



Queen Victoria Hospital
NHS Foundation Trust





Main Hospital

Queen Victoria Hospital

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Introduction and context

Climate change is a health emergency and a health opportunity. In January 2022, through our Green Plan (Part One) we set out our commitment to continue to deliver on our passion for providing the highest quality care, the best clinical outcomes and a safe and positive patient experience, in the context of climate change.

Our vision through Care Without Carbon is: together we lead the way in Net Zero Carbon healthcare; protecting the environment on which our health depends.

With our reputation in the health and care sector for pioneering advanced techniques and treatments, we are committed to meeting the ambitious NHSEI Net Zero Carbon targets, and where possible, exceeding them.

This means reaching Net Zero for our direct emissions by 2040 and our indirect emissions by 2045 or earlier. Our Green Plan (Part One) [add URL for website] sets the scene for why we are tackling climate

change, identifies our key targets and sets out our approach for delivery through Care Without Carbon (CWC), our framework for sustainable healthcare. Originally developed at Sussex Community NHS Foundation Trust, CWC provides an integrated and holistic approach to sustainability within the NHS – ever more important as the challenge of climate change and health deepens day by day. By working in parallel with others across our local system through CWC, we aim to enhance our impact, learn from others, and in turn, share our learning with others.

This is Part Two of our Green Plan. Here we set out our detailed action plans to ensure we will deliver on our commitment to reach Net Zero Carbon emissions by 2040 and our interim target of 57% reduction in carbon emissions.

Delivering on this strategy will drastically reduce our environmental impact as a Trust and also deliver real health benefits to our patients and the wider community.

Why aim for Net Zero Carbon healthcare?

Climate change and health are inextricably linked, with vulnerable populations such as our patients being most at risk from the harmful effects of climate change. Within the public sector, the NHS is the largest emitter of CO₂, making up 5% of England's carbon footprint. With 3.5% of vehicles on the road associated with NHS business, plus the huge amount of waste produced, our impact on climate change and the environment is significant.

The way we are currently delivering healthcare is in itself contributing to ill health. That is why NHS England and NHS Improvement (NHSEI) has set a target for all NHS trusts to achieve Net Zero Carbon emissions by 2040.

Taking action on our changing climate is delivering on our commitment to deliver the highest quality care for our patients.

Our NHS Carbon Footprint

In delivering our world-leading, specialist care to communities across the south east of England and beyond, we consume a significant amount of energy and water and produce a large volume of waste. We also require movement of staff and patients across a substantial area and purchase a wide range of equipment and services.

All of these activities generate CO_2 (carbon dioxide) emissions and can be collectively summarised as our carbon footprint. In 2020/21 the carbon footprint associated with our direct emissions (NHS Carbon Footprint) was nearly 2800t CO_2 e.

Our direct emissions (NHS Carbon Footprint) are illustrated in the graphs on the next page.

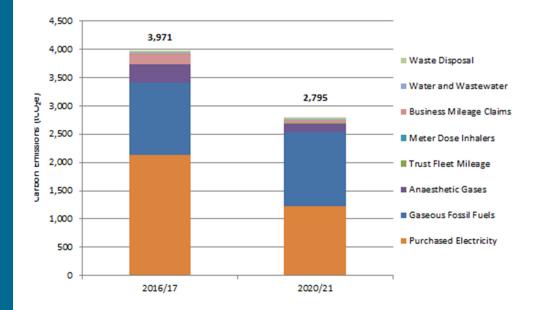
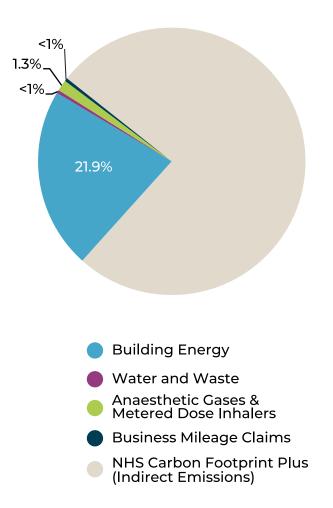


Figure 1: QVH NHS Carbon Footprint 2020/21 compared to base year of 2016/17

NHS Carbon Footprint



NHS Carbon Footprint Plus

In line with NHSEI methodology, we also illustrate here our NHS Carbon Footprint Plus (see Figure 5 below). This includes more indirect areas of impact, but which we have influence over as a trust. Our Carbon Footprint Plus includes both our direct and indirect emissions and accounts for annual emissions totalling 29,920tCO₂e. We don't have Trust specific data for these areas, so have used NHSEI data for an average NHS trust to illustrate the scale of the challenge. We will work to define a methodology for measurement over the coming years.

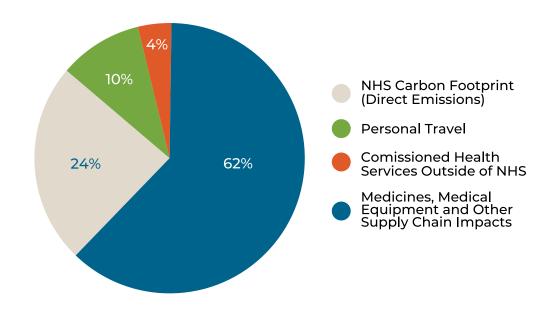


Figure 2: Percentage split of QVH NHS Carbon Footprint 2020-21 from different carbon sources

Figure 3: QVH NHS Carbon Footprint Plus 2020-21

Highlights of our progress to date

In part one of the Green Plan we reflected on where we are starting from in our journey to Net Zero Carbon by 2040. It is positive that we can build on achievements to date, which include:

In our buildings:

- A review of the Building Management System, seeking opportunities for carbon reduction.
- O Continued installation of variable speed drives to larger fan motors, connected to the BMS so efficiency gains can be calculated.
- O Continuing the programme to replace existing lighting with low energy and low maintenance LEDs phase 2 has been completed and now all key areas are lit with energy efficient lighting providing a 70% energy reduction to lighting energy demand.

Supporting greener Travel:

- The installation across the hospital of cycle ranks and safe storage boxes for those staff and visitors who wish to cycle to the hospital.
- O Facilitation of video conferencing equipment and training to all staff enabling virtual meetings both internally between staff and externally with patients, enabling staff to reduce their emissions associated with travel.

Tackling waste & procurement:

- Recycling facilities are available across QVH and we now recycle around 30 tonnes each year.
- Since 2018/19 we have achieved zero non-healthcare waste to landfill.
- Switched to a carbon negative sandwich supplier, cutting the impact of a key area of our catering.

- Moving to biodegradable cups, with 33 tonnes single use plastic avoided each year from the 438,000 cups used.
- Since 2012 we've been procuring from a central depot, reducing travel required to 1 lorry, 3 times a week.

Our clinical services:

- O Significant reduction in the impact of our anaesthetic gases. We are a majority TIVA giving anaesthetic department, using intravenous anaesthetic drugs rather than volatile/gas anaesthetics. In addition, we have removed desflurane vaporisers out of routine access across 10 theatres in 2021.
- **O** Replaced single use anaesthetic trays saving around 2.2 tonnes of carbon dioxide equivalents (tCO_2e) and 187,975 litres of water per vear.
- O Successfully moving to remote care where clinically appropriate, with 25% of our outpatient appointments now conducted remotely. In 2021/22 the Burns Outreach team conducted 54% outpatient appointments remotely, equivalent to saving 16,000km of driving and 2 tonnes CO₂.

Wellbeing:

• Created a green outdoor wellbeing space for all hospital staff to take breaks utilising upcycled office furniture.

Working in partnership:

• Participated in the Sussex ICS Energy Performance Contract project.

Where to next: tackling the next phase of carbon reduction

We have made a start in addressing the issue of carbon emissions associated with the delivery of care. The question now is: what next? We are at a moment in time where we are facing some deep challenges. But it's also a time of opportunity; a gathering of momentum towards a more sustainable health and care system.

Our Care Without Carbon Green Plan is about building on that momentum, developing a deep and structured programme across the Trust to support our Net Zero ambitions, and making sustainability part of our everyday thinking and decision making.

With 80% of our carbon footprint determined by clinical decisions, if we are to hit Net Zero Carbon we must change the ways we deliver care. This demands a strategy that focuses on clinical integration more than ever before. To deliver this, we have developed our Care Without Carbon framework to incorporate our set of Sustainable Healthcare Principles, based on principles originally developed by the Centre for Sustainable Healthcare.

These principles support both the urgently needed reduction in our carbon footprint and the delivery of high quality care for our community, working in two ways:

- 1. optimising our level of activity/resource use by helping people to stay well and by making our processes as efficient as possible;
- 2. and reducing the carbon intensity of the care we provide. In embedding and delivering against these principles we will meet our Net Zero Carbon target



Care Without Carbon: our framework for delivery of sustainable healthcare

We achieve these aims through our sustainable healthcare principles:

QVH Values

Continuous improvement of care.

Humanity.

Pride.

Green Plan



Care Without Carbon: Together we lead the way in net zero carbon healthcare, protecting the environment on which our health depends. Our 3 aims:

- Reducing the environmental impact: Delivering care that is Net Zero Carbon, minimising our impact on the environment and
- Improving wellbeing: Supporting the health and wellbeing of our patients, staff and communities.
- **Investing in the future:** making best value from our financial and other resources through forward thinking, sustainable



Healthier lives

Making use of every opportunity to help people to be well, to minimise preventable ill-health, health inequalities and unnecessary treatment, and to support independence and wellbeing.



Streamlined processes & pathways

Minimising waste and duplication within the Trust and wider health system to ensure delivery of safe and effective care.



Respecting resources

Where resources are required, prioritising use of treatments, products, technologies, processes and pathways with lower carbon, environmental and health impacts.

















Organisational Strategies

Achieving Net Zero: a roadmap to a new way of working

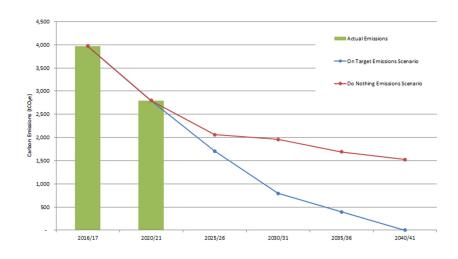
NHS England's Net Zero targets for sustainable healthcare are ambitious:

- O Net Zero by 2040 for direct emissions (NHS Carbon Footprint)
- O Net Zero by 2045 for indirect emissions (NHS Carbon Footprint Plus)

We are committed to achieving or exceeding them where possible. Our interim target of 57% reduction in direct emissions by 2025 reflects this.

Our roadmap to Net Zero Carbon

We've set out below our target trajectory to Net Zero for our direct emissions, compared to a Do Nothing scenario. The Do Nothing scenario reflects the emissions as a result of changes externally, with a key factor being the greening of grid electricity, projected to reach Net Zero in the 2030s.



Delivering better care

In delivering against our Net Zero target, we'll take the following approach:

- **1. Minimising resource use:** ensure that we use only what we need, this applies to all areas of our organisation, from clinical supplies through to paper and water use.
- **2. Reusing wherever possible:** moving away from single use items to choose items which can be sterilised, laundered or reprocessed, reusing heat to pre heat hot water and reusing and redistributing furniture and other items instead of purchasing new.
- **3. Switching to greener alternatives:** if we do need to purchase a new item, looking at lower carbon options wherever feasible, this would include lower carbon pharmaceuticals or moving to electric vehicles.
- **4. Offsetting:** this is our last resort and should only be used for emissions which cannot be reduced using strategies 1-3. We will only offset our emissions through a national

Our eight elements

The approach we have developed is based around the eight elements of the Care Without Carbon framework, designed to ensure we continue to have an integrated and holistic approach to our sustainable healthcare programme.

In the next section of this document, we set out our detailed work plans across each of the eight areas of work (or 'elements') within our Care Without Carbon framework. Within each element we detail our key success measures, targets and detailed action plans to ensure we deliver against our vision, key aims – and our Net Zero Carbon targets.



Evolving care: developing and enabling lower carbon, more sustainable models of care.



Places: ensuring our workplaces are low carbon and protect local biodiversity whilst supporting wellbeing for staff, patients and visitors.



Culture: empowering and engaging people to create change towards our path to net zero.



Circular Economy: respecting our health and natural resources by creating an ethical and circular supply chain.



Journeys: ensuring the transport and travel needed between our care and our communities is low cost, low carbon and conducive to good health and wellbeing.



Wellbeing: supporting people to make sustainable choices that enhance their wellbeing.



Climate Adaptation: building resilience to our changing climate in Sussex.



Partnership & Collaboration: enhancing our impact by working with others.



Developing and enabling lower carbon, more sustainable models of care.

Key success measure to 2025: Clinical projects delivering positive, measurable sustainability benefits within our five highest impact services.



Our approach

80% of our carbon footprint is driven by clinical decisions. Reaching Net Zero Carbon by 2040 will require a big shift in how we deliver care which cannot be achieved without input from clinicians. Enabling clinical teams to develop and enable lower carbon, more sustainable models of care is therefore essential. We will focus our work around our three principles of sustainable healthcare:

- O Healthier lives: Making use of every opportunity to help people to be well, to minimise preventable ill-health, health inequalities and unnecessary treatment, and to support independence and wellbeing.
- O Streamlined processes & pathways: Minimising waste and duplication within the Trust and wider health system to ensure delivery of safe and effective care.
- O Respecting resources: Where resources are required, prioritising use of treatments, products, technologies, processes and pathways with lower carbon, environmental and health impacts.

Our commitments

- We will integrate our sustainable healthcare principles at a strategic level across the Trust.
- We will support our clinicians to deliver against these principles by making lower carbon, more sustainable choices when delivering care day-to-day.
- We will advocate across our ICS and beyond for decision making in support of our sustainable healthcare principles.



Actions: Queen Victoria Hospital

No.	Action	Lead
E1	*Clinical services impact analysis & work programme: Undertake an analysis of the clinical services we provide and identify priority areas for action based on carbon impact. Use this information to inform the development of sustainability programmes within each of our five highest impact services.	
E2	 *Medical Gases: Develop a programme to accurately measure and reduce the impact of our medical gases to a minimum. This should include: O Detailed analysis of our medical gases data and use across the hospital, including comparison with activity data. O Based on this information, develop a detailed action plan to cut our medical gas impact to a minimum. O Monitor the shift towards and assess the sustainability of medical gas alternatives. 	
E3	*Desflurane usage: We will reduce the usage of desflurane to: - 5% usage of all fluorinated anaesthetic gases between 1st April to 1st September 2022 - Zero usage by 1st April 2023 and beyond In order to achieve this, we will closely monitor desflurane usage over 3 months by requiring all staff to complete a usage log each time it is removed from and then returned to the store.	

No.	Action	Lead
E4	 PPE: Work with clinical and non-clinical colleagues to reduce single use PPE and improve waste segregation now and following the pandemic. This should include: O a pilot project to trial reusable facemasks or aprons. O a glove use reduction project through responsible glove use messaging. 	
E5	Digital Care: Work with clinical and digital teams to integrate sustainability considerations into the digitisation of care, recognising the considerable opportunity to support the Trust Net Zero Carbon ambition. This should include linking in with the Outpatients Transformation Group.	
E6	Quality improvement: Integrate sustainable healthcare principles into the Trust quality improvement (QI) programme and policy.	
E7	Productivity: Complete a productivity review to maximise staff time and reduce duplication, this will enable the Trust to follow the 'making every contact count' approach whilst avoiding unnecessary appointments.	
E8	Clinical metrics and reporting: Review existing key metrics and channels of reporting within a single clinical department. Use this information to integrate new sustainability metrics e.g. patient distance travelled. Alternatively highlight existing metrics through a sustainability lens e.g. reduction in medicine use equals reduction in carbon emissions.	



Actions: Queen Victoria Hospital

No.	Action	Lead
E9	Clinical service design: When new clinical services are designed, we will embed sustainability into the design and operation e.g. considering travel of patients and staff and considering methods of clinical interventions.	
E10	 Medicines: Undertake an analysis to: O Understand pharmaceutical prescribing across the Trust by department / team and identify top 10 medications prescribed by cost and/or quantity. O Starting with the top 10, identify which types of medicines have the largest carbon impact; and O Identify priority medicines for improvements and targeted carbon reduction interventions. Use this information to develop a carbon reduction plan for medicines in line with our Net Zero targets. 	
E11	Nitrous oxide manifold: Develop a programme of work to switch to use of cylinder gas and allow nitrous gas manifold to be disabled.	
E12	Reusable Instruments: Commence a trial of reusable surgical instruments which can be sterilised on-site and are better quality instruments, with less than 10% of the carbon footprint. Collaborate with other ICS Trusts e.g. UHSx who have already trialled this to utilise their learnings.	

No.	Action	Lead
E13	Clinical theatre: Support our clinical theatre staff to measure the carbon footprint of a specific clinical pathway then implement measures to reduce this.	

ICS & SE region

No.	Action	Lead
E14	*Medical gases, inhalers and pharmaceuticals: Provide input and support into the development and delivery of ICS projects to reduce the impact of medical gases, inhalers and pharmaceuticals across the ICS.	
E15	Sharing interventions: Work with our ICS and wider partners to share learning on clinical interventions and best practice, including our work around anaesthetic gas reduction.	
E16	Medical devices and instruments: Explore the opportunity for an ICS-wide project to share facilities for reprocessing/reuse of medical devices and metal instruments.	



No.	Action	Lead
E17	*Supporting existing community work: Undertake an analysis of where our sustainability programme can most effectively support our work around health inequality, with a particular focus on the areas set out by NHSEI: fuel poverty, air quality and access to green spaces. *Patient choice: As part of our work on patient choice, engage with patients on the sustainability of different care choices, for example how and where care is delivered. For example, the sustainability benefits of avoiding unnecessary patient travel through the use of video consultation, particularly for minor treatments and initial consultations.	
E19	Prevention: Work with our ICS partners to develop prevention projects supporting population health and sustainability.	
E20	Education: Consider opportunities to educate and inform our patients on the choices they can make to improve health and wellbeing beyond their time in our care.	

^{*} Actions to be delivered in 2022/23





Ensuring our places are low carbon and protect local biodiversity whilst supporting wellbeing for staff, patients and visitors.

Key success measure to 2025: 57% reduction in CO₂e against our 2016/17 baseline.



Our approach

Our healthcare buildings are the largest contributor to our direct carbon emissions as an NHS Trust. Through this work stream, we aim to minimise our impact on the environment and ensure our places support the wellbeing of patients and staff as well as increasing local biodiversity.

The challenge is to drastically reduce the carbon impact of our estate, reaching Net Zero Carbon by 2040. This will require us to work in partnership with our landlords to ensure that the energy performance of the buildings we occupy is improved and that the use of fossil fuels for heating is phased out over time.

To achieve this, we will follow the well-established hierarchy of lean-clean-green:

- O Lean: using the estate we occupy well and prioritising the reduction of energy and water consumption within our buildings.
- Clean: installing low-carbon heating technologies to reduce reliance on fossil-fuels.
- Green: installing renewable energy generation on site to reduce our carbon footprint
- [If necessary and appropriate following national guidelines we will offset any residual emissions through accredited schemes and with projects bringing benefit directly to our patients.]

Within this work stream, we also consider the 'indirect' emissions associated with our estate, in particular the embodied carbon in new builds.





- We will decarbonise our estate in line with our carbon targets and wider sustainability goals, and develop robust data management and reporting systems to monitor and report on our progress.
- O We will reduce energy and water consumption across our estate and cut our carbon emissions in line with Net Zero Carbon (NZC) targets.
- O We will ensure our places provide comfortable and sustainable environments that promote excellent patient care, are good places to work and support community wellbeing.

Actions: Queen Victoria Hospital

No.	Action	Lead
ΡΊ	*Targeting inefficiency: Use the energy and water data we have available to identify areas of inefficient consumption. Develop a strategy for sub-metering high usage equipment/areas.	
P2	*Increasing Efficiency: We will look at low/zero cost ways of reducing the energy we use within our buildings, for example by ensuring equipment and heating are only used when absolutely necessary.	
Р3	Project proposals: Work up detailed investment grade proposals for a range of carbon reduction projects, including energy efficiency works, low carbon heating and on-site renewables.	

No.	Ac	tion	Lead
P4	of t	d development: Develop bids for future rounds the Public Sector Decarbonisation Scheme / w Carbon Skills Fund where appropriate.	
P5	Refurbishment and construction: Ensure that all major works and new builds consider the Trust's net zero carbon ambitions.		
P6	backed) electricity and budget for the associated uplift in cost within our revenue budget. Explore the opportunity for procuring Renewable Gas		
P7	 Guarantees of Origin (RGGO) gas gas. Biodiversity: Work with local partners to develop a Biodiversity Action Plan to preserve and enhance the green spaces within our estate. This should include: O Tree planting projects using staff volunteering days. O Support bee keeping, wild gardens and growing fruit/veg. O Reduce impacts of grounds maintenance e.g. avoid usage of peat-based compost and chemical pesticides. 		

ICS & SE region

No.	Action	Lead
P8	Estates Integration: Work with the Sussex ICS to help integrate sustainable healthcare principles into the estates programme.	
P9	*Net Zero Carbon: Ensure NZC places are a fundamental component of any new ICS level Estates Strategy.	





No.	Action	Lead	
P10	Community actions: Engage with local		
	community groups to agree any action around		
	estate and local environment.		

^{*} Actions to be delivered in 2022/23





Empowering and engaging people to create change to progress us towards net zero.

Key success measure to 2025: ensure 100% of our staff are aware of our NZC ambitions and know the ways they can support the Trust in achieving that.



Our approach

A healthy workforce is key to our ability to deliver high quality care to our patients; and providing a workplace that supports wellbeing is integral to attracting and retaining the rich mix of skills and talent that our Trust requires. We recognise that healthy behaviours are sustainable behaviours, and seek to encourage both. Aligning the wellbeing and sustainability agendas will add value and impact to the benefit of staff, patients and our wider community.

Through this work stream, we need to work with our staff to develop and deliver against this Green Plan over time. Critically we need to make taking action on sustainability integral to how we as a Trust, how our teams and how our individual staff deliver care. If we wish to maintain interest and momentum, sustainability cannot be an add on.

To achieve this, we will focus initially on demonstrating to our staff the links between health and climate, as well as celebrating our successes so far and as they develop through our sustainability programme Care Without Carbon.

In tandem with this, we will encourage staff to participate through an engagement programme focused on sustainable healthcare. Through the launch of our Green Plan, we will affirm our commitment to sustainability and Net Zero, and work to encourage active contributions from staff.

Once we have established a good baseline of awareness with staff, we will actively promote our work to be more sustainable so our patients, visitors and wider community can see what we are doing and why it matters.



Our commitments

- We will establish a strong narrative that runs across all aspects of the Trust in support of sustainable behaviours and actions both in work and in personal lives.
- We will partner with others to seek opportunities to develop the narrative on sustainable healthcare, enhance our own impact and create opportunities for people to share ideas.

Actions: Queen Victoria Hospital

No.	Action	Lead
C1	*Intranet: Create a section on the Intranet to act as a hub for all sustainability information about QVH, this will include a link to the Green Plan.	
C2	*Green Plan launch: Develop a suite of engagement materials to support the launch of this Green Plan internally and externally as appropriate.	
C3	Staff engagement programme: Use learning from our Engagement Roadmap to develop and implement a targeted staff engagement programme around sustainability, showing visible leadership from the top and empowering staff to take action. This should include consideration of a Champions programme to empower staff to take action on sustainability and the development of sustainability groups covering specific staffing areas e.g. admin.	

No.	Action	Lead
C4	Sustainability Toolkit: Roll out a Team Leaders Toolkit to inform and engage Team Leaders in bringing sustainability to their teams. Use this to identify and share case studies across the Trust to celebrate success and motivate others.	
C5	*Internal comms: Communicate links between health and climate regularly across all internal communications channels, linking into the national and international narrative such as COP26 to broaden the picture and add relevance.	
C6	*Sustainability award: Introduce an award for Sustainable Practice into our Staff Awards.	
C7	*Events specification: Develop a Sustainable Events Specification to support staff who are organising events to plan and conduct these events in a low carbon manner. This should include guidance on using virtual events where possible, sustainable food and drinks, minimising printed materials, minimising waste (e.g. single use plastic) etc.	
C8	*Trust meetings: Include a sustainability agenda item in all Trust meetings to normalise talking and thinking sustainability within core business.	
С9	Learning and development: Integrate sustainability into induction and mandatory training for all staff.	
C10	JDs and PDPs: Embed sustainability objectives into all Job Descriptions and Personal Development Plans (PDP). This will ensure we are able to engage with all staff on our sustainability ambitions, allow staff creativity in identifying how they can support these, and provide a means of measuring progress through a bi-annual review.	



No.	Action	Lead
CII	Recruitment: Undertake a review of our recruitment processes and advertisement material ensuring we are integrating with the ambitions of this Green Plan and setting out our sustainability ambitions as a Trust.	
C12	Volunteers: Proactively identify opportunities to work with volunteers in support delivery of this Green Plan.	

ICS and SE region

No.	Action	Lead
C13	Engagement activities: Work with ICS and wider SE regional partners to identify and develop opportunities to coordinate staff engagement and behaviour change activity, for example through CWC Challenges and campaigns such as Travel Smarter September.	
C14	Greener NHS: Support regional activity under the Greener NHS programme through NHSEI.	

No.	Action	Lead
C15	*Signpost Green Plan: Clearly signpost links to our Green Plan on the QVH website.	
C16	Patient Engagement: Develop a Patient Engagement Strategy for this Green Plan, setting out a phased approach to engaging with patients on sustainability between now and 2025.	
C17	*Promotion and awareness: Visibly promote our sustainability programme within our hospital sites to raise awareness among our patients and wider community of our commitment to sustainability and Net Zero.	

^{*} Actions to be delivered in 2022/23



Respecting our health and natural resources by creating an ethical and circular supply chain.

Key success measure to 2025: Deliver a measurable carbon emissions reduction within our supply chain.

Other core deliverables before 2025:

- Achieve a 15% reduction in total annual waste production by weight from 2019-20 levels.
- Avoid the disposal of 50,000 items per year through reducing, reusing and redistributing our products.
- Achieve and maintain a 65% recycling rate for non-healthcare waste.



Our approach

70% of our emissions are associated with the goods and services we use. Therefore, it's critically important that we take a different approach to how we treat our resources and the people who produce and distribute our products. Adopting a circular economy is the best way to make this happen.

At a Trust level this means we need to:

- Enable our procurement, clinical and waste services to work together and consider the whole lifecycle of a product when choosing the most sustainable options.
- Integrate sustainability criteria into our procurement decisions.
- Redistribute products and materials at their end of use.

Our commitments

- We will continuously reduce our total waste production, optimise the segregation of materials for recycling and increase the reuse of products.
- We will measurably reduce the carbon footprint and environmental impact of our supply chain.
- We will work with our suppliers to measurably improve the health and wellbeing of the people and communities supporting our supply chains.



Actions: Queen Victoria Hospital

No.	Action	Lead
CEI	*Carbon hotspots analysis: Use our carbon hotspots analysis to identify the highest impact areas of our supply chain. Use this – along with information on key planned tenders for 22/23 – to prioritise areas for action in year 1 and develop programmes of work against each.	
CE2	*Minimum Social Value Criteria: Develop a set of standard environmental criterias to include in all tenders. In line with national requirements, include these as part of the minimum 10% social value criteria for all tenders by 1st April 2022.	
CE3	*Medium Risk criteria: We will consider the implementation of higher weightings (above the standard 10%) for social value scoring criteria for new tenders that fall within high impact categories identified in the carbon hotspot analysis.	
CE4	*High Risk Criteria: For new tenders that fall within a high impact hotspot category and breach an agreed financial tender value (e.g. £1 million) we will implement a higher social value weighting of 20% based on the environmental risk. We will also consult with sustainable procurement experts to implement effective criterias relevant to mitigating those risks.	

No.	Action	Lead
CE5	Contract management: Following the inclusion of social value criteria into tenders we will identify 3 new contracts in which the implementation of these criterias by the supplier throughout the contract term will be closely verified. To achieve this, we will monitor the sustainability performance of the suppliers through proactive contract management and reporting.	
CE6	Product level carbon savings: Identify 3 key products; either high volume or spend; used by the Trust and deliver a measurable reduction in carbon emissions by working with the supplier or by selecting an alternative product.	
CE7	*Total waste reduction: Measure our total waste production by weight and carbon. Develop a programme of work to reduce this year on year, aiming for a reduction in total weight of 5% by 1st April 2023.	
CE8	Redistribution: Expand on opportunities for introducing a redistribution scheme for our old IT equipment so that the product or materials can be reused.	
CE9	Mobility aids: Utilising guidance from the national greener NHS team we will review the use of mobility aids across the Trust and implement a programme; with the help of suppliers; to reuse and refurbish the majority of mobility equipment used by our patients in the most environmentally sustainable way.	



No.	Action	Lead
CE10	*Low carbon food: Measure the carbon footprint of our food and catering services. Work with clinical and non-clinical colleagues to set targets to increase access to healthy, nutritious plant based meals whilst reducing reliance on high carbon foods such as beef and lamb.	
CE11	*Recycled Paper: We will switch to using unbleached recycled paper for all purposes aiming to achieve 95% by 1st April 2023.	
CE12	Paper reduction: Develop a programme to reduce the environmental impact from office paper through the implementation of the QVH's electronic patient record and other IM&T developments. The programme should also consider reviewing the need for easily accessible, good quality digital patient information in place of leaflets; Fast, responsive and reliable digital note taking for clinical staff; and the use of IT to replace the need for high volumes of internal and external patient letters.	
CE13	*Healthcare waste: Achieve and maintain the proportions of healthcare waste segregation outlined by national NHS England & Improvement guidance - 60% low temperature incineration, 20% alternative treatment, 20% high temperature incineration. Note: this is an indication of a typical acute provider, different Trusts may be able to go further with a lower proportion of high temperature incineration and alternative treatment.	

No.	Action	Lead
CE14	*Procurement training: Provide sustainability training to our procurement team before 1st April 2023. Covering areas such as carbon literacy, green washing, sustainable procurement and circular economy.	
CE15	*Waste training: By 1st April 2023 deliver a mandatory waste training module for staff, with the aim to improve waste segregation, recycling levels and legislative compliance.	
CE16	*Reporting: Develop and produce a set of monthly KPIs to track progress against the key success measure and other actions within the Green Plan as appropriate.	
CE17	Consumables in theatres: This area is our biggest non-PO spend. We will set up a Theatre procurement task and finish group to tackle this specifically to support the key success measure.	
CE18	*Food waste: Starting with our catering facilities segregate food waste as its own waste stream for onsite treatment or send offsite for anaerobic digestion or composting. Once established use this information measure and reduce food waste across the Trust.	
CE19	Food plate waste: Review plate waste in wards to assess viability of food waste collection - Reducing general waste weight and increase recycling percentage. Can then record more accurately where food is being wasted to take measures to reduce food waste. Upstream food waste from food suppliers.	

No.	Action	Lead
CE20	Reusable sharps containers: Review the implementation of a reusable sharps bin collection system to reduce the incineration of single use plastic sharps bins and support the relevant key success measure.	
CE21	Bin labels: Audit, design and update waste signage and bin labels to ensure a consistent approach across the entirety of the Trust and to support the delivery of the key success measure.	
CE22	*NHS Plastics Pledge: Deliver any remaining commitments within the NHS Plastics Pledge for single use plastic catering products by April 2022. Go beyond these commitments and set an annual target to measure and reduce the number of single use food containers and cups purchased by the Trust.	

ICS and SE region

No.	Action	Lead
CE23	Collaboration: Work with NHS partners to identify opportunities for joined up projects, including through the Sussex and Surrey NHS waste group.	

No.	Action	Lead
CE24	*Single use PPE: Develop a programme of work to address the huge increase in single-use plastic PPE use during the pandemic in the immediate-term, and post-pandemic. This should include delivering a trial of reusable face masks and aprons and a glove use reduction campaign across the ICS.	

No.	Action	Lead
CE25	*Low carbon food: Build on the promotion of healthy plant-based meals to patients whilst communicating environmental benefits.	

^{*} Actions to be delivered in 2022/23



Ensuring the transport and travel that links our care and our communities is low cost, low carbon and conducive to good health and wellbeing.

Key success measure to 2025: 57% reduction in all measurable travel CO₂e against our baseline.



Our approach

Travel is a significant part of the environmental impact of the NHS, with around 3.5% (9.5 billion miles) of all road travel in England related to patients, visitors, staff and suppliers to the NHS. This contributes to the Trust's carbon footprint, creates air pollution locally and contributes to traffic congestion – all of which in turn impact directly on the wellbeing of our staff and our patient community.

Through our Journeys work stream we aim to:

- Eliminate non-essential travel.
- Increase the uptake of healthier active travel choices.
- Ensure that all remaining travel uses the most resourceeffective methods and follows the travel mode hierarchy.

Collaboration with partners across the Trust–digital and clinical in particular – as well as local partners outside of the Trust will be key to this.

Our commitments

- We will work with our clinical and digital teams to minimise and decarbonise staff, patient and visitor travel associated with our delivery of care, while maximising the health benefits of travel.
- We will fully electrify our owned or third party vehicle fleet responsible for our transport or delivery services by 2024 to reduce air pollution locally and minimise our negative impact on health.

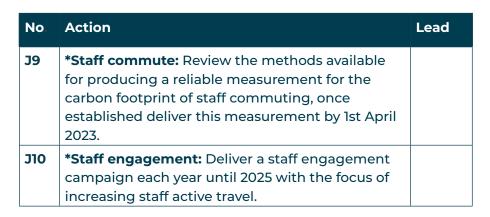


Actions: Queen Victoria Hospital

No.	Action	Lead
כו	*Improve Data and reporting: Undertake a review of our NHS Carbon Footprint data for travel and transport to ensure we have an accurate understanding of our impact, including where this is delivered by a third-party organisation, and embed this into our regular KPI reporting process (see J6).	
J2	*Patient Transport: Review any existing patient transport contracts and engage with the supplier regarding emissions measurement and reduction.	
J3	*Patient and Visitor travel: Research and deliver methodologies to accurately measure the NHS Carbon Footprint Plus associated with patient and visitor travel.	
J4	 *Travel Plan: Commission a Travel Plan with a focus on: O Delivering against our Net Zero Carbon commitments; O Supporting active travel and public transport for staff, patients and visitors and; O Cutting air pollution locally. This should also include a review of our business travel. 	

No.	Action	Lead
J5	*Staff lease car scheme: Ensure our staff lease car scheme only offers Zero Emissions Vehicles (ZEVs) by 1st September 2022 to ensure the Trusts lease car fleet is 100% ZEVs by 1st September 2025.	
J5	*Charging infrastructure: Install a minimum of 10 electric vehicle charging sockets onsite for staff use and/or patient and visitor use before 1st April 2023. Consider the use of 7kwh or even 3kwh chargers to provide a 'top up' for drivers whilst keeping within the sites electrical load capacity.	
J5	Electric Vehicles: Using insight gathered from the Travel Plan, develop an electric vehicle transition plan with a focus on supporting our staff, patients and visitors to use electric vehicles.	
J6	*Reporting and Tracking: Produce a reliable and consistent monthly KPI report of: O Trusts operational fleet. O Staff lease car scheme. O Grey fleet (staff using personal vehicles). O Public transport use for business miles. Measure the emissions and track this against a defined carbon budget for 2025 with annual interim budgets.	
J7	*Data visibility: Increase the visibility of grey fleet emissions, costs and mileage to teams trust wide through the use of tools like Microsoft Power BI.	
Ј8	*Business mileage expenses: Review business mileage approval policy to incentivise avoidance of unnecessary travel or the use of lower carbon travel modes.	





ICS and SE region

No.	Action	Lead
ווכ	*Charging Infrastructure: Work with our ICS partners to identify opportunities to accelerate the transition to electric vehicles for example mapping charging infrastructure projects of each Trust, create opportunities for shared infrastructure and avoid duplication of provision.	
J12	Public and Active Travel: Link in with local authorities and other NHS Trusts to review public and active travel options for staff, patients and visitors and explore options for reducing the cost of public transport across the ICS.	
J13	East Grinstead Train Station: Improve the connectivity from the train station such as a regular shuttle/bus service, improved cycle routes to reduce road traffic and ease parking issues.	

No.	Action	Lead
J14	Travel Plan: Involve patients and the wider community in the development of our travel plan.	

^{*} Actions to be delivered in 2022/23





Supporting people to make sustainable choices that enhance their wellbeing.

Key success measure to 2025: Improve wellbeing KPIs for staff and volunteers, including staff survey results and reduce sickness absence that is linked to wellbeing.



Our approach

A healthy workforce is key to our ability to deliver high quality care to our patients; and providing a workplace that supports wellbeing is integral to attracting and retaining the rich mix of skills and talent that QVH requires. We recognise that healthy behaviours are sustainable behaviours, and seek to encourage both. Aligning the wellbeing and sustainability agendas will add value and impact to the benefit of staff, patients and our wider community.

As a healthcare provider we recognise that supporting the health of our community is a responsibility we own. Through our Green Plan we will seek to educate, inform and empower people to make different choices that will both reduce their impact on the environment while also improving health.

Our commitments

- We will support staff in trying and adopting new behaviours that improve physical and mental wellbeing.
- We will support the health and wellbeing of our patient community and the reduction of health inequality.



Actions: Queen Victoria Hospital

No.	Action	Lead
W1	*Strategy alignment: Ensure the Health and Wellbeing Strategy and this Green Plan are aligned, and together develop a programme of work to support delivery.	
W2	*Engagement: Develop engagement with teams on wellbeing and sustainability, as well as participating in national physical health challenges such as Cycle September.	
W3	Improving facilities: Ensure that changes to our estate produce an on-going improvement in working environment for staff and the provision of adequate facilities for break and rest periods as well as facilities to encourage home cooked/prepared meals which can be healthier and create less waste.	

No.	Action	Lead
W4	 *Food and nutrition: Develop a Sustainable Food programme aimed at ensuring staff and patients are supported with making high quality, healthy and sustainable food choices at work, 7 days a week. This should include: O Undertaking a review of the catering options at QVH and highlight key opportunities for improvement. This should include consideration of opportunities for home-brought lunches as a more sustainable option (for example through reducing plastic waste). O Improving our vegetarian and vegan meal offerings. O Developing a programme of engagement with staff and patients to promote roll out of the Sustainable Food programme and support healthy, sustainable food choices. O Sharing the best practice 'myth busting' information to help inform and educate staff in healthier/more sustainable eating habits. 	
W5	Outdoor activities: Develop a programme for outdoor spaces to support staff and patient wellbeing at the same time as supporting our Net Zero Carbon objectives. This should include consideration of tree planting schemes, break spaces/space for outside meetings and 'Green Gyms' within the grounds.	

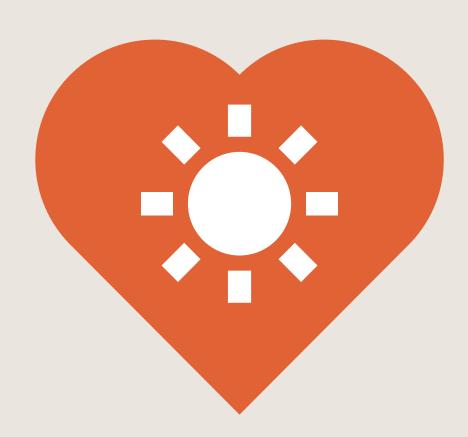




No.	Action	Lead
W6	*Collaborations: Work with our partners across the ICS to identify opportunities for collaboration on staff wellbeing. This could include developing a shared wellbeing metric and running shared sustainable health challenges such as the Step-Up Challenge run by the CWC team.	

No	Action	Lead
W7	Community initiatives: Understand community initiatives around sustainability and wellbeing and identify better ways of connecting with them.	
W8	Communications plan: Develop a communications plan with patients, with a focus on actions to reduce environmental impact and improve health, such as reducing driving to the hospital site.	
W9	*Green space promotion: Signpost and promote use of any on-site green spaces for use by patients and visitors.	

^{*} Actions to be delivered in 2022/23





Building resilience to our changing climate in Sussex.

Key success measure to 2025: Undertake a climate impact assessment and integrate findings into our business continuity procedures and longer term strategic health planning.



Our approach

As the NHS works to mitigate climate change by drastically reducing emissions to Net Zero Carbon, there is also a need to adapt to the consequences it brings – now and in the future. Impacts already being felt across Sussex include an increase in the prevalence of heatwaves and extreme weather events such as flooding. These impacts will increase over time and broaden to other areas including changing patterns of vector, food and waterborne diseases.

We must build resilience to our changing climate in the region – across our estate, services and our supply chain – to ensure we adapt those impacts, as well as working to mitigate them.

Our commitments

- We will work together with NHS partners to identify and map climate change risks within our communities, our services and our estate.
- We will develop an action plan at Queen Victoria Hospital to address climate adaptation.



Actions: ICS and SE region

No.	Action	Lead
CAI	Climate Change Impact Assessment: Undertake	
	a Climate Change Impact Assessment with	
	partners in our local ICSs to understand the	
	impact of climate change on our patients, our	
	services and our estate. This should include	
	linking to existing population health data to	
	identify those communities that are most at risk.	

Queen Victoria Hospital:

No.	Action	Lead
CA2	*Climate Adaptation Plan: Use the information from our Climate Impact Assessment to assess our estate and clinical services for specific climate risks and current responsiveness to extreme conditions. Work with clinical and estates colleagues to develop a Climate Adaptation Plan to help us adapt to those changes and ensure our services and buildings are fit for the future.	
CA3	*Corporate risk register: Ensure climate related risks are added to the corporate risk register for 22/23.	
CA4	*Business continuity: Integrate climate change adaptation into the business continuity planning process.	

No.	Action	Lead
CA5	Future proofing: Work to ensure our buildings are fit for the future with appropriate adaptation measures such as solar shading, sustainable drainage systems, etc, in line with the findings of the Climate Change Impact Assessment.	

No	Action	Lead
CA6	Climate vulnerable mitigation: Work to identify patient groups vulnerable to the impacts of climate change. Work with these groups to identify specific climate risks and define the actions that can be taken by the health system to support mitigation.	

^{*} Actions to be delivered in 2022/23



Enhancing our impact by working with others.

Key success measure to 2025: our sustainability aims and Net Zero Carbon commitments integrated into all key Trust strategies and decision making processes.



Our approach

Delivering sustainable healthcare at QVH will only be possible by integrating sustainability thinking into day-to-day decision making. Working with our staff body and across our Trust will provide synergy and ensure our plans are comprehensive and their implementation effective.

Working with partners outside of QVH is also key. By working together to deliver Net Zero Carbon with other NHS providers, primary care and other stakeholders across our ICS and beyond, we can share learning and best practice, reduce duplication, make the best use of our resources and collectively deliver against our Net Zero Carbon goals.

Our commitments

- O Delivering sustainable healthcare at QVH will only be possible by integrating sustainability thinking into day-to-day decision making. Working with our staff body and across our Trust will provide synergy and ensure our plans are comprehensive and their implementation effective.
- Working with partners outside of QVH is also key. By working together to deliver Net Zero Carbon with other NHS providers, primary care and other stakeholders across our ICS and beyond, we can share learning and best practice, reduce duplication, make the best use of our resources and collectively deliver against our Net Zero Carbon goals.



Actions: Queen Victoria Hospital

No.	Action	Lead
PC1	*Carbon Roadmap: Develop a detailed Net Zero Carbon Roadmap to identify the key interventions required to meet our interim NZC targets for 2025 and 2030. This should include work to further understand our NHS Carbon Footprint Plus and should influence our 12 month delivery plan each year.	
PC2	*12 month plan: Develop a 12-month action plan each year to deliver against this Green Plan.	
PC3	Alignment to healthcare principles: Develop a mechanism to ensure all business cases, projects, programmes and decisions are aligned with (and where possible measured against) our sustainable healthcare principles. This could include a Sustainability Impact Assessment or similar.	
PC4	*Mapping exercise: Undertake a mapping exercise to identify key QVH projects, programmes and strategies and undertake a sustainability impact assessment (or similar) with a view to integrating sustainable healthcare principles. Use this to prioritise key projects/programmes for sustainability input and support.	

No.	Action	Lead
PC5	Governance and delivery: Develop our reporting mechanisms and metrics to ensure effective governance and delivery for this Green Plan. This should include quarterly KPIs and a six-monthly Board report, as set out in the governance section of this document.	
PC6	Metric and principles integration: Ensure sustainability metrics and/or principles are integrated into the specification for and outputs from all quality improvement and transformation projects, or where suitable the focus of the project itself.	

ICS and SE region

No.	Action	Lead
PC7	*Sussex ICS Green Plan: Proactively support the development and delivery of the Sussex ICS Green Plan.	
PC8	Collaboration: Identify priority areas for partnership working within our ICS and the SE region, and develop projects in support of these areas. This should include opportunity for collaboration in some key areas e.g. digital and procurement.	
PC9	Sharing: Actively share our learning as a Trust by engaging on a local and national level with case studies, examples of best practice and other content as appropriate.	



No.	Action	Lead
PC10	*Sustainability views: Work with internal and external patient-focussed groups to understand patient/community views on sustainability and incorporate into our Green Plan.	
PC11	Engagement: Develop a strategy for patient/community engagement on sustainability including detail on how we will engage with local groups over time.	

^{*} Actions to be delivered in 2022/23



Four key areas of focus

We have identified four key areas of focus as key to moving us towards delivery of more sustainable, net zero carbon healthcare and the action plans that follow will detail how these areas of focus will be addressed.

- **A. Refocussing through the pandemic:** we consider how the pandemic has impacted the NHS in terms of sustainability embracing the positives and tackling the negatives.
- **B.** Deeper integration of sustainability into clinical settings across the NHS: with 80% of NHS carbon footprint driven by clinical decisions, reaching Net Zero Carbon by 2040 will require a significant shift in how we deliver care.
- **C. Delivering against the NHS Net Zero Carbon Commitment:** this challenging target will require full focus between now and 2040 with a clear path for delivery.
- **D. Escalating our impact through partnership working:** tackling carbon emissions together maximises the gains we can make and ensure adaptations benefit everyone.



Holding ourselves to account: governance

In Part 1 of our Green Plan, we firmly set our commitment to Net Zero Carbon. Within this document (Part 2) we have detailed what actions we need to take to begin our journey towards delivering on our commitment. Good governance however is the glue that holds this work all together, ensures we track our progress and that we deliver on our actions and commitments. We have set out how we will achieve this in 4 key areas below: Leadership, Accountability, Transparency and Delivery.

Leadership:

- Our Board lead for Sustainability and Net Zero is our Chief Executive
- We will identify a named senior staff member as lead for each of the 8 elements who will be responsible for the delivery of the key success measures and actions within their designated element.

Accountability:

- We will appoint a non-executive director Sustainability and Net Zero Carbon lead.
- Each element lead will provide updates on progress which will be reviewed at each board meeting.
- The board of governors will oversee the progress of the Green Plan holding the board and non-executives leads to account.
- The Green Plan actions will be a standing agenda item at the Committee of Governors meeting.

Transparency:

As a minimum, and with the aim of achieving excellence in reporting for sustainability, we will:

- Deliver regular update reports to Board and the Committee of Governors.
- Gain Board approval for a 12 month sustainability programme action plan each year which will be made publicly available.
- Publicly publish a summary of our progress in our Trust Annual Report.
- Meet the national and regional reporting requirements from NHSEI and For a Greener NHS as they develop.
- Improve our internal reporting structure in more detail, including monthly or quarterly KPIs etc.
- Communicate with staff and patients our Green Plan progress through an engagement programme.

Delivery:

- In addition to leads for each element we will also identify leads for each action who will be responsible for the management and timely delivery of their actions.
- Our Green Plan Group will review progress against the actions under each element, provide support to the task and finish groups and escalate to board where required.
- Where appropriate we will organise staff into working groups to track and deliver more complex projects or workstreams for example a Circular Economy Working group.
- These working groups will report on progress to the Trust's Green Plan Group for assurance and support.
- While much of the green improvements will be driven by willing volunteers, we will make sure that there is adequate funding for the Green Plan where needed, in terms of time and/or money for staff engagement.

Governance structure

