

Sustainability

Green Plan 2021- 2025



Putting you first

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Foreword

Unchecked, West Suffolk NHS FT has the potential to cause harm to people's health and to our environment, even as we go about our business of helping people get better.

The NHS is one of the largest employers and users of resources in the world, and as such it has an environmental and social impact which, if unsupervised, can do a lot of damage. It is no exaggeration that climate change has been named the biggest global health threat of the 21st century. Even in west Suffolk, the way the Trust operates can have a negative effect, by contributing to air pollution, landfill, traffic danger and so on.

But let's turn this on its head: the preventative power that operating with attention to our environmental and social footprint offers is enormous. By buying food and other supplies close to home, we support the local economy. Our student volunteer programme, clinical shadowing and work experience programmes will restart in 2022, following a pause during the height of the pandemic. Through these programmes and our comprehensive apprenticeship and training programmes we improve the work and training prospects of young people and of our existing staff. By encouraging people to travel to our sites on foot, by bike or by public transport, we help them enjoy the massive benefits physical activity brings. In all these ways and more, we can have a positive impact on the wider determinants of health throughout our local, national and international communities. And as if that wasn't enough, it can also save the Trust money - meaning we can continue to invest every available penny in patient care.

A truly sustainable health system is defined as working within available resources, to protect and improve health, now and for future generations. We believe that description is not just compatible with the Trust's ambitions – **first for our patients, first for our staff and first for the future** – but that it underpins them.

This plan describes the action we will take. It will evolve over time as we achieve our goals and set ourselves even more ambitious targets.

We are committed to playing a leading role in securing a healthy and sustainable Suffolk.

Sheila Childerhouse, chair

Craig Black, acting chief executive officer

November 2021

Costello A et al. Managing the health effects of climate change. 2009 Lancet Commission on Health and Climate Change. Lancet. 2009; 373: 1693-73

Watts N et al. Health and climate change: policy responses to protect public health. 2015 Lancet Commission on Health and Climate Change. Lancet. 2015; 386: 1861-1914

The Sustainable Development Strategy for the NHS, Public Health and Social Care system 2014-2020.

Introduction

The West Suffolk NHS Foundation Trust (WSFT) provides hospital and some community healthcare services to people mainly in the west of Suffolk, and is an associate teaching hospital of the University of Cambridge.

The Trust serves a predominantly rural geographical area of roughly 600 square miles with a population of around 280,000. The main catchment area for the Trust extends to Thetford in the north, Sudbury in the south, Newmarket to the west and Stowmarket to the east. Whilst mainly serving the population of Suffolk, WSFT also provides care for parts of the neighbouring counties of Essex, Cambridgeshire and Norfolk.

As part of this we provide community services in the west of Suffolk, but also some specialist community services across the county. This includes the delivery of care in a variety of settings including people's own homes, care homes, community hospital inpatient units and clinics, day centres, schools, GP surgeries and health centres.

The Trust one of the largest employers in Suffolk, employing nearly 5,000 staff.

Our vision is to deliver the best quality and safest care for our community.

Our sustainable development mission statement is:

"West Suffolk NHS Foundation Trust will distinguish itself by making sustainability a part of all we do. In partnership with patients, staff and the local community, our plan captures the social, environmental and economic impact of our actions."



Drivers for change

- **Legislative requirements**
 - ⇒ Climate Change Act 2008
 - ⇒ Public Services (Social Values) Act 2012
 - ⇒ The Paris Agreement 2016
- **Mandatory requirements**
 - ⇒ Standard form contract requirements
- **International guidance**
- **UK guidance**
- **Health specific requirements**
 - ⇒ Delivering a net zero National Health Service
- **Staff and public perception and expectation**
 - ⇒ Raised expectations and social pressure linked to the Blue Planet documentaries
- **COP26.**

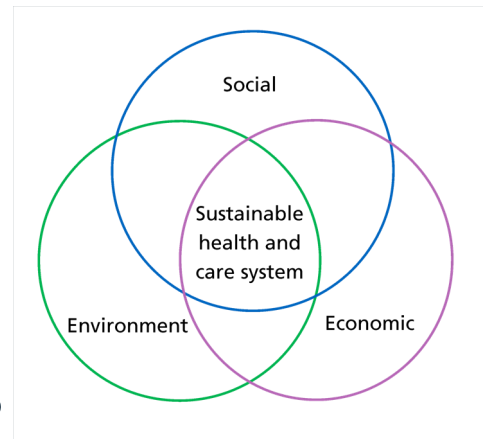


What is sustainability?

"Sustainable development is development that meets the needs of the present without compromising the ability of future generations to meet their own needs."

Brundtland Report 1987

The Climate Change Act (2008) gives the Government power to introduce measures to achieve carbon reduction and mitigate and adapt to climate change. It sets out legally binding targets to reduce Co2 emissions by at least 100% by 2050 against a 1990 baseline. All public sector organisations are required to develop and implement a plan to meet these targets.



"The NHS is committed to providing best value for taxpayers' money - it is committed to providing the most effective, fair and sustainable use of finite resources. Public funds for healthcare will be devoted solely to the benefit of the people that the NHS serves."

NHS Constitution commitment no.6

For a Greener NHS was launched in January 2020 to build on the great work being done by trusts across the country, sharing ideas on how to reduce the impact on public health and the environment, save money and – eventually – go net carbon zero. <https://www.england.nhs.uk/greenernhs/>

The NHS has already significantly reduced carbon emissions, but through the 'For a Greener NHS' programme action will be accelerated.

Two clear and feasible targets emerge 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:

- for the **emissions we control directly** (the NHS Carbon Footprint), **net zero by 2040**, with an ambition to reach an 80% reduction by 2028 to 2032 from a 1990 baseline, equivalent to a 47% reduction from a 2019 baseline
- for the **emissions we can influence** (our NHS Carbon Footprint Plus), **net zero by 2045**, with an ambition to reach an 80% reduction by 2036 to 2039 from a 1990 baseline, equivalent to a 73% reduction from a 2019 baseline.

(Delivering a 'Net Zero' National Health Service October 2020)

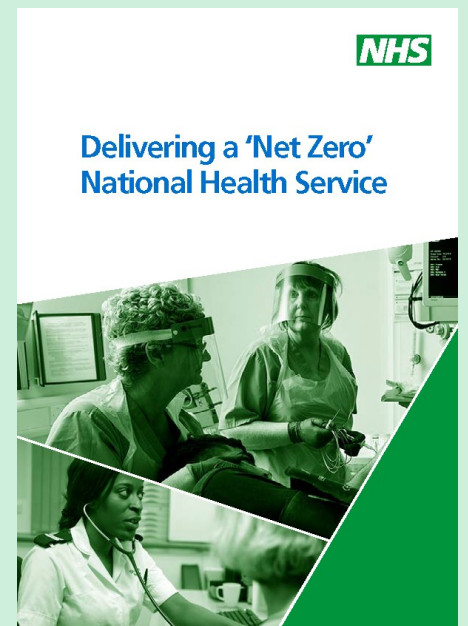


What is sustainability?

Delivering a 'Net Zero' National Health Service (October 2020)

This report provides a detailed account of the NHS' modelling and analytics underpinning the latest NHS carbon footprint trajectories to net zero and the interventions required to achieve that ambition. It lays out the direction, scale and pace of change. It describes an iterative and adaptive approach which will periodically review progress and aims to increase the level of ambition over time.

<https://www.england.nhs.uk/greenernhs/wp-content/uploads/sites/51/2020/10/delivering-a-net-zero-national-health-service.pdf>



The following interventions should be considered as a minimum that the Trust will have ensured by the end of 2021/2022:

2021/22 NHS Standard Contract

1. Every trust to ensure a board member is responsible for their net zero targets and their Green Plan. Similarly, every integrated care system (ICS) is asked to designate a board-level lead to oversee the development of their own Green Plan.
2. Every trust to purchase 100% renewable energy from April 2021, with supply contracts changing as soon as possible.
3. Every trust to reduce its use of Desflurane in surgery to less than 10% of its total volatile anaesthetic gas use, by volume.
4. Every ICS to develop plans for clinically-appropriate prescribing of lower carbon inhalers.

Delivering a Net Zero National Health Service

5. Ensure that, for new purchases and lease arrangements, systems and trusts solely purchase and lease cars that are ultra-low emissions vehicles (ULEVs) or zero emissions vehicles (ZEVs).
6. Develop a green travel plan to support active travel and public transport for staff, patients and visitors.

2021/22 NHS planning guidance

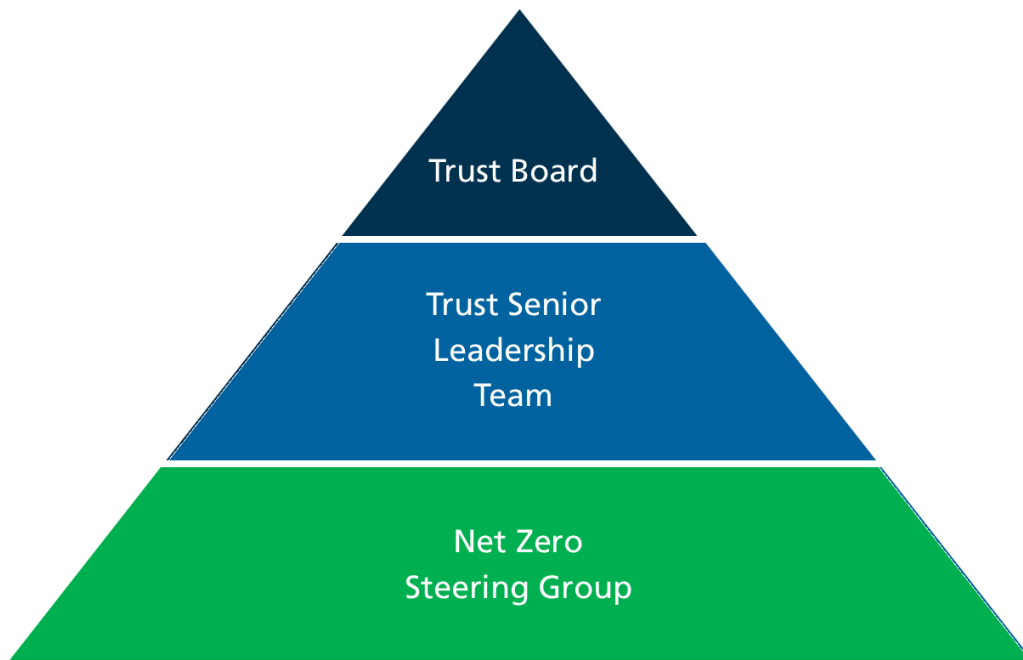
7. Where outpatient attendances are clinically necessary, at least 25% of outpatient activity should be delivered remotely, resulting in direct and tangible carbon reductions.

Focus areas

Workforce and system leadership

Leadership and governance

The Net Zero Steering Group (NZSG) is made up of representatives from across the Trust. It is responsible to the Trust Board through the Trust Senior Leadership Team for the delivery of plans designed to reduce the carbon footprint of the Trust to meet nationally set targets.



Co2e emissions across all utilities, water and waste streams are recorded and provide public disclosure of performance via the Department of Health in the Estates Returns Information Collection (ERIC). Energy consumption and CO2e emissions are benchmarked using ERIC data.

Progress towards completing Green Plan actions will be reported at the quarterly NZSG meetings and in the annual Sustainability Report. NHS data collections will be submitted quarterly or as appropriate.

NZSG membership

- Executive director of resources and deputy chief executive
- Deputy chief operating officer
- Associate director of estates and facilities
- Business analyst (finance)
- Head of procurement
- Catering and community facilities manager
- Deputy chief nurse
- Communications manager
- Travel and sustainability manager
- Estates energy and waste officer
- Emergency planning and resilience manager
- Capital projects manager
- Chief pharmacist.

Focus areas

The Trust is one of the largest employers in west Suffolk, employing nearly 5,000 staff. Developing the knowledge and expertise of our workforce around sustainable development is key to meeting the Trust net zero ambitions, which will benefit staff, patients and the wider community as well as the local environment.



Trust staff involved with delivering net zero outcomes are encouraged to join the sustainability workspace on the FutureNHS Collaboration Platform and to access resources provided by the Greener NHS Team.

Pre-Covid the communications plan included monthly articles relating to progress in each section of the sustainable development management plan in the Green Zone section of the weekly staff newsletter. Communicating the details of the Green Plan with staff is essential to ensuring that actions and ambitions are realised. Communications from the national Greener NHS Team can also be shared in the Green Zone.

The Trust is part of the Integrated Care System (ICS) Sustainability Group, working with other NHS organisations to develop a regional plan and to share good practice.

The Trust continues to work with the East of England Regional Sustainability Network. The focus of the regional workstreams in 2021 are:

- Reducing plastics - working with Axion Ltd and PA Consulting on a project to identify the top 200 items used in hospitals and to identify ways that the waste associated with them can be reduced, and value retained and returned to the manufacturing supply chain
- Developing a carbon literate workforce - working with the Carbon Literacy Project to support them to develop training. This will be available free of charge to all public healthcare organisations.

The Trusts is also represented at:

- NHSEI exemplar catering group
- HEFMA
- Energy managers group
- National Performance Advisory Group (NPAG) waste management group
- NPAG car parking and sustainable transport network.

Membership of these groups allows the Trust to share and learn from examples of good practice across the NHS.

Focus areas

West Suffolk NHS Foundation Trust is a key **Anchor Institution** within the local community. Anchor Institutions refer to 'large, typically non-profit, public sector organisations whose long-term sustainability is tied to the wellbeing of the populations they serve. Anchors get their name because they are unlikely to relocate, given their connection to the local population, and have a significant influence on the health and wellbeing of communities.' (1) The priorities outlined in this Green Plan strongly align to the key principles of Anchor Institutions, particularly those focusing on promoting environmental, economic and social sustainability.

(1) *The NHS as an Anchor Institution. The Health Foundation. 2019. Available at:*

<https://www.health.org.uk/news-and-comment/charts-and-infographics/the-nhs-as-an-anchor-institution>

Sustainable models of care

Sustainable models of community care are a focus for the range of community specialities within WSFT. Staff are currently planning or implementing a range of interventions which include :-

Implementation of a patient scheduling tool within community visit allocation. This software details patient geography and factors the most efficient route for staff travel. This negates the need for excess mileage covered. The tool also prevents duplication of visits and excess mileage so a sustainable approach can be a factor within the thousands of community visits completed yearly. We anticipate this will have a significant impact on the reduction of the teams carbon footprint moving forward.

Clinical staff can commence their journey to the patient home from their home address. This further reduces the office footprint. All community space employs a hotdesking approach which allows community teams to reduce their office environment floor capacity requirements with the subsequent environmental benefit.

Usage of digital technology has also been driven forward during the covid period. Team meeting and support are widely utilising this technology in community settings. This reduces the need to utilise transport in multiple situations.

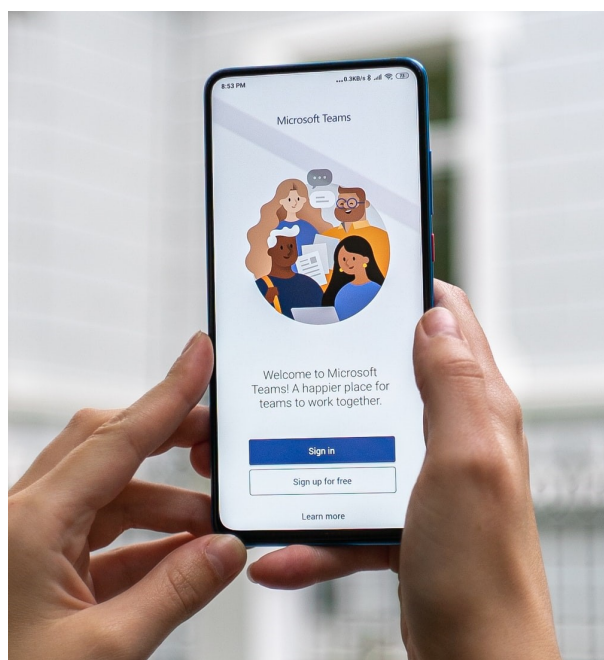
Patient Digital outreach into care homes and private homes is also implemented where possible and viable, again reducing teams footprint and enhancing sustainability.

Utilisation of medical supplies has also been a focus area with a focus on waste reduction. Agreed stock level checks are maintained at base and within patient homes to ensure excess stocks(dressings etc) are not held and potential for waste increased.

Digital transformation

The Trust is committed to aligning its digital programme to the green agenda and in particular supporting net zero ambitions. The understanding of exactly how much impact digital opportunities can have is developing and we are learning from national programmes and initiatives. Some examples of work that are already in train and how they support the net zero ambitions are given below. The digital team commits to working to the ethos of always considering the green impact of any digital initiatives and therefore we expect this list to expand as we move forward and as our learning and understanding of the opportunity matures.

- Move to low power thin client devices running a virtualised desktop will reduce overall power consumption
- Introduction of more cloud services where services are hosted off site in highly efficient and optimised data centres ([Aiming for more than just net zero | Azure blog and updates | Microsoft Azure](#))
- Looking to reduce our carbon footprint through use of technologies that will mean the patient can be seen and/or monitored remotely. This will include telehealth, virtual consultations and continued implementation of Microsoft products (such as MS Teams) to support staff to work remotely and to avoid travelling to face-to-face meetings.
- Using technologies to support people's (patients and staff) health and wellbeing which in turn will support them to remain well and require fewer health services. These technologies will include educational programmes, patient portals and apps.
- As part of procurement, seeking assurance from providers on their sustainability approach.



Focus areas

Travel and transport



The Trust is committed to reducing the impacts of our travel and transport. We can improve local air quality and improve the health of our community by promoting active travel – to our staff and to the patients and public that use our services.

Every action counts and we are a lean organisation trying to realise efficiencies across the board for cost and carbon (CO₂e) reductions. We support a culture for active travel to improve staff wellbeing and reduce sickness. Air pollution, accidents and noise all cause health problems for our local

population, patients, staff and visitors and are caused by cars, as well as other forms of transport.

Travel Expenses Policy PP(19)367

[http://staff.wsha.local/CMSdocuments/TrustPolicies/PDFs/351-400/PP\(19\)367-Travel-Expenses-Policy-v4-\(2\).pdf](http://staff.wsha.local/CMSdocuments/TrustPolicies/PDFs/351-400/PP(19)367-Travel-Expenses-Policy-v4-(2).pdf).

The Travel Plan is reviewed annually and the Trust encourages staff to take part in the annual Suffolk Travel Survey by publishing links and information in staff communications.

2021-2022 Trust lease vehicles

Ensure that, for new purchases and lease arrangements, the Trust solely purchases and leases cars that are ultra-low emissions vehicles (ULEVs) or zero emissions vehicles (ZEVs). There are 67 Trust lease pool vehicles which will be replaced with ULEVs or ZEVs over the next four years as they become due for renewal.

No idling

From April 2021 we will include a no engine idling requirement on patient transport contracts, including taxis and ambulances.

Taxi services contract August 2021 - July 2024: No Idling Policy

The incumbent contractor has a fleet of 76 cars, 64 private vehicles, 12 Hackney licensed cars and 25 specialist wheelchair cars. Of these, 20 vehicles are equipped with a manufacturer's anti-idling function, including all their electric and hybrid vehicles and most of their other newer vehicles. Two brand new fully electric vehicles have recently been added to the fleet.

Future plans involve replacing vehicles not equipped with an idling functionality. The contractor is also committed to purchasing more purely electric vehicles as their range increases and envisages only using hybrid and electric vehicles by the early 2030s, and aims to be fully electric well before 2035.

Focus areas

Electric vehicle charging points are available on site for staff and public use. There are three dual charge points providing charging for up to six vehicles, four x 7kw fast chargers and two x 22kw fast chargers.

- 2021– 2022 Feasibility study to increase number of EV charging points for Trust/private vehicles
- 2022-2023 Phase 1 of project to increase EV charging points
- 2023-2024 Phase 2 of project to increase EV charging points.

Fleet review 2022 –2023: arrange a fleet review with the Energy Saving Trust/Carbon Trust.

Business mileage data (Agenda for Change and junior doctors)

	Mileage	tCO2e*
2019-2020	574,593	160
2020-2021	402,668	111

2022-2023: Revisit grey fleet mileage reimbursement based on CO2 emissions of vehicles. Capture CO2 savings from new ways of working such as the increased use of remote appointments, using the Out Patient Transformation benefits calculator.



Estates and facilities

This section captures the reduction in energy consumption and the methodology for moving towards a Net Zero Carbon (NZC) position where possible within the confines of the existing estates and facilities infrastructure. In addition, we continue to work to reduce the impact of the organisation from a waste perspective to support both local and global emissions.

Energy

Despite an increase in the electricity consumed over the past five years of 30% (4,032,393kw/h 2015-16; 5217,833kw/h 2020-21), we have seen a reduction in carbon emissions over the same period of 16%. This is largely due to the decarbonisation of the grid. We have seen a similar increase in gas consumed over the period. Both of these are as a result of two important factors:

1. Increase in site activity seeing areas occupied more frequently, specifically heavily serviced areas such as theatres and endoscopy
2. Hotter summers and colder winters with the need to temperature control.

The irony of point 2 being as a result of climate change and perpetuating is not lost on WSFT.

Partly in response to this, the Trust has moved to a 100% renewable electricity tariff as of 1 April 2021, to ensure that where we are using energy we do so from the most sustainable source economically available.

The Trust has a combined heat and power plant which utilises gas. As yet 'green' gas is not commercially viable or economically available.

The Trust is committed to continually improving its energy performance as outlined in the energy policy.

The Trust has undertaken a feasibility study into the decarbonisation of heating at Newmarket Community Hospital, which explored the possibility of air source heat pumps, solar PV and demand reduction options. This will go on to inform future projects at the hospital. The Trust will consider future decarbonisation grants or loan opportunities launched by the Government in conjunction with Salix.

The Trust has recently completed the installation of LED lighting at its West Suffolk Hospital (WSH) location. The Trust is committed to installing LED lighting in all new build projects and refurbishments going forward to reduce energy demand. This will be included within the WSH standard specification. Where products cannot be supplied with LED-type luminaires a low energy alternative will be agreed.

Focus areas

The Trust has a total of three solar PV systems across its West Suffolk Hospital site, with a recently installed 34KWP on the G10 project which will provide an estimated 28,592kWh per year. The Trust will consider solar PV on all future new builds across our estate. This will be achieved at the design phase, when a cost benefit analysis will be carried out. As part of this analysis a full review of alternative technology will be reviewed to establish the most efficient method of delivering a service, such as, lighting, power and HVAC.

The Trust will commit to quarterly energy efficiency communications with a view to promote sustainable energy efficiency behaviours Trust-wide.

Waste and the circular economy

The Trust is committed to applying the waste hierarchy in relation to waste management as outlined through our Waste Policy.

The following processes are currently in place within the Trust which seek to reuse products no longer required:

- Warp It reuse platform
- Partnerships with medical auction companies to sell on redundant medical equipment for reuse.

The Trust aims to increase the amount of medical equipment disposed of via auction companies over the duration of this Green Plan as per the waste hierarchy and circular economy principles.

The Trust seeks to segregate waste where reasonably possible to increase our recycling rate. We currently have the following recycling streams:

- Food
- Plastic
- Cooking oil
- Metal
- Paper
- WEEE
- Cardboard
- Glass
- Textiles
- Toners
- Batteries.



The Trust is in the process of introducing a pallet recycling stream which will provide a significant cost saving and reduce the carbon intensity of this stream. Where possible, pallets will be back hauled via the original delivery company.

Focus areas

The Trust aims for a recycling rate of 30% of total waste over the course of this Green Plan at the West Suffolk Hospital location.

Currently, the majority of healthcare waste produced is sent for incineration at high temperature. The Trust is in the process of ensuring that healthcare waste is segregated correctly by rolling out the offensive waste stream. This will allow us to eventually reduce the carbon emissions associated with soft healthcare waste disposal by making use of the alternative disposal option available for this stream.

Over the coming years, work will be carried out to reduce the amount of waste we produce and to explore the possibility for further reuse and closed loop recycling opportunities.

Green space and biodiversity

The Trust is committed to maintaining green space and biodiversity across its estate. The West Suffolk Hospital is fortunate to be positioned in a well-established location comprising of considerable areas of green space. The Trust currently undertakes a number of initiatives and maintenance tasks to maintain and improve the green space and biodiversity, such as:

- Bury in Bloom
- Maintaining wild tree belts
- Annual tree surveys
- Protection of hedge cutting during nesting seasons
- Protection of active badger sets on site
- Protection of active bat foraging corridors
- Site-wide ecology surveys
- Tree and root protection
- Wildlife habitat boxes
- Composting
- Inclusion of planting/ landscaping within capital developments.



WSFT is part of the NHS New Hospitals Programme, being made largely from a RAAC construction which is time-limited. As such, the opportunity to make long-term investment is limited.

Notwithstanding, approximately 25% of the estate will be retained as part of the New Hospital Programme (NHP) and there will be a clear focus on work to:

1. Develop a plan on how to provide heating through low temperature hot water (LTHW) and the transfer from plate heat exchangers to air source heat pumps
2. Establish the options for managing the flow of water temperature whilst using heat as the primary means of control in line with L8

Medicines

WSFT has utilised a number of strategies to reduce medication wastage and duplication of supply. The following processes are well established in the Trust:

- Reuse of patients' own medicines on admission
- One stop dispensing
- Avoidance of dispensing on discharge if patients have sufficient supply at home
- Return and reuse of stock and temporary stock items issued to clinical areas where storage conditions can be guaranteed.

Services that have been implemented more recently and are being embedded in clinical practice are:

- Medicines optimisation to avoid unnecessary polypharmacy, e.g. increased use of the Discharge Medication Service provided by community pharmacies
- Supporting virtual clinics through the provision of a home delivery service (or close to home dispensing and pick-up service) for medicines prescribed at the virtual appointment
- Homecare delivery of high cost drugs
- Reduction in pharmacy and medicines management staff travel by use of virtual meetings for off site meetings.



The pharmaceutical supply chain has taken some steps to reduce packaging waste. These actions include:

- Wholesalers delivering in reusable plastic totes (returned to supplier on next delivery) or recyclable cardboard boxes (recycled via Trust recycling waste stream)
- Bulk fluid delivery on reusable pallets (collected by the supplier on their next delivery).

Further action is required in the following areas:

- Reduction in the use of aerosol inhalers and the use of inhaler recycling schemes. Unfortunately, the previous pharma sponsored GSK recycling scheme closed in 2020. The Trust respiratory and CCG/ICS respiratory formulary requires detailed review to ensure that appropriate patients are moved from aerosol inhalers to dry powder devices where possible. This will require the input of the specialist respiratory team in conjunction with agreement with the CCG prescribing leads

Focus areas

- Anaesthetic review of use of Desflurane. Aim for Trust usage of Desflurane to be less than 10% of Trust total of volatile anaesthetic (current Desflurane usage is between 10.7% and 11.4% of usage). In order to achieve the target reduction there will need to be active participation from the anaesthetic department to ensure that Desflurane use is minimised where possible. Scavenging devices may be required to further limit the effects of volatile anaesthetic gases on the environment
- Consideration of how the Trust can reduce its use of nitrous oxide gas or implement sustainable scavenging or catalytic destruction systems. This will require involvement from the anaesthetic and Trust facilities
- The pharmacy team currently uses a significant number of single use plastic bags to facilitate the safe and effective delivery of medicines to patients. In order to move to a more sustainable product, issues of cost pressure and difficulty in obtaining suitably robust large paper carrier bags to support moving from plastic dispensing bags to paper bags must be addressed.



Focus areas

Supply chain and procurement

The Trust recognises that the procurement of goods and services has a large impact on the Trust Green Plan and carbon footprint. The procurement department aims, where possible, to work closely with local suppliers and incorporate lifetime costing (see diagram below) and innovation into evaluation criteria, whilst still demonstrating value for money.



Focus areas

The Trust currently undertakes the following:

- Request all suppliers of large deliveries contracts with the local council for all domestic waste which is either zero to landfill or recycling
- Contracts for recycling of cooking oil, certain plastics, food waste, metal, wood and cardboard
- Has identified recycling champions in key areas around the Trust
- Ongoing contract with Warp It for the reallocation of non-clinical equipment across the Trust and community
- Contract with national auction house to reduce WEEE waste
- Confidential waste and paper waste recycling contract
- or projects take away all waste generated upon delivery of service/product
- A 5% evaluation around sustainability if relevant to the product being procured.



Focus areas

The aims over the next three years are:



- Build on our relationship with the local council to look at more areas of recycling such as tins, coffee grounds and glass
- Allocate points for staff to recycle in the smaller areas of the Trust
- Utilise Warp It with other providers such as the local council to expand on the reallocation of non-clinical equipment, reducing waste
- Work with fleet providers to move Trust vehicles to hybrid and electrical vehicles where and if the infrastructure allows
- Work in collaboration with the members of our Integrated Care System (ICS) to look at the carbon footprint across the region and scope more sustainable logistics operations
- Implement the pick and pack system in our theatres and day surgery unit to reduce waste in system and streamline stock ordering
- Incorporate the 10% evaluation criteria around social values which includes sustainability
- To work with suppliers to implement the Government's 'Taking Account of Carbon Reduction Plans' (PPN 06/21) <https://www.gov.uk/government/publications/procurement-policy-note-0621-taking-account-of-carbon-reduction-plans-in-the-procurement-of-major-government-contracts>. From April 2023 all suppliers with new contracts for goods, services, and/or works with an anticipated contract value above £5 million per annum, will be required to publish a carbon reduction plan for their direct emissions. From April 2024, the NHS will expand this requirement for all new contracts, irrespective of value
- From April 2022 adopt the **Government's Social Value Model** (PPN 06/20) (see link above) where all NHS tenders must include a minimum of 10% scoring criteria in all procurements to assess how suppliers will contribute to the NHS' net zero targets and social value in contract delivery.

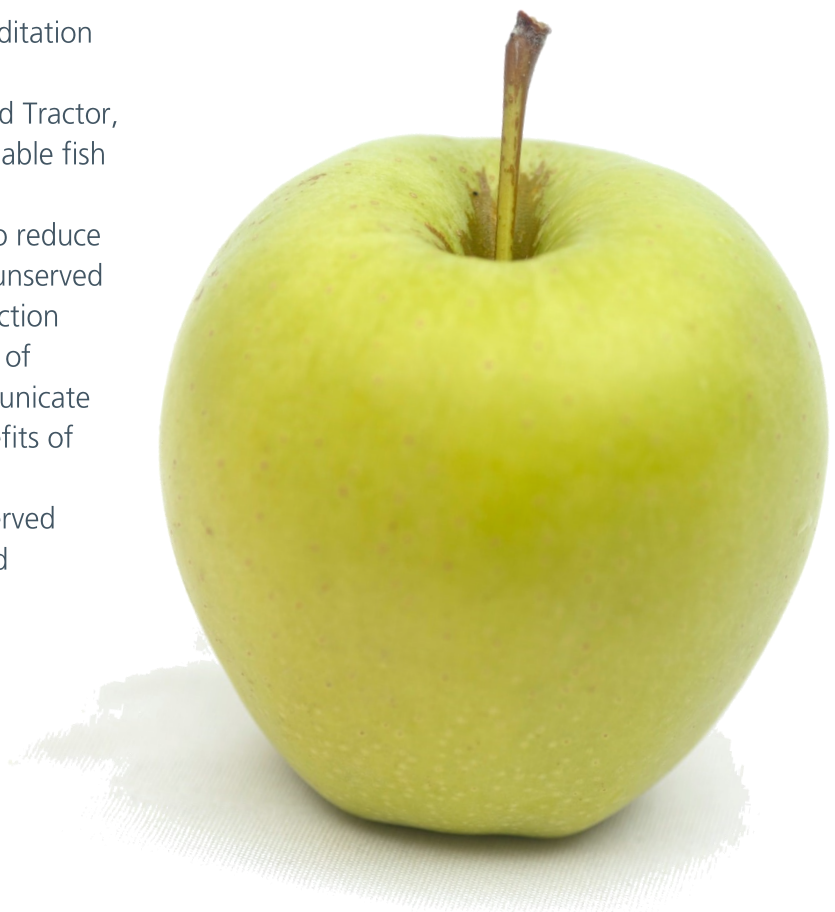
Food and nutrition

The Trust's in-house catering team offers a fresh cook plated meal service to patients and through two catering outlets to staff and visitors. This method of catering offers a lower waste output as routes to waste can be managed internally by the catering team. Areas of waste outside our direct control are jointly managed with the clinical teams alongside the dietetics department. Through the introduction of portion size and dietary analysis the department has reduced plate waste. However this could be improved further.

Of ultimate importance is the quality and nutritional value of the meals served and the department is continually working with others to improve this.

What do we want to achieve?

- We will achieve the NHS Plastics Pledge
- Continue to achieve and exceed the Government guidelines (e.g. Government Buying Standards)
- Maintain our external accreditation such as Food for Life (Soil Association) in regard to Red Tractor, dolphin-friendly and sustainable fish cities marks
- Continue to explore ways to reduce food waste with regard to unserved meals and from over-production
- Continue to reduce the use of processed foods and communicate the health and carbon benefits of diets with fewer of these
- Reduce the number of unserved meals, both for patients and overproduction within our catering outlets.



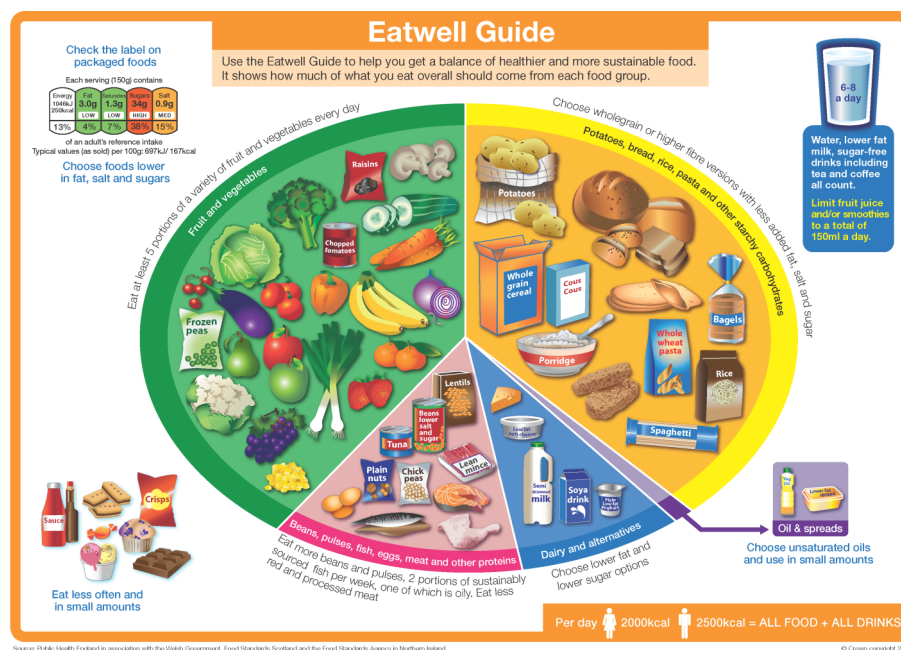
Focus areas

How will we achieve it?

- Review products available locally and increase use where possible
- Work with the health and wellbeing team.
- Source non-plastic alternatives to use that do not alter the safety and quality of food served
- Remove plastic cutlery from food outlets
- Review all catering contracts and work closely with the procurement department regarding supplies contracts
- Review food disposal systems appropriate for each site
- Ongoing unannounced food waste audits and working with individual wards to rectify any adverse trends
- Review menus to identify where alternatives to dairy products can be used
- Introduce more meat-free dishes and work with dietitians to review protein content of individual dishes
- Utilise resources such as the Eat Well plate to communicate clearly
- Work with wards to reduce unserved meals caused by discharges and uncommunicated movement of patients
- Work with the Nutritional Steering Group to identify ways of improving nutrition to patients and to assess portion sizes to best effect.

How will we measure it?

- Compliance with the NHS Hospital Food Review
- Ongoing compliance with the NHS Plastic Pledge
- Procurement reports on locally purchased produce
- Sales reports from food outlets
- Food waste reports.



Adaptation

Climate change brings new challenges to the Trust.

Examples in recent years include the effects of heatwaves, extreme temperatures and prolonged periods of cold, floods and droughts. Our Board approved plans address the potential need to adapt the delivery of the organisation's activities and infrastructure to climate change and adverse weather events. Events such as heatwaves, cold snaps and flooding are expected to increase as a result of climate change.



The Trust has a responsibility to ensure all current and future planning includes measures to address climate-induced hazards. The Trust's business continuity and emergency response plans for climate-induced incidents include such awareness, and the overarching command and control capability has a programme of training and exercising to reinforce this. In addition, all purchasing, transformation and improvement planning are to include the same requirement.

The existing works programme to deal with structural issues in the current hospital building are a challenge to adaptation planning for the near-future. Where we can, and judged against the greater risks we face, we will consider adaptation opportunities for current locations and systems. The future system planning for the new site (which includes the existing location) and services are being planned and developed concurrently. The Trust will therefore include adaptation for service resilience and business continuity as part of the future system, and proactively implement it as part of the design of the structure, services and capabilities. This adaptation will take into account such reports, specifications and requirements as are necessary, available and predicted at the key decision points.

Furthermore, Trust community service delivery locations, including Newmarket Community Hospital, are more likely to be susceptible to a wider range of climate impacts than the West Suffolk Hospital buildings and on-site services; this includes the movement of staff and patients. The planning requirements for off-site adaptation will also be included in the Trust's future plans and in any changes or improvements to off-site services.

Focus areas

We will:

1. By end of the financial year 2021/22, undertake iterative strategic Trust-wide risk assessments for current on- and off-site service delivery which takes account of current UK climate projections
2. As a result, and in the timescales necessary, define and implement coordinated tactical improvements to existing infrastructure and services
3. In accordance with the defined planning timeline, provide strategic objectives for future systems planning
4. Subsequently, proactively design operational resilience for the future hospital structure that will prevent re-design and nugatory infrastructure improvements at a later date. This will include:
 - Business continuity
 - Communications systems
 - Extreme weather impact prevention
 - Evacuation and lockdown
 - Fire prevention
 - Risk reduction
 - Efficiency in response resource use
 - Use of natural terrain and features for protection.

