

Hertfordshire Partnership University NHS Foundation Trust

Green Plan

2022-2025







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Foreword

I am really pleased to be able to present our Green Plan for the next three years and to set out how, together, we will manage our environmental impact. Climate change is an existential threat to humanity. Without global action to limit greenhouse gas emissions, the climate will change catastrophically with almost unimaginable consequences for societies across the world.

The work to tackle climate change and reduce carbon footprints and impacts will last for the whole of our lifetimes and the lifetimes of future generations. In 2019, the UK became the first major economy to implement a legally binding net zero target, recognising the risks that we and other countries face. As a major service provider and employer in the UK, the NHS has a significant part to play in our collective efforts to reduce our impact on the climate. It has set two clear and feasible targets for the NHS net zero commitment, based on the scale of the challenge posed by climate change, current knowledge and the interventions and assumptions that underpin this analysis, which are set out in section 2.

As an NHS organisation, we have a clear duty to duty to set and work towards our own carbon reduction targets, reduce our own environmental impact and contribute to the NHS's national target - which is only achievable if every part of the NHS works together.

Climate change will be tackled through a mixture of small, individual actions that we can all take – for example, being careful to recycle materials whenever possible and reducing how far and how often we travel - alongside more significant actions which we will take as a Trust, such as installing renewable energy systems in our buildings and making it possible for our teams to work in a more environmentally sustainable way. At HPFT, we want our people and our service users, their families and carers to feel confident that we are doing our utmost to reduce the impact of our own services, our buildings and how we go about our day-to-day activities. As part of this:

- We want to be able to clearly describe how we are going to reduce our environmental impact as individuals and as an organisation, but without affecting the great care and outcomes we provide
- We want to encourage and support our people to think about the impact they and their teams have on the environment and how, through simple actions, we can all play our part and make a difference

The necessary shift to remote working and remote consultations which we put in place in response to the COVID-19 pandemic has shown us what is possible when we all work together to achieve a step change in how we do things. As a side benefit, it has also helped us reduce travel for staff and service users, saving people time and reducing environmental impact. Although we know that remote working and consultations are not possible or appropriate for everyone, these are the kinds of actions and decisions we need to take together so that we can achieve our carbon reduction footprints.







Over the coming weeks and months, we will be talking to our staff, service users, their families and carers and our partners to help us shape our carbon reduction plans and ensure that we can develop sustainable solutions for the future.

Karen Taylor

Chief Executive, Hertfordshire Partnership NHS Foundation Trust







1 Introduction

1.1 About Us - Hertfordshire Partnership University NHS Foundation Trust

We provide health and social care for over 400,000 people with mental ill health, physical ill health and learning disabilities across Hertfordshire, Buckinghamshire, Norfolk and North Essex. We employ over 3,500 staff who deliver these services within the community as well inpatient settings.

We also deliver a range of nationally commissioned specialist services including Tier 4 services for children and young people, perinatal services and medium and low secure learning disabilities services.

We have operated as a NHS Foundation Trust since our authorisation in August 2007. This gives us opportunities to further build upon and improve the services for our community. Benefits include a stronger involvement with local communities through our members and Council of Governors and the ability to borrow finance to support our capital investment programme.

Our work is driven by a very strong set of values. We provide services which make a positive difference to the lives of patients, service users and their carers, underpinned by choice, independence and equality.

We offer a high quality service and are one of just five mental health trusts to achieve an overall rating of 'Outstanding' from the Care Quality Commission (CQC).

In our last staff survey we were particularly delighted to say that the Trust achieved highly for the theme of safety culture. Increasing numbers of our staff said that the values of the organisation were discussed as part of the appraisal process and once again we scored highly on staff recommending the Trust as a place to work and as a place to receive care.

Our partnerships with other organisations are very important to the way in which we work. We play a full part in the local health and social care economies by promoting greater integration between mental and physical health and social care. These include:

- Local authorities and commissioners We work closely with our local commissioners.
 Our largest contract involves working with East and North Herts CCG, Herts Valley CCG and Hertfordshire County Council to deliver integrated health and social care services.
- Being a University Trust, with close links to the University of Hertfordshire. This provides excellent learning and development opportunities for staff, as well as strengthening clinical research.
- Our participation in the Hertfordshire and West Essex Integrated Care System (ICS) enabling us to work more closely with our partner organisations to improve the services we provide by managing people's health and social care needs together.
- Our regulators NHS England and the Care Quality Commission.







1.2 Green Plan Importance

With the clear goals set by the NHS as a whole within Delivering a 'Net Zero' National Health Service [1], the next step is for each individual Trust and ICS to investigate and plan for their route to net zero. Within the Hertfordshire and West Essex Integrated Care System (HWE ICS) each organisation has been tasked with developing their own green plan. These plans will then be brought together to form a single ICS Green Plan.

HPFT's Green Plan outlines the opportunities and projects that have already been undertaken to make us more environmentally sustainable and friendly. This has involved multiple stakeholders, from staff, department heads, executives and our board members to incorporate everyone's thoughts and vision for the next three years.

In addition to this green plan, which as Figure 1 shows, covers the next three-year period, the Trust has also commissioned the creation of a Net Zero Carbon Roadmap, NZCR, which will provide more detail on the challenges faced and potential options currently available to reduce and ultimately reach net zero on the 'Carbon Footprint' portion of emissions which result from direct Trust activity. The NZCR will cover a much longer period of time, and will incorporate the NHS' wider ambitions for net zero, as outlined in section 2.3 below.

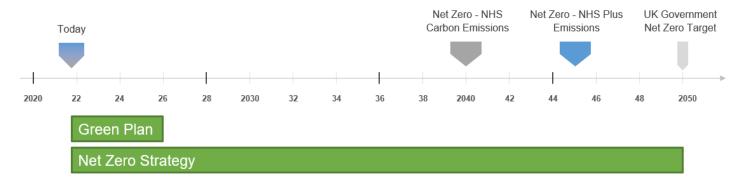


Figure 1: Timelines associated with the Green Plan and NZCR documents

1.3 HPFT's vision and values

1.3.1 Our Vision

Our conversations with service users, carers, staff, commissioners and the wider communities we serve have informed a simple but ambitious vision:

"Delivering great care, achieving great outcomes - together"

We will achieve our vision by:

• Putting the people who need our care, support and treatment at the heart of everything we do - always.







- Consistently achieving the outcomes that matter to the individuals who use our services, their families and carers, by working in partnership with them and others who support them.
- Providing the very best experience of joined-up care in line with what service users and carers have told us makes 'Great Care'.

1.3.2 Our Values

We worked closely with service users, carers and staff to co-produce a values and behaviours framework. The five values chosen to represent the Trust are Welcoming, kind, Positive, Respectful and Professional.

We expect all our staff to adopt these values and demonstrate them in their attitude and behaviour towards our service users, carers and their colleagues. The values form a key part of our recruitment, staff induction and appraisal processes.

Our values & commitments	Our customer care standards		
We are	Everyone is welcoming and approachable		
welcoming so	We will be polite, courteous and friendly		
you feel valued	We always see the whole person		
s an individual	S We value diversity and difference		
	Seeking and giving feedback is important to us		
We are kind so	We offer empathy and compassion		
\$1250 mil 50 mil 10 mil	Kindness and understanding are central to our way of working		
you can feel	We are timely and responsive		
cared for	We are helpful and attentive to your needs		
	We value and appreciate one another		
We are positive so you can feel supported and included	We have a positive, encouraging, 'can do' attitude You will get clear explanations and information We involve people as equals By sharing ideas, choices and decisions we achieve more together You will find us supportive and flexible		
We are respectful	S We promise to listen and to hear		
so you can feel	We respect your privacy and dignity		
listened to and	We make time for people.		
	We aim to be reliable and trustworthy		
heard	We work as a team, with openness and honesty		
We are	• We will be safe, calm and reassuring		
professional so	Our service will be consistent, efficient and well organised		
you can feel safe	We expect professionalism and accountability		
	We aim high and look for creative solutions		
and confident	Everyone here is interested in improving and learning		

Figure 2: HPFTs values & commitments







2 Carbon Emissions

2.1 Calculation Methodology

With clear evidence that climate change is happening now, for example with 17 of the warmest years on record occurring since the turn of the century, rising sea levels of approximately 20cm in the last century or human related impacts, on health, increasing poverty and the impact on the ecosystems us humans rely on [1], action must be taken now to start addressing these issues. There is also clear evidence regarding the cause of climate change; carbon dioxide and other greenhouse gases (GHG), which cause the entrapment of the Sun's energy within the Earth's atmosphere [1], leading to warmer temperatures and the effects outlined above.

The first stage to affecting change in climate change is through the understanding of our current GHG emissions, which provides a benchmark to measure progress over time. The image below provides the scope of the various elements within the wider NHS's carbon footprint, which includes the major emissions produced and the two broad categorisations of emissions of the NHS Carbon Footprint and Footprint Plus.

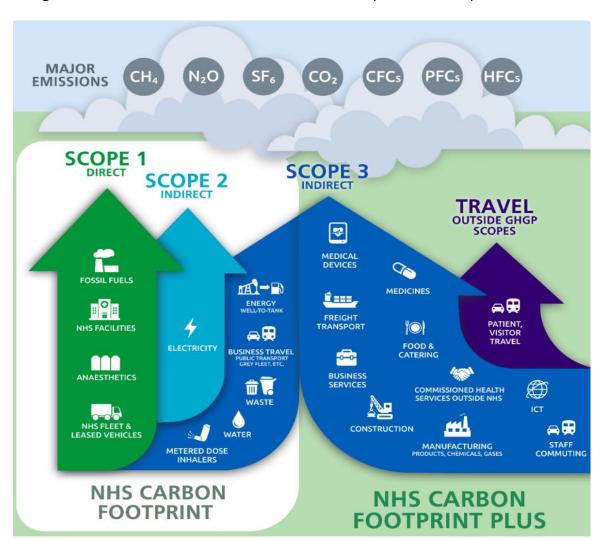


Figure 3: Carbon emissions in the context of the NHS [2]







Utilising the categories outlined within Figure 3, the NHS Delivering a 'Net Zero' National Health Service report [2] evaluated the quantity of carbon emissions associated with each category. This NHS wide average is outlined in Figure 4.

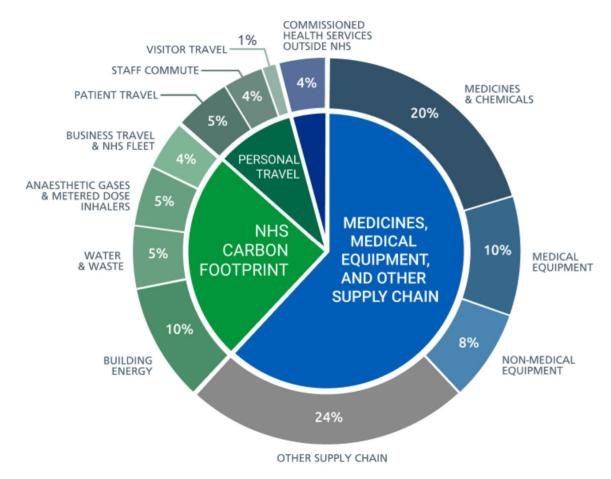


Figure 4: Sources of carbon emissions by proportion of NHS Carbon Footprint [2]

2.2 Carbon Emissions Breakdown

HPFTs 'NHS Carbon Footprint' and 'NHS Carbon Footprint Plus', as defined in Figure 3, have been calculated for the 2020/2021 year and are outlined in Figure 5. The total emissions for this carbon pie have been calculated through the combination of consumption data of utilities like natural gas and electricity, plus operating spend data, which are then combined with UK government and NHS SDU emission factors to calculate the carbon footprint of the Trust.

The total emissions for the Trust have been calculated at $19,920 \text{ tCO}_2\text{e}$, with the direct emissions, as defined by 'Carbon Footprint', being calculated to be $5,431 \text{ tCO}_2\text{e}$. As can be seen, the proportion of emission associated with commissioned health services outside the NHS is a much larger portion of HPFT's carbon pie, this is due to the nature of services provided by the Trust, resulting in the large quantity of operational spending within this broad category.







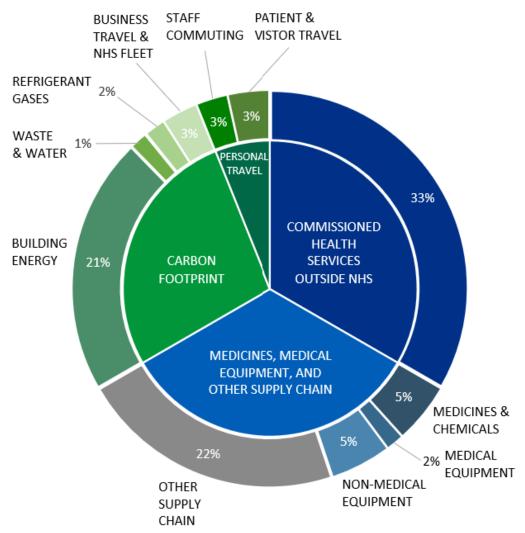


Figure 5: HPFT Carbon Footprint & Carbon Footprint Plus breakdown, 2020/21 year

2.3 Carbon Emission Reduction Targets

Within the document set out by the NHS "Delivering a 'Net Zero' National Health Service" [1], this outlines a number of aims that all Trust's should have which relate to the speed of net zero carbon ambitions for both Carbon Footprint and Footprint Plus sections. These targets are:

- For direct emissions, 'NHS Carbon Footprint', HPFT will endeavour to reach net zero by 2040, with an ambition to reach an 80% reduction by 2028 to 2032;
- For indirect emissions, 'NHS Carbon Footprint Plus', HPFT will endeavour to reach net zero by 2045, with an ambition to reach an 80% reduction by 2036 to 2039.

Further work will be required to quantify the progress in pursuit of the 80% reduction targets as they are to be based against a baseline from the year 1990. The data required to calculate this figure with reasonable certainty is not currently available for the Trust. Because of this lack of data for a 1990 baseline, the Trust has not currently set targets for within this green plan period, but will endeavour to set overarching targets as well as for individual areas, for example waste, transport etc.







3 Areas of focus

This section outlines the areas focused on for the reduction of our carbon footprint and our impact on the environment. Each section will identify the activities already undertaken, contained within the "Previous Works" sections, as well as HPFTs plans for further improvement within the three-year timeframe of this Green Plan, within the "Green Plan Actions" sections.

3.1 Workforce and System Leadership

Overview

Workforce and system leadership is at the forefront of a successful green plan. This is centred around engaging and supporting our workforce while providing the systems that aid delivery of our sustainability goals by ensuring that the necessary skills and equipment are available within the Trust.

We recognise that training will be required, which will vary dependent on job type. For example, the estates and facilities team will require an in a depth understanding of the direct carbon emissions associated with the operation and maintenance of our sites, while clinical staff could support by reducing consumption at point of use by turning off lights or reducing waste associated with their activities.

We also recognise that to motivate support from management and board is essential, and is why this Green Plan has utilised input from all personnel within the Trust, from staff through to executives and the board of directors.

Previous Works

- The possibility of having a sustainability committee in under review
- As stated in our carer plan 2019-2021 we will continue to support our staff through the
 delivery of the green plan by continually improving in the quality and provision of
 support.

- Assign a net zero lead at board level.
- Formalise a network of Green Champions, to help drive emission reduction projects.
- Development of a communication plan to showcase and encourage the work carried out by staff in the aid of net zero targets.
- Review implementation methods for climate change awareness training, through initiatives like event days.







3.2 Sustainable Models of Care

Overview

In 2019, HPFT were recognised as one of only five mental health and learning disabilities NHS trusts in England to be rated outstanding by the Care Quality Commission (CQC). As we continue to build on this achievement, we are developing the way in which we care and are increasing our focus on our impact on the environment without disrupting the quality of care provided.

Previous Works

- Supporting service users sooner rather than later: single Point of Access (SPA) 24/7
 Mental Health Helpline and NHS 111 and select option 2 for mental health services.
 This ensures they get the care they need and recover sooner ensuring efficient use of resources.
- Supporting the "Host Families scheme" which aims to prevent admission in the first instance or where this is not possible, allowing our service users to return home as soon as possible. This enables more efficient use of resources, therefore ensuring that we can care for more within our community.
- Working closely with Herts & West Essex ICS plus local GPs to bring care closer to the home so our service users don't have to travel as far to receive the care that they need.
- Through recognition of aging buildings within the Trust, we are Investing in a new, purpose built 54 bed unit that will serve both the east and west of Hertfordshire.

- Review how care is delivered and develop plans following this review that embed carbon reduction principles within our care delivery strategies.
- Review our current offering of digitally enabled care and create a strategy to utilise available best practice and technology that will increase the efficiency of our operations.
- Provide information on lower carbon interventions and promote this to our service users where clinically relevant.







3.3 Digital transformation

Overview

The Trust has made significant progress in our use of digital technology however we acknowledge that to continue the provision of outstanding care we must further the adoption and utilisation of new methods of care which utilise digital technology. This strategy will comprise one major tool in our aspiration to maintain person centred care and will take advice from NHSX's "What Good Looks Like" framework [4].

Previous Works

- Through the release of our digital strategy in 2019, we outlined our vision for the utilisation of digital technology within the Trust.
- We have empowered our service users and carers through;
 - Offering digital consultations as an alternative to face-to-face consultation via messaging, telephone or video consultations. This minimises travel, therefore reducing carbon emissions and travel time wastage as a result.
 - Offering Interactive Care Plans and Records that are co-produced and utilised by our service providers, carers and care professionals. This helps maximise the use of resources so our service user can get obtain the care required as soon as possible.
 - We have invested in software and incorporated them within our ways of working, which has significantly reduced the amount of physical paperwork and travel time through initiatives like remote working.

- Continue the Trust's efforts in utilisation of electronic communications when sending reports or appointments to patients and GPs etc rather than using paper methods. This will be conducted where possible, with paper options utilised where the patient requires it.
- Instil best practice for staff meetings and trainings as remote first, to minimise waste in areas like time and travel.
- Progress the adoption of digital services for service user video conferencing, as well as with our staff when conducting training or meetings online where possible.







3.4 Travel and Transport

Overview

About 3.5% of all road travel in England can be linked to the NHS: business travel, patient and visitor travel, staff commute and supplier travel. The use of traditional road travel by petrol or diesel driven vehicles produces carbon emissions as well as harmful air pollution. By encouraging the use of low carbon alternatives, we can reduce our impact on both carbon emissions and air pollution.

The NHS released a document in August 2021 titled "Improving non-emergency patient transport services" [3], which detailed the findings of a review into the transportation utilised outside of ambulatory services. Within the document, a new national framework for non-emergency patient transport has been outlined, with one section dedicated to a net zero NHS patient transport sector. This acknowledges the role decarbonising transport will have in the NHS commitment to be net zero by 2040.

Table 1 outlines the targets set within this document to support in achieving this target.

Date	Vehicle emissions targets
From 2021	No immediate changes
From 2023	50% of vehicles used to deliver the contract are of the latest emission standards, ultra-low emission vehicles (ULEV) or zero emission vehicles (ZEV)
From 2026	75% of vehicles used to deliver the contract are ULEV or ZEV, including minimum 20% ZEV
From 2030	100% of vehicles used to deliver the contract are ULEV or ZEV, including minimum 20% ZEV
2035	100% of vehicles used to deliver the contract are ZEV

Table 1: Non-emergency Patient Transport Vehicle Decarbonisation Timeline [3]

Previous Works

- In an attempt to start introducing low emission vehicles into the leased fleet, two fully
 electric vehicles are part of this fleet, with a charging station installed at one of our
 sites to service these vehicles.
- An investigation has been conducted into the type of vehicles leased by the Trust, looking at the age, carbon emissions and suitability of our vehicles. This found;
 - With some of our vehicles being in service for 16 years ('05 plates), and update to the age of the fleet is required
 - Due to the nature of requirements of the vehicles within our fleet, including long ranges due to multiple patient visits per day and wheelchair access provisions, the switch to electric vehicles of these specifications is not currently feasible as these vehicles are not widely available, therefore a move to modern LEV and ULEV diesel vehicles is planned in the short term. These vehicles are due for delivery in 2022.







Green Plan Actions

- Investigate, alongside the estates department, the feasibility of installing charging points at more of our buildings, so enable electric vehicle charging at a wider number of sites.
- Continue development of a Trust-wide fleet programme, including research into potential of suitable electric vehicles for the fleet's specific demands, to meet the timeframes outlined in Table 1.
- Investigate the possibility of utilising other low carbon forms of transport within the Trust, for example electric bicycle provision.
- Provision of only ULEVs and ZEVs within staff car salary sacrifice schemes.
- Appointment of a Trust "cycle-to-work" lead, to aid in the uptake of this zero-carbon transport method.
- Implementation of a staff salary sacrifice cycle-to-work scheme.
- Development of a plan outlining the Trust's approach to improving air quality, through supporting active travel and participation in the anti-idling cleaner air hospital framework.

3.5 Estates and facilities

Overview

One of the major challenges facing the UK in its journey towards decarbonisation, including the NHS, is in the way in which we heat our buildings. This is in part due to the number of older buildings which contain poor levels of insulation, as well as our reliance on fossil fuels to provide this heat. Building energy accounted for 21% of the total 2020/21 carbon pie, with 10% of that resulting from natural gas consumption to produce heat.

Whilst the UK is decarbonising electricity rapidly this alone is not enough to support our target of 80% reduction by 2032 as well as the NHS's net zero target of 2040, and therefore targeting the use of fossil fuels for heating and hot water is critical.

Previous Works

- Part of the Trust's capital budget has been allocated for utilisation by the estates department on building infrastructure and fabric improvement related projects.
- The estates department has been merged with Hertfordshire Community Trust, to allow cross-Trust knowledge and resource sharing.
- The Trust has outlined a zero waste to landfill ambition, with reductions in the quantity of waste to landfill reducing significantly over recent years.
- Introduction of low carbon building standards. The new 54 bed building within the Trust is being constructed with electrified heating via air source heat pumps, therefore no natural gas heating.







- Increased monitoring of the consumption of electricity, gas, water and waste has resulted in understanding of consumption and the reduction of waste.
- When old gas boilers reach their end of life, the replacement boilers fitted have grade A efficiency ratings and have been connected into the existing BMS systems.

Green Plan Actions

- Invest in further expertise within the Trust, through the potential appointment of a head of sustainability.
- The existing estates strategy will be updated to reflect the changes that have occurred during and post the COVID-19 pandemic.
- Determine additional energy consumption reduction and optimisation projects throughout the Trust, for example the electrification of heat through heat pumps, or the replacement of old lighting with LED fixtures.
- The Trust will aim to purchase electricity from 100% renewable sources by April 2022.
- Engage waste, maintenance and other suppliers to engage with low carbon policies and support them in the realisation of these policies.
- Working alongside the ICS procurement department, engage suppliers to reduce their single use plastic packaging, to support the zero waste to landfill ambition.
- Creation of an estates plan which aligns deliverables to those within the Estates
 Delivery Plan published on FutureNHS in 2021. The actions contained within will
 include replacing lights with LED, renewable energy generation and others, including
 the installation of solar photovoltaic panels on the roof space of the new 54 bed
 building.

3.6 Medicines

Overview

Medicines are an area of significant challenge to the whole NHS, not only through their direct use but also the emissions associated with their manufacture, shipment and other supply chain factors. Across the whole NHS, medicines account for 25% of emissions; 2% for anaesthetic gases, 3% for inhalers and 20% of emissions within the supply chain [2].

At HPFT, the emissions related to medicines are comparatively smaller than the NHS average, a major reason is that we are a smaller organisation compared to large Acute trusts. The Trust has a low consumption of anaesthetics and when utilised, no desflurane is consumed. However, we have a footprint associated with the prescription of inhalers, the majority of which are not the low carbon option. This is largely due to this being a physical health medicine which is initiated by the GP or a respiratory specialist. Therefore, as a Trust we continue care on their current prescription as the Trust prescribers are not respiratory specialists. Changing inhalers to low carbon alternatives needs to be a shared decision-making process between the GP/ Respiratory specialist and the patient.







Previous Works

- Delivery of Clozapine has been moved to an external agency, this has allowed the Trusts' pharmacy and medicines optimisation team streamline efficiencies, with more time spent on other more complex tasks.
- Creation of a procurement role supporting the department, who will be tasked with investigating ways in which waste within the supply chain can be reduced.
- Improved methods have been put into place to reduce the number of expired medicines in the dispensary and on the wards and therefore reduce wastage.
- Sevoflurane is used in the small number of instances where anaesthetics are required.

Green Plan Actions

- Carry out an investigation into the quantity of medicine waste within the Trust, to quantify waste via examples like unused medicines and unnecessary dispensing, to understand our current situation and how best to reduce this wastage.
- With the planned introduction of EPMA across the Trust this will support the reduction of medicines wastage and provide more efficient processes for ordering medicines from the dispensary.
- By assessing re-order levels on the pharmacy system, the aim is to reduce, where possible, the number of deliveries of medicines from certain wholesalers/suppliers.
- Engage suppliers to understand their net zero policies.

3.7 Supply chain and procurement

Overview

With the vast majority of emissions associated with HPFT coming within the wider scope 3 area of supply chain related emissions, significant focus will be given to this area of operations. Broadly, there are three ways of reducing emissions from the supply chain: efficient use of supplies; utilisation of low carbon alternatives and product innovations; and through engaging suppliers to ensure they understand their emissions and support them in ways in which they can reduce them [2].

Previous Works

- In August 2021, HPFT merged its procurement department with three other local Trusts. The Hertfordshire and West Essex ICS NHS Procurement Service, hosted by West Hertfordshire Hospitals NHS Trust, providing transactional, tactical, strategic and materials management services to the Trusts.
- The merger of the four Trusts procurement teams will enable increased buying power and a wider reach on sustainability topics with the suppliers.
- HPFT now purchases only 100% recycled paper.







Green Plan Actions

- Continue supporting the new procurement service in establishing new internal structures, procedures and policies.
- Conduct further work into understanding the emissions and waste, including single use plastics, from our supply chain.
- Support suppliers with the development of their net zero policies and the projects they carry out to achieve waste and emission reductions.
- Inform suppliers and adhere to the commitments in the supply chain roadmap announced at the NHSE/I Sept 2021 board, which includes the inclusion of a 10% minimum social value weighting from April 2022.

3.8 Food and nutrition

Overview

Food production and consumption is a significant contributor to the UK's carbon footprint, accounting for approximately 25% [5]. HPFT acknowledges the importance of this area and the need to reduce our impact through food consumption, which has resulted in significant focus and progress in recent years, with more improvements to come.

Previous Works

- The Trust ensures that all meals served at least meet if not exceed the relevant NHS guidance regarding nutritional value.
- The implementation of digital meal ordering, combined with a seasonal menu, has significantly reduced food waste as well as minimising the carbon emissions associated with meal delivery.

- Further focus on food waste reduction, through the supply chain, preparation and consumption by the service user.
- Continue to maintain all standards regarding nutritional criteria for all meals served, and look at exceeding to ensure best practice where possible.
- Develop low carbon menus, which include healthier low carbon choices and with emission figures provided for each meal option.
- Minimise and ultimately eliminate single use plastic within delivered meals.







3.9 Adaptation

Overview

Adapting current working spaces to incorporate green spaces is a key part of HPFTs Green Plan. This conclusion is made through widely available data regarding the health benefits which include reduced stress levels, promotion of an increased rate of physical recovery for patients, social advantages through the creation of green spaces, environmental benefits through creating wildlife habitats and the sequestration of carbon, financial benefits through reduced maintenance bills and the improvement in staff moral and well-being which is ultimately reflected in reduced absenteeism [6].

Previous Works

- HPFT conducted a review in 2013, which at the time, major incidents and business continuity plans made reference to and planned for risks outlined at the time based on the available evidence.
- This review involved the creation of plans for each individual Trust site.

- HPFT aims to name an adaptation lead by April 2022.
- The Trust will review the risk register to ensure the inclusion of mitigations for the risks and effects of climate change and severe weather conditions on its business and functions.
- This will include specific plans on mitigating flooding and heatwave effects on HPFTs infrastructure, patients, and staff where sites are identified as being at risk.
- Engage the local council, public and private sector bodies to encourage plans to improve local biodiversity and green space creation.
- Update the overall Trust and individual site major incident and business continuity plans.







4 Green Plan Governance

The creation of this Green Plan has been conducted in line with NHS England guidance [7] and going forward it will also follow this guidance in relation to the updating of actions contained within each focus area, resulting in an annual update and refresh of the document.

The process by which that the initial creation, approval and release of this document followed is outlined in Figure 6 below. Not only has the initial development of the Green Plan has followed this process, each update of this document will also follow this same structure. The Trust will aim to update this document annually ahead of the final rerelease at the end of the three-year period this document covers.

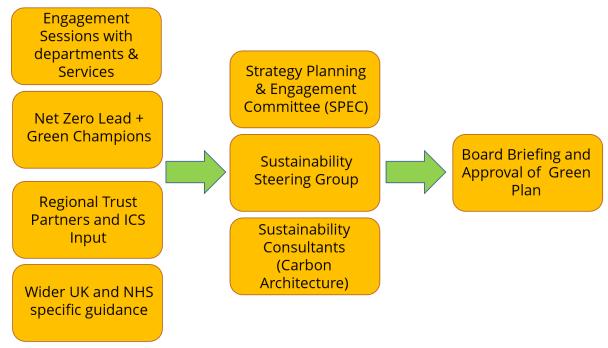


Figure 6: Green Plan creation and approval pathway







5 References

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