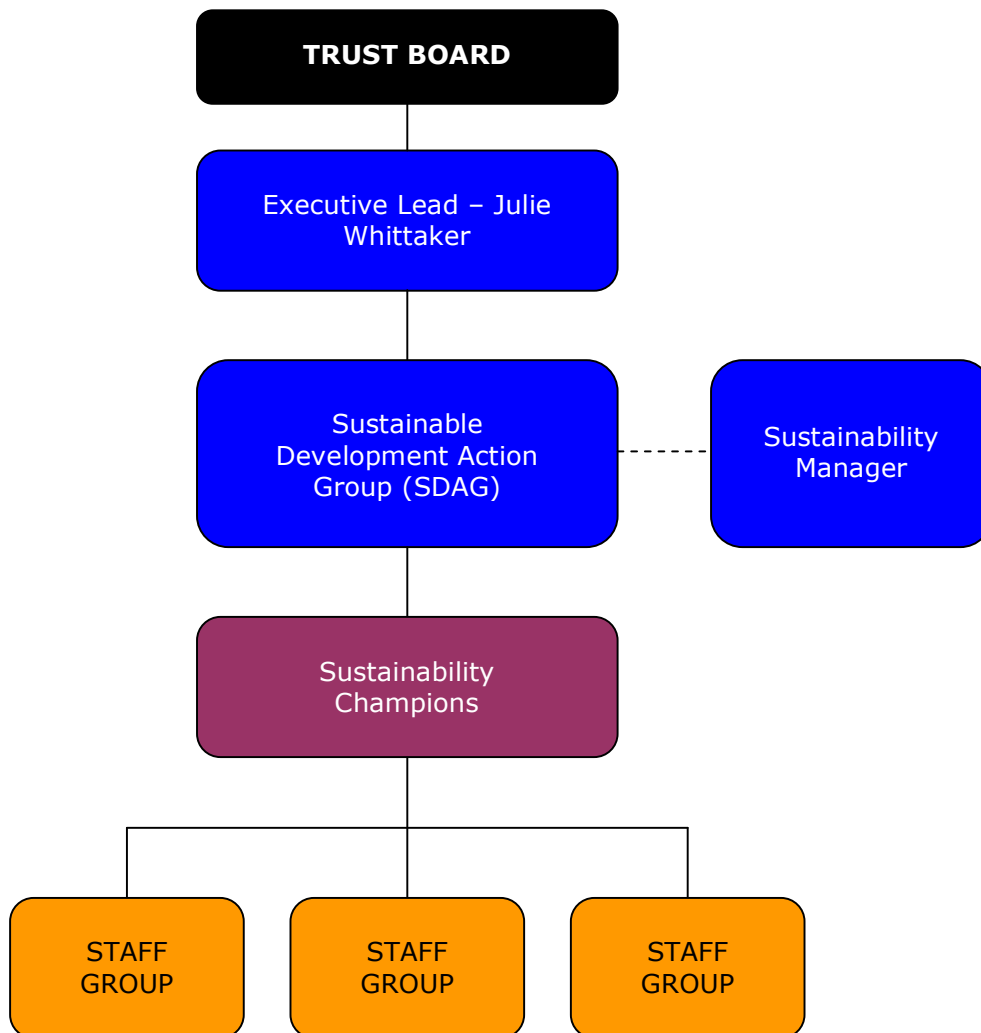


Figure 2: The Trust's Sustainable Development structure

2.3 George Eliot carbon footprint baseline

Sources of carbon emissions from Trust operations include energy (electricity and fossil fuel use, i.e. gas), waste, water, transport and the procurement of goods and services. When considering the NHS carbon reduction target, the potential for reduced emissions from each of these needs to be considered and quantified. However, accurate emissions arising from procurement activities are not generally available so the SDMP action plan for Procurement commits the Trust to working with key suppliers to measure and manage down procurement related emissions.

Emissions from transport arise from a range of sources, including the use of private cars and public transport for Trust business, hire cars, lease cars, taxis, patient travel and non-patient travel. At present emissions arising from transport have been restricted to those areas where data are readily available, or assumptions may be made with confidence. Further work is necessary to clarify the footprint for example arising from staff commuting and patient/visitor travel. Data related to taxi usage also needs to be improved and this is reflected in the action plan.

Emissions from waste management have not been included in the baseline assessment. This is partly due to the complexity of measuring emissions from waste management activities and partly down to a lack of reliable data relating to waste volumes generated by the Trust. The action plan includes a commitment to improve waste data and introduce reporting metrics so that waste impacts can be measured and managed.

Based on 2011/2012 data the overall carbon footprint baseline for the Trust amounts to 8,216 tonnes CO₂e. This is broken down as follows:

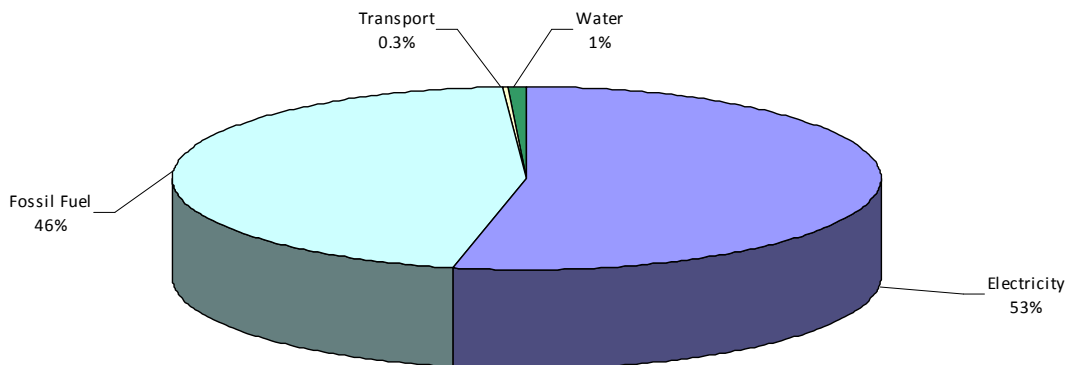


Figure 3: GEH's 2011/2012 carbon footprint baseline

Emission Source	CO ₂ e (tonnes)	Commentary
Electricity	4,386	From powering the Trust's buildings, e.g. lighting, medical devices, IT equipment and air conditioning, etc.
Gas	3,738	From heating Trust buildings, as well as generating steam for other purposes, including sterilisation.
Transport	23	From use of pool cars and the Trust's commercial vehicle. Does not include taxi use, staff commuting or patient/visitor travel.
Water	68	From the use of water across the Trust. Distributing and processing water and waste water generates CO ₂ emissions.
TOTAL	8,216	Total carbon footprint for George Eliot Hospital NHS Trust

How does George Eliot Hospital NHS Trust compare?

No two NHS Trusts are the same, which means that comparing carbon footprints between Trusts, even those in the same sector (e.g. acute in the case of GEH), is not straightforward. However, the Department of Health (DH) has published national CO₂ benchmarks² that serve to provide an insight into the *relative* energy performance of NHS estate. The benchmark relates CO₂ emissions from electricity and gas (combined in a single metric) with floor area.

Taking the emissions listed above it is possible to calculate a benchmark measure for GEH. For the chosen baseyear the benchmark performance for GEH is:

171 kgCO₂/m²

The estate performs relatively poorly when compared with the DH benchmarks:

	Good Practice	Typical (median)
General Acute Hospitals	<135	138.8

This provides a useful indication that there is good scope for improvement in energy efficiency within GEH through improved carbon management.

2.4 George Eliot Good Corporate Citizenship scores

The NHS Good Corporate Citizenship Assessment Model (GCC) is a qualitative self-assessment toolkit designed to help NHS organisations think how they can contribute to sustainable development. It is a requirement of the CRS that all NHS sign up to this framework, which can be used to consider a broader range of sustainability issues than those contributing to the Trust's CO₂ emissions.

The model assesses performance across 8 areas: Travel, Procurement, Facilities Management, Workforce, Community Engagement, Buildings, Adaptation (to Climate Change) & Models of Care. Members of the SDAG have conducted an initial scoring exercise and this has generated a GCC baseline and provided the basis for the action plan contained in this SDMP. The Trust's baseline GCC scores are presented in Figure 4 below.

² HTM 07-02 EnCO₂de – making energy work in healthcare (see p112)

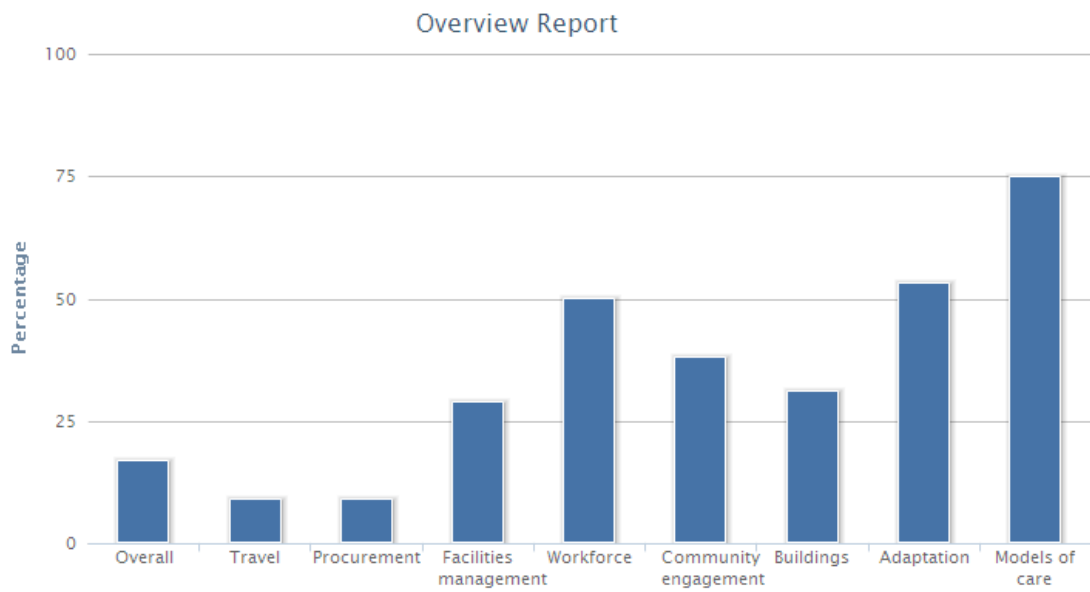


Figure 4: GEH's Good Corporate Citizenship baseline

3. WHERE DOES THE TRUST NEED TO GET TO?

3.1 Overall objectives of the SDMP

The CRS introduces four key priority actions for individual NHS Trusts:

1. Establish a Board-approved SDMP;
2. Sign up to the NHS Good Corporate Citizenship Assessment Model;
3. Monitor, review and report on carbon emissions;
4. Actively raise carbon awareness at every level of the organisation.

The fundamental purpose of this SDMP is to fulfill these requirements. In doing so, the SDMP aims to promote "triple bottom line" healthcare within GEH – aligning clinical needs with financial and environment performance, and placing sustainability considerations at the heart of Trust decision-making and operations. This should support the Trust's strategic objectives and forward business planning.

3.2 SDMP targets & timeframes

The SDMP must set clear and measureable targets for the Trust to improve its environmental performance in order to demonstrate commitment to sustainability. The CRS requires Trusts to establish interim targets and trajectories to meet the provisions of the Climate Change Act – i.e. to reduce carbon emissions. In the first instance, this should be set at 10%, as a minimum, of the 2007 levels by 2015.

Since accurate data for 2007 were not available, a baseline of 2011/2012 has been chosen for GEH. It is, however, proposed that 2015 is maintained as the target end date for the SDMP. This is for two reasons:

1. 2015 is the interim target date laid down by the CRS;
2. A two year plan (2013-2015) should help to focus efforts and resources at delivering tangible outcomes in dialogue with the Securing a Sustainable Future Project timeframe.

GEH will therefore aim to meet the following six key targets through its SDMP:

- 1. Reduce the Trust's absolute carbon footprint by 10% by 2015**
- 2. Reduce car journeys by 10% by 2015, including taxi journeys, grey mileage (business travel) and staff commuting**
- 3. Reduce water consumption by 10% by 2015**
- 4. Achieve zero general waste to landfill by 2015**
- 5. Reduce clinical waste volumes by 10% by 2015**
- 6. Achieve average scores of "Excellent" in the Good Corporate Citizenship Assessment for all areas**

The action plan contained in Section 5 sets out how these targets will be met. Alongside the action plan is a list of costed CO₂ reduction projects, presented in Appendix A as a two year *Spend-to-Save* programme for GEH.

3.3 Value at Stake: The case for action

Achieving a 10% carbon emissions reduction will deliver both recurrent carbon and cost savings for the Trust. The following charts seek to summarise these benefits by illustrating the “Value at Stake” (VAS) for GEH. The VAS analysis is the preliminary indicator for the business case for action and includes both negative and positive impacts. The VAS analysis covers the financial impacts of:

- Utilities price inflation
- Energy Performance of Buildings Directive (EPBD)
- CRC allowance purchase pricing (currently at £12 per tonne CO₂)
- Climate Change Levy (CCL)

The calculation of VAS is defined as the difference between doing nothing (a business-as-usual approach) and taking an active approach to sustainability and carbon management as part of a systematic CO₂ emissions reduction programme.

Energy & CO₂ assumptions for business-as-usual:

- Electricity and gas prices increasing at 5% per year under current contract arrangements
- CRC allowance purchase price fixed at £12 per tonne – in reality the price is likely to increase beyond this in future years
- Rate of natural CO₂ emissions growth set at 3.5%

Value at Stake Projections:

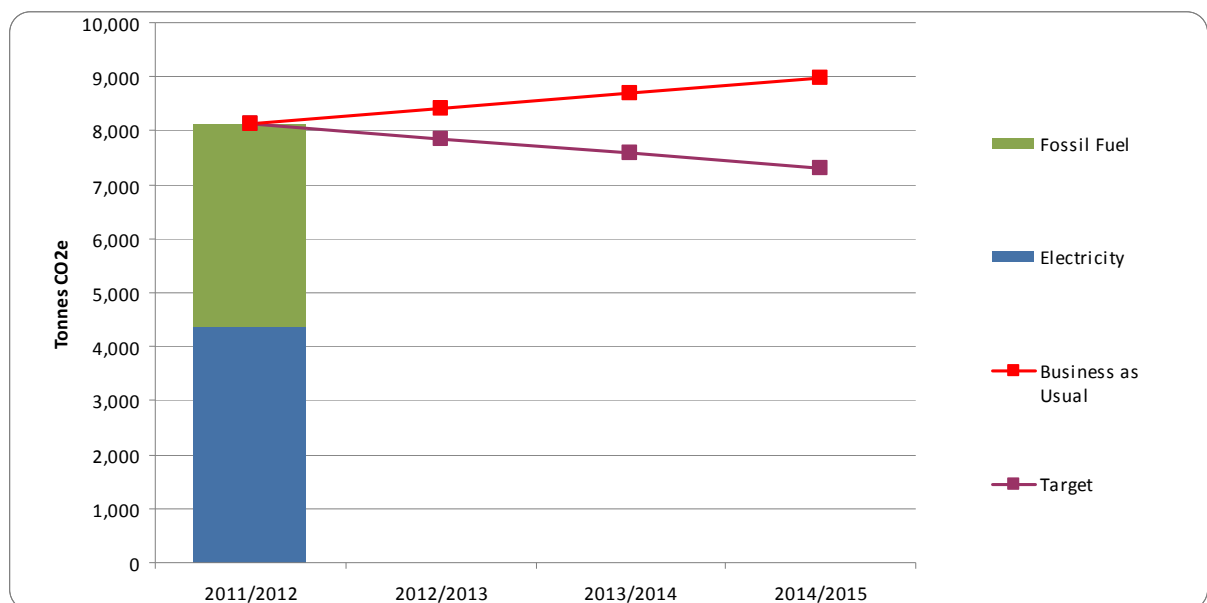


Figure 5: GEH carbon emissions Value at Stake

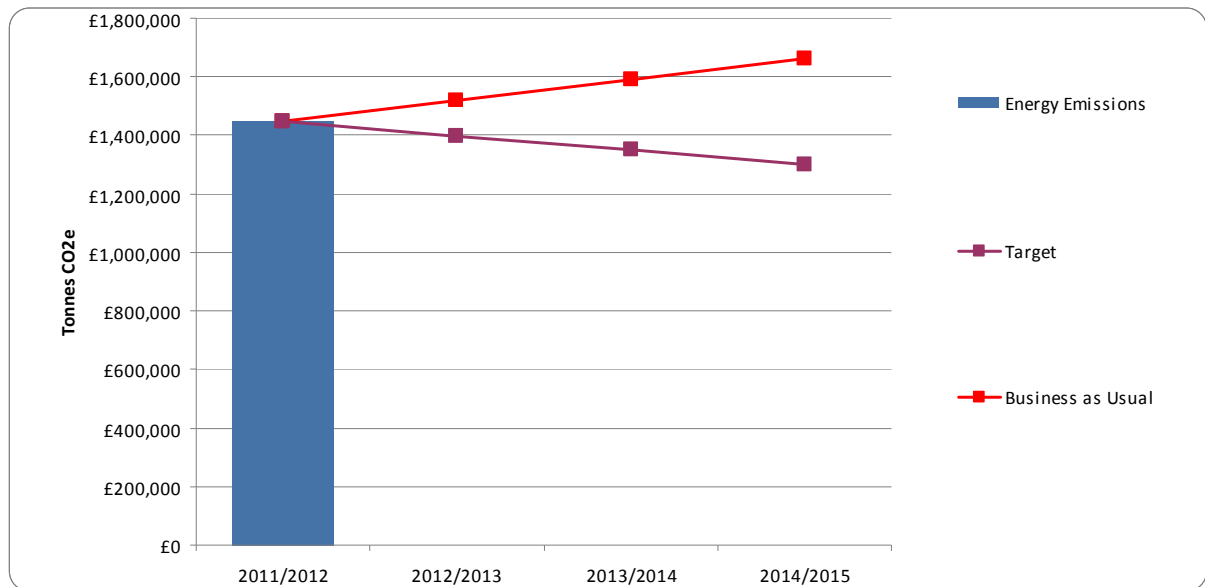


Figure 6: GEH financial Value at Stake

Business as usual scenario: the results presented above show the projected emissions and the projected costs of a business as usual scenario at GEH.

Reduced CO₂ emissions scenario: the reduced emissions scenario calculated in order to quantify the VAS assumes a 10% reduction in electricity and gas consumption by 2015, in line with the SDMP target.

Value at Stake: The Value-at-Stake is the gross difference between the business as usual and reduced emissions scenarios: that is, the potential value to be obtained through adopting a carbon management approach through the SDMP. The Value at Stake for the SDMP implementation period (2012-2015) is **£715,000**, representing a total carbon saving during the period of approximately **3,330 tonnes CO₂e**.

4. MONITORING PROGRESS OF THE SDMP

The following section contains an action plan setting out how the targets above will be achieved in the timeframe, along with roles and responsibilities for individual staff. It also contains a small number of additional qualitative objectives. The action plan is structured in accordance with the CRS and lists actions under the following headings:

1. Energy & Carbon Management
2. Procurement & Food
3. Low carbon travel, transport & access
4. Water
5. Waste
6. Designing for the Built Environment
7. Organisational & Workforce Development
8. Role of Partnerships & Networks
9. Governance
10. Finance
11. Climate Change Adaptation

The Trust will regularly monitor the delivery of the actions in the SDMP and its progress against the Good Corporate Citizenship Assessment Model. The SDAG will meet regularly to review progress against the action plan and identify opportunities for further improvement wherever possible.

It is proposed that the SDAG will report on progress to the Trust Board every six months. In addition, progress will be reported regularly to the Clinical Commissioning Group and NHS Sustainable Development Unit as appropriate. To facilitate Board reporting a simple Key Performance Indicator (KPI) dashboard will be developed to enable quick and easy interpretation of performance and progress towards SDMP targets. Similar information will be supplied to staff and to the public where appropriate.

5. SDMP ACTION PLAN

5.1 Energy and Carbon Management

The Trust recognises the impact its consumption of energy has on the environment, particularly through associated CO ₂ emissions, and understands that significant savings can be made, both environmentally and financially, if it successfully reduces energy demand across of its estate.	
Trust Leads	Kevin McGee – Chief Executive & David Taylor – Head of Estates
Overall Objective	To reduce energy consumption and CO ₂ emissions from the Trust's estate
SDMP Target	To reduce absolute CO ₂ emissions by 10% by 2015, against the 2010/2011 baseline. This would deliver annual CO ₂ savings of 821 tonnes.

Overview of activity to date:

- On-going monthly year on year monitoring of utilities to identify areas for savings and to ensure previous energy and water saving initiatives are realised.
- The Trust participates in the Government's Carbon Reduction Committee Energy Efficiency Scheme (CRC) scheme as it consumes more than 6,000MWh electricity through its half hourly meters. The scheme is mandatory and requires the Trust to purchase carbon "allowances" at a rate of £12 per tonne CO₂ emitted.
- The Trust's Estates team has invested in a number of energy saving measures throughout 2012, including LED lighting in circulation areas and variable speed controllers on HVAC motors. Such initiatives have started to reduce energy consumption at the hospital.

ACTION PLAN:

- Implement GEH Spend-to-Save programme. In order to meet its 10% CO₂ reduction target the Trust will need to invest capital and revenue resources in a range of CO₂ abatement schemes. Appendix A summarises the schemes that have been identified and shortlisted – these are primarily focused on achieving energy savings, although significant savings have also been identified in other areas, particularly waste management (see 5 below). Each of the schemes listed has been selected on the basis of both the environmental savings achievable and the potential to make a return on investment.

Table A1 provides an overview of all projects that have been put forward for implementation within the 2013/2014 financial year. Combined these have the potential to deliver a CO₂ reduction of 8.9% with estimated annual cost savings of £213K at a total cost of £240K. Table A2 contains a further list of projects where further feasibility work is required. It is proposed that business cases for these projects will be developed during 2013. The combined saving

from all projects listed in Appendix A will exceed the Trust's 2015 SDMP objective to reduce its absolute carbon footprint by 10%.

- The Trust submitted a bid under the Department of Health's 2013 Carbon & Energy Efficiency Fund to replace the its existing steam boilers with a new Combined Heat & Power and localised steam generation system. Unfortunately this application was unsuccessful, however, the Trust is committed to proactively pursuing any future capital funding opportunities where these will support the introduction of carbon and cost saving technologies, in line with the objectives of this SDMP.
- Appointment of Sustainability Manager (Band 7) to manage implementation of the SDMP. The Sustainability Manager would be responsible for all aspects of energy and waste management, management of the Trust's Sustainable Development Action Group, preparing Board reports (e.g. SDMP updates), managing CRC participation, developing and delivering staff engagement programmes, preparing mandatory reports (e.g. NHS Sustainability Annual Return) and identification of further CO₂ reduction opportunities. It is proposed that the post be funded out of cost savings made from delivery of the SDMP and would therefore be a cost-neutral appointment for the Trust.
- The Communications Team will run an energy awareness campaign for all staff by March 2014 to promote awareness of the SDMP. The campaign will encourage positive action such as recycling, the Cycle to Work Scheme, reducing paper usage etc. The team will also encourage staff to present their own ideas for reducing energy and carbon consumption.
- Estates will take action to improve accuracy and timeliness of monitoring and targeting for carbon and energy usage. This will be done through improving submetering provision and via the Building Energy Management System (BEMS).
- The Trust will join the West Midlands Energy Manager's Forum to share best practice on energy and carbon management.
- Estates will regularly and actively benchmark itself against other Trusts to test the effectiveness of its plans and projects.
- The Sustainable Development Action Group (SDAG) will aim to improve the baseline Facilities Management GCC average score of 29% with the objective to achieve an average score of 50% by March 2014 and 80% by March 2015.

5.2 Procurement & Food

Procurement is the largest single contributor to carbon emissions within the NHS with ca. 60% attributable to procurement. The Trust is committed to reducing the environmental impacts associated with its own commissioning, sourcing and buying processes.	
Trust Leads	Chris Bradshaw – Director of Finance & Julie Whittaker – Director of Community Services
Overall Objective	To influence suppliers to reduce their carbon emissions in order to de-carbonise the Trust’s supply chain.
SDMP Target	To ensure that goods and services are procured more sustainably in line with national best practice guidelines.

Overview of activity to date:

- The Trust procures a large number of its goods and services through national and regional framework contracts, which has helped to ensure that high levels of environmental performance are incorporated into major purchasing decisions.
- The Trust has taken positive steps to reduce the transport impacts associated with certain supply chain activities, e.g. disposable curtains.
- The Purchasing team is working with the IT team on an initiative to reduce the number of print devices in operation within the Trust. This would deliver a range of financial and environmental benefits.

ACTION PLAN:

- Procurement will review and if appropriate adopt the PC4R toolkit (<http://www.sdu.nhs.uk/corporate-requirements/interventions/procurement.aspx>) and utilise it to develop a Sustainable Procurement Policy to ensure that environmental considerations are promoted at every opportunity throughout the procurement process. Wherever possible, the Policy will stipulate minimum environmental standards in line with the Trust’s SDMP. Key issues for the policy will be the reduction of waste across the Trust, ethical procurement standards and de-carbonisation of the Trust’s supply chain.
- Procurement will actively engage with key suppliers regarding measurement and reduction of environmental impacts from key procurement pathways.. Procurement will encourage and eventually require all key suppliers to develop their own SDMP or equivalent from 2015/2016.
- Procurement will use Framework contracts (suppliers) where ever possible and include specific sustainability clauses in appropriate contracts by March 2015.
- Procurement will incorporate whole life costing and carbon reduction in competitive supplier analysis by March 2015.

- Catering, laundry and facilities contracts to specify low water use where possible.
- Where possible, the procurement team will introduce contract specifications that minimise waste (including produce packaging, deliveries and end-of-life disposal).
- Procurement will identify the key skills required for sustainable procurement and will investigate training options for staff, with the potential to make this a CPD opportunity. For example the National Sustainable Public Procurement Programme (NSPPP) seeks to make it clear that sustainable procurement is simply good procurement practice which can generate significant benefits, including: increased efficiency; reduction in carbon; cost savings. The programme explains public procurement and demonstrates how to apply sustainable procurement good practice throughout the purchasing cycle (<http://sd.defra.gov.uk/advice/public/nsppp/>).
- Assess delivery mileages of current key suppliers. Seek to consolidate and rationalise drops and deliveries to reduce frequencies if practicable. Source and utilise local suppliers where possible, particularly for food products, whilst considering costs and volume..
- Facilities to review menus and introduce healthy choice product lines in retail areas to assist in staff and visitor to support health and wellbeing.
- Polystyrene cannot be recycled and is therefore the use should be minimised by the Trust. E.g. replace with recyclable ribbed cups for all take away beverages.
- Facilities to review the use of recyclable take away hot food containers.
- Seek to introduce products that are from sustainable supply routes such as Fair Trade, Red Tractor etc.
- Estates to work in reducing waste and increasing recycling. Investigate options for reducing food waste and diverting this to landfill, i.e. via composting.
- IT and Procurement to continue to develop Multi-Functional Devices (MFDs) initiative to reduce the number of non-networked printers in play around the Trust. IT to investigate potential to implement a Print Devices Policy to guide future investment in and development of the Trust's print devices estate. This should also incorporate issues such as paperless working and printer settings (restricting colour printing, printing double-sided etc).
- The SDAG will aim to improve the baseline Procurement GCC average score of 9% with the objective to achieve an average score of 50% by March 2015 and 80% by March 2016.

5.3 Low Carbon Travel, Transport & Access

Around a fifth of the NHS's carbon footprint is attributable to travel and transport, with an estimated 1 in 20 vehicles on the road related to the health service. The Trust is committed to playing its part in driving down carbon emissions associated with transport and promoting active travel.	
Trust Leads	Dorothy Hogg – HR Director & Doreen Sadler – Stakeholder Engagement Manager
Overall Objective	Wherever possible eliminate the need to travel and, when travel is necessary, to encourage low carbon options.
SDMP Target	To reduce car journeys by 10% by 2015, including taxi journeys, grey mileage (business travel) and staff commuting. Baseline to be established during 2013.

Overview of activity to date:

- Following a survey of patients, members and visitors on travel arrangements from across the county early in 2012 the Trust has established regular meetings with the county's bus companies who provide local public transport and are working to improve the bus links to and from the hospital and travel arrangements for the communities the hospital serves. Discussion have also taken place with community 'volunteer' transport providers to support the service they provide when escorting patients to and from the hospital when attending for appointments
- The above work had been undertaken at the request of the Trust Board with the findings of the survey, setting of an action plan and a final report including an implementation plan taken forward by a Travel (task and finish) Group. It would be beneficial to support and complement the work of the Sustainability Action Group that a Travel, Transport & Access Focus Group (with the appropriate membership) be established to take forward actions from within this section.
- The Trust operates a Cycle to Work scheme to encourage uptake in cycling amongst staff.

ACTION PLAN:

- The Communications team will carry out a Travel to Work survey to establish how far staff travel, how long their journeys take, their methods of travel and if there are any stops on route. This information will allow the Trust to observe trends in future which may not be picked up through other schemes such as the Cycle to Work Scheme.
- The Trust will develop a GEH Travel Plan covering staff commuting, business travel, patient and visitor travel, patient transport and active travel. The Plan set out how a 10% car journey reduction can be achieved by 2015, by focusing on reducing solo car occupancy and promoting low-carbon alternatives in line with a GEH "Travel Mode Hierarchy", with solo car occupancy at the bottom and travel avoidance at the top. Warwickshire

County Council will be approached to offer support to the development of the Travel Plan.

- Finance to improve baseline information on staff grey mileage (business travel) and taxi usage. Data to be used to improve carbon footprint baseline and identify carbon and cost saving opportunities.
- The Trust will adopt a policy of supporting remote home working where appropriate and support staff who wish to work from home. The Communications and IT teams will improve the methods of communication and accessibility for home working staff and their managers and teams. Estates will plan the capability to increase the number of home workers in line with future business requirements.
- The Communications and IT teams will investigate and make available alternatives to face-to-face meetings, including tele- and video-conferencing, where appropriate, i.e. for Community Services.
- The Communications team will launch an awareness campaign to all staff during 2013 regarding ways of reducing their carbon footprint and alternatives to carbon intensive travel.
- The Communications team will further promote the Cycle to Work scheme to increase membership.
- In response to the results of the Travel Survey the Stakeholder Engagement team worked with the communications team to update the travel information available to patients/visitors via the Trust's website to ensure that sustainable travel options, e.g. public transport, is prioritised and clearly communicated and links directly to the county council's public transport providers 'online' timetables, routes and journey planner. Such improvements will be reviewed periodically to ensure optimum use for those accessing this information. The team will consider opportunities for gaining feedback from patients and visitors regarding travel to and from the Trust's main hospital site. Improve availability of walking and cycling routes.
- Linked to above and part of the Travel Action Group implementation plan, investment into LED screens was agreed by the Trust Board at the end of 2013. This project is now underway and initially the screens (one to be sited at the main entrance) will display bus information/timetables for buses arriving and leaving the hospital site. It is anticipated that when the County Council invest in the technology to support RTI (real time information) the hospital system will link up and provide RTI simultaneously.
- Estates will conduct a site accessibility review to ensure that sustainable travel modes are properly supported and identify opportunities for enhancements – e.g. introducing cycle lanes and storage, changing and showering facilities for staff, safe pedestrian access, bus services etc.
- The Trust will sign up to a car share scheme, such as NHS Car Share (<https://nhscarshare.liftshare.com/default.asp>) or the County Council's local scheme (<http://www.warwickshire.gov.uk/carshare>) to reduce staff car

journeys to site. Estates will consider putting in place prominent and prioritised spaces for car sharers.

- Travel, Transport & Access Group to engage with the County Council's Sustainable Travel Team to seek support in the implementation of low-carbon travel initiatives.
- Travel, Transport & Access Group and Communications to work with local bus companies to develop new publicity materials to promote bus travel to the hospital site.
- Travel, Transport & Access Group to review eligibility criteria for staff parking permits with the aim of increasing the number of staff cycling, walking and using public transport.
- Finance to introduce feasibility of financial incentives for lower carbon travel, principally travel claim policy (mileage reimbursement rates for cars, public transport and cycling), loans for public transport season tickets, and salary sacrifice for cars.
- Travel, Transport & Access Group to engage with community nursing teams to promote and identify opportunities for better route planning.
- The SDAG will aim to improve the baseline Travel GCC average score of 9% with the objective to achieve an average score of 50% by March 2014 and 80% by March 2015.

5.4 Water

Water has been termed the “new carbon”: it is an increasingly precious but undervalued resource and a significant amount of energy and resources are consumed to produce potable water, which contributes to the Trust’s carbon footprint.	
Trust Leads	Kevin McGee – Chief Executive & David Taylor – Head of Estates
Overall Objective	Ensure the efficient use of water by measuring and monitoring its use and implementing water saving measures.
SDMP Target	To reduce water consumption by 10% by 2015, against the 2010/2011 baseline.

Overview of activity to date:

- On-going monthly year on year monitoring of utilities to identify areas for savings and to ensure previous energy and water saving initiatives are realised.
- Estates carry out leak detection surveys to minimise wastage.

ACTION PLAN:

- The Communications team will run a general awareness campaign for all staff for the consumption of water by March 2014.
- Estates will take the action to improve accuracy and timeliness of monitoring and targeting for water usage.
- Estates will ensure that leaks in Trust infrastructure will be identified and fixed immediately.
- Procurement will ensure that catering, laundry and facilities contracts to specify low water use.
- Estates will seek specialist support to identify opportunities for water saving throughout the hospital. This will include opportunities to innovate, e.g. utilising permeate from the reverse osmosis facility for localised grey water applications.
- The SDAG will aim to improve the baseline Facilities Management GCC average score of 29% with the objective to achieve an average score of 50% by March 2014 and 80% by March 2015.

5.5 Waste

The Trust recognises that its current waste management practices are unsustainable and that by adopting more sustainable practices major opportunities for environmental and economic savings can be realised.	
Trust Leads	Julie Whittaker – Director of Community Services & Sean Mitchell – Head of Security
Overall Objective	To reduce total volumes of waste produced by the Trust through improved waste segregation and waste avoidance and pursue more sustainable waste management practices, such as recycling.
SDMP Target	To achieve zero general waste to landfill by 2015; and To reduce the amount of clinical waste produced by 10% by 2015.

Overview of activity to date:

- The Trust has invested in an on-site compactor for confidential waste to improve waste handling and reduce costs.
- The Trust is working on moving away from the yellow bag (incineration only) waste stream towards orange bag (alternative treatment). This is a lower risk waste disposal option that has lower environmental and financial costs.

ACTION PLAN:

- Estates to develop a new Trust Waste Management Policy to set standards for waste management and drive changes in perceptions and behaviours towards waste.
- Estates to work with Procurement to engage existing waste management contractors or tender for new contracts to deliver on SDMP waste targets. For general waste this would require introduction of Dry Mixed Recycling (DMR) with zero waste to landfill stipulated for non-recyclable waste. The Trust's clinical waste contractor will be asked to support the target to reduce clinical (hazardous) waste volumes by 10%. These activities would need to be supported by new waste disposal apparatus (i.e. dedicated recycling bins), improved point-of-disposal signage and new waste training for frontline staff.
- The Internal Communications team will run a general awareness campaign for all staff for the consumption of waste by March 2014. This will be based on the principles of the waste management hierarchy (avoid > reduce > reuse > recycle > dispose) and developed in conjunction with changes to the Trust's Waste Management Policy and new waste contract arrangements.
- New and improved waste training programme to be developed to support frontline staff with understanding new waste management policy and procedures.

- Estates will take action to improve accuracy and timeliness of monitoring and targeting for waste reduction. New contracts will stipulate the provision of accurate weight-based data to support improved reporting.
- Estates to work with Procurement to identify opportunities to reduce waste entering the Trust. Review decommissioning process for ward and department closure to ensure wastage of stock and furniture does not occur. Procurement to review stock management procedures in order to minimise waste.
- Estates to investigate options for reducing food waste. Possibility to invest in a small in-vessel composter to process food on-site, creating a high-value compost product for use on Trust facilities or to be offered to local farms, allotments and gardens.
- The Trust will work towards creating a paperless working environment wherever possible. To facilitate this IT will ensure that all meeting rooms are equipped with technology to support this and will work with Communications to ensure that staff are aware of these opportunities. All SDAG meetings will be paperless.
- The SDAG will aim to improve the baseline Facilities Management GCC average score of 29% with the objective to achieve an average score of 50% by March 2014 and 80% by March 2015.

5.6 Designing for the Built Environment

The planning, design and construction of new buildings and the refurbishment of the existing estate portfolio presents an opportunity to contribute to a more sustainable future and will ensure that all new builds and refurbishments comply with Building Research Establishment Environmental Assessment Method (BREEAM) healthcare requirements.	
Trust Leads	Kevin McGee – Chief Executive & David Taylor – Head of Estates
Overall Objective	To ensure that environments are designed to encourage sustainability, including promoting wellness and resilience to climate change.
SDMP Target	To achieve a BREEAM rating of 'excellent' on all new build projects and 'very good' on refurbishment projects.

Overview of activity to date:

- The Trust's Estates team has invested in a number of energy saving measures in recent years, including LED lighting in circulation areas and variable speed controllers on HVAC motors. Such initiatives have resulted in a gradual decrease in energy consumption.

ACTION PLAN:

- Estates will ensure that built environments are designed to encourage sustainability, including meeting Trust and national CO₂ reduction targets, and to promote wellness and resilience to Climate Change in all aspects of their operation.
- Clear sustainability targets will be set for new building projects and these will be monitored following commissioning,
- Estates will ensure that all staff, including temporary and agency workers, are aware of the Trust's commitment to sustainability and how this is influenced by the built environment.
- Estates and Procurement will work together to ensure that all design and building contractors are aware of the Trust's sustainability objectives and targets. Contractors will be required to demonstrate a commitment to sustainability within their own operations (i.e. by holding ISO14001 certification) and will be challenged to identify innovative and cost-effective solutions to enable the Trust to go beyond its SDMP targets.
- All decisions about design and build of Trust facilities must be explicit about how they encourage a broader approach to sustainability including transport, delivery of services and community engagement.
- All major building projects will be subject a BREEAM assessment (<http://www.breeam.org/>) to ensure that sustainability considerations are incorporated into planning and design decisions from the outset. As a minimum major refurbishments will be required to achieve a BREEAM rating

of “very good” with any future new build projects achieving an “excellent” rating.

- Climate Change resilience and adaptation will be core factors in the planning and design of Trust estate.
- Estates will seek to engage both staff and external stakeholders in all major future planning activities.
- The SDAG will aim to improve the baseline Buildings GCC average score of 31% with the objective to achieve an average score of 50% by March 2014 and 80% by March 2015.

5.7 Organisational & Workforce Development

The Trust is committed to supporting its staff by promoting increased awareness of Climate Change and sustainability, conducting behaviour change programmes, encouraging home working and low carbon travel, providing health food choices and by ensuring that "sustainability" is included in every staff member's job description.	
Trust Lead	Dorothy Hogg – Director of HR
Overall Objective	To support staff by promoting increased awareness of the SDMP, supporting behavioural change and encouraging home-working.
SDMP Targets	Sustainability objectives to be included in 100% of job descriptions by 2015; To effectively and consistently communicate sustainability issues throughout the Trust to raise awareness and drive behavioural change at all levels.

Overview of activity to date:

- Wellbeing activities supported by the Workforce wellbeing group
- Range of flexible working policies adopted
- *Whistleblowing* campaign run in conjunction with staff side
- Revised sickness absence policy introduced with additional training for managers
- Managing Attendance co-ordinator appointed to support managers in their application of the sickness absence policy
- Working with skills providers and support organisations, offering opportunities for the long term unemployed
- Apprenticeship programme in place
- Health trainers and smoking cessation offer support to staff
- Child care and crèche on site, holiday clubs run during school holidays
- Healthy food initiatives e.g. "Fruity Friday" (Wellbeing Group supporting discounted fruit prices).

ACTION PLAN:

- The Communications team will develop an active communications strategy to raise awareness about sustainability at every level of the organisation. A network of Sustainability Champions will be recruited to influence staff behaviours and assist with implementation of specific initiatives. These will be managed by the Sustainability Manager. The Trust will aim to foster a culture of carbon awareness throughout the organisation. This is particularly

important as a significant amount of the energy used, travel choices and goods purchased throughout the Trust is in the direct control of individual members of staff.

- HR will ensure that all new staff will receive information and advice on the Trust's sustainability principles and policies through the induction process.
- HR will add sustainability to all frontline job descriptions and all new job descriptions will be updated as they come up for review. Senior manager job descriptions will be made more specific with regard to sustainability. Sustainability objectives to be reviewed during annual appraisals.
- All new staff used through agencies will be made aware of the Trust's sustainability principles and policies. There will be a review of HR policies to ensure they promote sustainable behaviour.
- HR will encourage home working for back office staff where appropriate.
- HR to work with Travel, Transport & Access Group to promote the health benefits of active travel and healthy eating choices to staff. Wellbeing group to support initiatives which support sustainable development principles.
- The SDAG will aim to improve the baseline Workforce GCC average score of 50% with the objective to achieve an average score of 80% by March 2015.
- The SDAG will aim to improve the baseline Models of Care GCC average score of 75% with the objective to achieve an average score of 80% by March 2015.

5.8 Role of Partnerships & Networks

The Trust recognises that sustainable development is very important to individual citizens and local communities. The Trust’s external engagement strategy will therefore be underpinned by the principles of sustainable development. The Trust will strive to ensure that everything it does with its patients, staff, partners and communities is appropriately informed by sustainable development.	
Trust Lead	Kevin McGee – Chief Executive
Overall Objective	To work in partnership with local, regional and national stakeholders and other NHS organisations to promote and deliver on shared sustainability goals.
SDMP Target	To become an active member of the Local Strategic Partnership.

Overview of activity to date:

- The Trust has developed robust partnership networks with Nuneaton and Bedworth Borough Council, North Warwickshire Borough Council and Warwickshire County Council. Work is underway to identify joint schemes to deliver sustainability programmes.
- Discussions with warwickshire north Clinical commissioning Group have identified areas where joint initiatives will improve local health outcomes.

ACTION PLAN:

- The Communications team will develop an active communications strategy to raise awareness about sustainability at every level of the organisation. In addition, the strategy will address reporting on sustainability to the public and promotion of the wider benefits and importance of sustainability to the patients and visitors to the Trust – e.g. promoting healthier lifestyles and sustainable, low-carbon travel.
- The Trust will become an active member of local sustainability networks, in particular the Local Strategic Partnership for Nuneaton and Bedworth. The Trust will ensure that its work on sustainability is aligned with and supports “Shaping the future”, the Sustainable Community Plan for the local area, with particular focus on Theme 3 (Healthier Borough) and Theme 4 (Sustainable Borough).
- The Trust will join the West Midlands Energy Manager’s Forum to share best practice on energy and carbon management. Estates will regularly and actively benchmark itself against other Trusts to test the effectiveness of its plans and projects.
- The Trust will ensure that the Clinical Commissioning Group is sighted on its SDMP. Communications will ensure that this document and any future updates are available to the public via its website. The Trust will review commissioner’s expectations and adjust the SDMP accordingly.

- The Trust will take lead on sustainable development and carbon reduction within the NHS at a local and regional level and be an exemplar to other sectors and to other health organisations.
- The SDAG will aim to improve the baseline Community GCC average score of 38% with the objective to achieve an average score of 50% by March 2014 and 80% by March 2015.

5.9 Governance

The Trust understands that embracing the concept of sustainable development is fundamental to realising the benefits from improved environmental performance, implementing better social initiatives and realising the economic rewards necessary to drive the strategy forward.	
Trust Lead	Julie Whittaker – Director of Community Services
Overall Objective	To implement the necessary governance processes to ensure that sustainability is embedded into the Trust.
SDMP Target	Ensure that governance processes are in place to ensure that sustainability is embedded within the organisation, including 6 monthly Board updates.

Overview of activity to date:

- The Trust has identified an Executive Clinical Director as Board Lead for Sustainable Development.
- The Trust has signed up to the Good Corporate Citizenship assessment model and created baseline score, from which this action plan was developed.
- The Trust has established a multi-functional Sustainable Development Action Group to oversee the development and implementation of the programme (Terms of Reference in Appendix B).
- The Trust has set clear and measurable targets for sustainability and carbon reduction, as outlined in this action plan.

ACTION PLAN:

- Trust to identify a non-executive member of the Board to become a champion for sustainability, allowing for more consideration to be taken in Board decisions and providing a more proactive approach towards decisions
- Trust to include sustainability in its scorecard of performance indicators, with a mandatory sustainability impact assessment in Board papers.
- Trust to start reporting on sustainable development and carbon reductions in its annual reports, including a measure of carbon emissions.
- Trust to appoint a Band 7 Sustainability Manager to manage implementation of the Trust’s sustainability programme. The Sustainability Manager will recruit and manage a network of champions to help influence staff behaviour and promote grass-roots action in support of the SDMP’s goals.
- SDAG to prepare six monthly Board reports charting progress towards SDMP targets. The report will be based around a simple one page Key Performance Indicator dashboard to allow for rapid interpretation of performance.

- The SDAG will aim to improve the baseline Overall GCC average score of 17% with the objective to achieve an average score of 50% by March 2014 and 80% by March 2015.

5.10 Finance

Adopting more sustainable operating and working practices makes good business sense. Carbon is becoming an increasingly expensive consequence of traditional business as usual operations and taking action to reduce carbon emissions and waste can deliver significant financial rewards. It is essential therefore that the true cost of carbon is properly understood and accounted for in the Trust's financial systems.	
Trust Leads	Chris Bradshaw – Director of Finance & Richard Parker – Head of Financial Accounts
Overall Objective	To ensure that the work of Finance directly supports the implementation and objectives of the SDMP.
SDMP Target	To quantify cost and carbon reduction as part of efficiency improvements within the Trust.

Overview of activity to date:

- The Trust participates in the Government's Carbon Reduction Committee Energy Efficiency Scheme (CRC) scheme, which requires the Trust to purchase carbon allowances at a rate of £12 per tonne CO₂ emitted. This has increased the financial incentive to reduce emissions.

ACTION PLAN:

- Appendix A includes a proposed Spend-to-Save programme. Without investing resources in the programme it is unlikely that the Trust will meet its sustainability targets and the opportunity to make financial savings will not be realised. The project summary is supported by a MACC which demonstrates the potential to make both financial and CO₂ savings for each major project put forward.
- Cost and CO₂ abatement projects to form part of the Trust's cost improvement programme.
- Finance and procurement will incorporate life cycle costing and carbon reduction into future business cases.
- Finance will provide all necessary data to facilitate carbon reduction monitoring and reporting.
- To assist Estates in apportioning costs for utilities and waste to departments and services to improve management.

5.11 Adaptation

<p>This SDMP sets out an action plan to mitigate climate change by reducing the Trust's emissions and acting more sustainably. However, this will not protect it from the predicted effects of climate change such as longer and more frequent heat waves, increased flooding, harsher cold snaps and the impact these events will have on the Trust's services. <i>Adapting</i> to climate change is a necessary strategy. It will ensure high quality services are maintained when the Trust has to cope with an influx of patients during critical climate events.</p>	
Trust Leads	Kevin McGee – Chief Executive, Geoff Place – Senior Technical Officer & Norma Clark – Emergency Planning & Business Continuity Manager
Overall Objective	To ensure that Climate Change adaptation is effectively incorporated into the Trust's business continuity, emergency planning and risk assessment procedures and that Climate Change risks are adequately catered for in the design and operation of the Trust's estate.
SDMP Target	To develop an Adaptation Plan that takes account of all Climate Change adaptation requirements for GEH.

Overview of activity to date:

- The Trust currently considers its ability to deal with extreme weather events and other projected events that may disrupt normal service, as part of its business continuity and emergency preparedness procedures.

ACTION PLAN:

- The Trust will develop and review an adaptation plan using the UKCIP Wizard (<http://www.ukcip.org.uk/wizard/>) and SDU NHS guidelines (http://www.sdu.nhs.uk/documents/publications/Adaptation_Guidance_Final.pdf) during 2013.
- Estates will consider increased risk of premises flooding based on the Environment Agency (EA) guidelines.
- Estates will consider risks to resilience of power and AC in the event of extreme climate conditions.
- IT will consider risks to ICT systems and suppliers of extreme climate conditions.
- The Trust will create a section in the Corporate Risk Register that addresses the challenges of building resilience to climate change which will cover the legal, financial, organisational, reputational and service risks
- The SDAG will aim to improve the baseline Adaptation GCC average score of 53% with the objective to achieve an average score of 80% by March 2015.

APPENDIX A: Spend-to-Save Projects

Table A1: 2013/2013 spend-to-save projects

CATEGORY	PROJECT	Cost	Annual Saving £	Annual kWh saving	Annual CO2 saving	NEXT STEPS / COMMENTS
LIGHTING	Upgrade corridor lighting in phase 2 and 3 and cheverel link corridors to T5s	£22,758	£8,440	65,700	44	PROJECT COMPLETED 2012/2013
	LEDs fitted in roof spaces	£15,708	£12,969	78,840	67	Order placed
	Upgrade street lighting to LEDs	£20,000	£3,610	39,240	21	Estimated costs and savings - business case required
	LEDs fitted in OPD A	£9,465	£2,106	21,060	11	Order placed
	LEDs fitted in OPD B	£9,385	£2,276	22,760	12	Order placed
	Install LEDs in wards	£60,000	£18,298	186,500	95	Estimated costs and savings - business case required
	Lecture theatre - replace CFLs with LED downlighters	£12,000	£4,031	202	0.1	Maintenance included in cost saving (£4K over 5 yrs)
HEATING & BEMS	Install inverter drives on main HVAC motors	£9,835	£6,937	75,402	36	PROJECT COMPLETED 2012/2013
	Major boilers - turn down on boiler burners (4% gas)	£17,208	£20,390	823,312	151	PROJECT COMPLETED 2012/2013
	Upgrade steam main - repair steam leaks and upgrade insulation	£10,000	£10,000	200,000	36	Prepare business case 2013
	Interlocks on A/C and heatpumps with zoning and deadbands	TBC	TBC	TBC	TBC	Prepare business case 2013
	Upgrade BEMS to Trend IQ3 with zonal controls & submetering	TBC	TBC	TBC	TBC	Prepare business case 2013
STAFF ENGAGEMENT	Energy awareness campaign	£23,000	£46,000	500,000	262	Engage Communications in development of energy awareness campaign; recruit site Champions; indicative budget 1-2% of total energy spend (return ca. 10% - estimated)
WASTE MANAGEMENT	New waste management policy in line with new HTM07-01 - Introduce mixed recycling (DMR) - Improve clinical waste segregation procedures & staff training	£10,000	£55,000	n/a	n/a	Create new policy, identify options for waste reduction and recycling, review staff waste training. Estimates only.
	Catering food digester	£21,000	£23,000	n/a	n/a	Prepare business case 2013
TOTALS		£240,359	£213,057	2,013,016	735	

8.9% of carbon footprint baseline

Table A2: Other identified projects that require further feasibility work (2014 onwards)

CATEGORY	PROJECT	NEXT STEPS
TRAVEL	Reduce taxi usage	Improve data on taxi usage and identify options for reduction in miles, i.e. carrying out single pharmacy run
	Active travel - promote active travel to staff and service users	Develop active travel plan for GEH as part of wellbeing strategy
WATER	Rain water harvesting for grey water purposes	Carry out feasibility during 2013
	Potential to use Reverse Osmosis permeate as boiler feed water	Carry out feasibility during 2013
IT	PC power management (automatic powerdown of PCs at the end of the working day)	Investigate options, costs and benefits
	Develop and implement printing & printer devices strategy to reducing print costs and consumable consumption	Develop strategy with IT and Procurement
HEATING & BEMS	Interlocks on A/C and heatpumps with zoning and deadbands	Prepare business case 2013
	Upgrade BEMS to Trend IQ3 with zonal controls & submetering	Prepare business case 2013

APPENDIX B: SDAG Terms of Reference

Title of group	Sustainable Development Action Group (SDAG).
Overview	SDAG is an action-oriented, cross-departmental working group whose purpose is to co-ordinate the implementation of GEH's Sustainable Development Management Plan (SDMP).
Purpose	<p>To implement actions from the SDMP and report progress to Board.</p> <p>SDAG members will work together to:</p> <ul style="list-style-type: none"> ▪ To oversee the delivery of GEH's SDMP. ▪ To develop practical initiatives and action plans to enable GEH to meet its Board-approved SDMP targets. ▪ To champion sustainability principles and working practices across the Trust and among external stakeholders. ▪ To ensure that, as a minimum, the Trust complies with all existing and future NHS strategies on sustainability and carbon reduction. ▪ To shape GEH's sustainability strategy and work programme beyond 2015.
Specific objectives/scope	<ul style="list-style-type: none"> ▪ Coordinate the development and implementation of GEH's SDMP in line with national requirements and frameworks. ▪ Develop action plans to take forward initiatives with reference to the NHS Good Corporate Citizenship (GCC) agenda themes. ▪ Establish working groups as required, covering specific areas of the action plan. ▪ Measure progress towards SDMP goals and targets and report progress to the Board. ▪ Encourage positive engagement with staff at all levels of the organisation on sustainability and sustainable working practices.
National requirements	<ul style="list-style-type: none"> ▪ <i>Saving Carbon, Improving Health</i> – NHS Carbon Reduction Strategy. ▪ Climate Change Act 2008. ▪ NHS GCC assessment model.
Scope of decision making	<ul style="list-style-type: none"> ▪ Review and recommend projects and targets to enhance the sustainability of the Trust's operations. ▪ Make recommendations to the Board as necessary. ▪ Task and finish projects as delegated.

Membership	<p>The group should be made up of a cross section of representatives from the Trust, who will be responsible for drafting and putting forward initiatives to the Board that are congruent with the Trusts overarching SDMP.</p> <p>Senior Clinician Non-Executive Director Procurement Estates & Facilities Human Resources IT Communications representation Staff representation</p>
Chair	Director of Community Services
Deputy	Sustainability Manager
Attendance Requirements:	Members are expected to attend all meetings but are required to attend at least 60% of all scheduled meetings in person. A nominated deputy is expected to attend in circumstances where the Group member is unable to attend.
Quorum Requirements:	Four members.
Organisation: a) Frequency b) Papers and Minuting arrangements	<p>Monthly 2 hour meetings.</p> <p>The Minutes will record the decisions and key actions agreed during the meetings; the Minutes of the previous meeting will be reviewed at the start of each meeting.</p>
Accountable to:	Directors Team.
How accountability is demonstrated	<ul style="list-style-type: none"> ▪ Terms of Reference. ▪ Notes and /or reports presented to the Board. ▪ Sustainable Development Management Plan.
Reporting Arrangements	This is a group that will action work, so will not receive reports from any other group, other than the working groups it establishes. The group should ensure that progress is reported in the Trust's annual report as a minimum.

Confidentiality	The Minutes of the meeting are not exempt from the Freedom of Information Act. Minutes will include a statement at the end that they may be released to the public if requested under the Freedom of Information Act.
Life span of group	Ongoing.
Terms of reference agreed by	Director Team.
Date agreed	June 2013.
Author	Will Clark/Julie Whittaker.
Review Arrangements	Review every 2 years.